

INDIANA STATE BOARD OF NURSING

**Met on
Thursday, January 16, 2014
at 8:30 a.m.
in the Auditorium of the
Indiana Government Center-South
302 West Washington Street
Indianapolis, Indiana 46204**

I. CALL TO ORDER AND ESTABLISHMENT OF QUORUM

8:30 a.m.

Dr. McIntosh, R.N., Ed.D, President of the Indiana State Board of Nursing, called the meeting to order at 8:30 a.m. and established a quorum in accordance with IC § 25-23-1-5(b).

Board Members Present:

Constance McIntosh, R.N., Ph.D., President
Marcia Laux, R.N., Vice-President
Karen Dolk, R.N., Secretary
Jerry Burghduff, L.P.N.
Kim Cooper, R.N.
Natalie Hall, R.N.
Lynda Narwold, R.N.
Holly Presley, L.P.N.
Anne Ogle, Consumer Member

Board Members Absent: None

II. ADOPTION OF THE AGENDA

A motion was made and seconded to adopt the agenda as amended. Narwold/Ogle, 9-0-0, motion carries

III. ADOPTION OF THE MINUTES FROM THE DECEMBER 12, 2013 MEETING OF THE BOARD

A motion was made and seconded to adopt the minutes from the December 2013 board meeting. Cooper/Laux, 9-0-0, motion carries

IV. INDIANA STATE NURSES ASSISTANCE PROGRAM

Chuck Lindquist, Program Director, appeared on behalf of ISNAP. ISNAP has completed recording of a presentation which is now available on "YouTube" and will be available shortly on the ISNAP website. The fourth quarter INSPECT reports for participants demonstrated that 15% of participants had some type activity on the INSPECT report. Four licensees had RMA's extended; 3 licensees were issued an OTSC or closed out of ISNAP. The primary drug of choice during this audit was hydrocodone. ISNAP reports 105 intakes in process at this point in time. Ms. Ogle asked about the INSPECT report regarding "the majority" being cited and valid prescriptions. Ms. Ogle suggested looking at 100% as having valid prescriptions if that is the case and fleshing out the exact number on the next quarterly report. Mr. Lindquist agreed with this change in terminology.

V. EDUCATION

A. Medtech College Indianapolis Site Visit

Ms. Hall reported on the Indianapolis campus visit. The site visit was unannounced and included the following findings:

1. NCLEX scores have not been above 80% since the program began for either the ASN or PN programs;
2. Ms. Hall reviewed the faculty files with some transcripts missing.
3. The faculty interviews brought forth concerns and the faculty appeared to be very happy to see the site visitors and to be able to express their frustrations with the administration. Faculty reported the following to Ms. Hall:
 - A. Student handbook policies were not followed in a consistent manner. One example includes faculty being asked to give extra credit to aid students in passing.
 - B. Faculty are working up to 40 contact hours per week and felt they had no power in decision making regarding the nursing program.
 - C. Faculty was concerned about changes without their knowledge or consultation and being told they had to teach in a new program.
 - D. Several faculty members indicated they attend a nursing review board with a purpose to prescreen admissions and they were frustrated because their recommendations were not carried out.

- E. Faculty had no input into the enrollment process including the TEAS scores with decisions being made by administration. During interviews with Ms. Hall, faculty could not provide exact TEAS cutoff scores for admissions.
- F. Faculty reported not being able to hold office hours due to the expectations for contact hours.

Ms. Hall reported that faculty seemed sincere in their desire for a quality program but did not feel supported by administration.

4. Ms. Hall interviewed the Program Director (Ms. London) and Assistant Program Director and reported the following:
 - A. Ms. Hall discussed the faculty inconsistencies and both the PD and APD did not feel it was accurate.
 - B. However, later in the day Ms. London indicated she could not see a form and her name was on the form as signing it.
 - C. Ms. Hall asked for feedback on below NCLEX scores and both reported they did not feel students were ready for the NCLEX.
 - D. Ms. Hall asked about policy changes and they both indicated the retake policy was one example.
 - E. File audits contained inconsistencies and questions about students who seemed to be in the program longer than 150% could not be answered.
5. Ms. Hall also interviewed other front office faculty (academic dean and Mr. Raspberry, admissions representative) who could not comment on NCLEX. Mr. Raspberry gave the TEAS scores but could not explain why TEAS scores were lower than this. The Academic Dean could give very little input and could not respond to many questions, he started in September 2013.
6. Ms. Cooper and Ms. Kiefner Crawford interviewed Ms. Trout, the registrar, and audited student files. Ms. Trout indicated filing was behind but when asked how far behind it was approximately two months. Student files had limited information regarding student performance as students had two separate files on two separate floors. It was unclear how the files in the registrar and the performance were integrated together.
7. Student files contained academic issues with write-ups and averaging of grades not seeming to be done in a consistent manner.
8. The site visitors audited student files that were related to a "bridge" program begun in 2013 which contained employer verification program for the admitted students LPN licensure status. One student file in the "bridge" program contained information regarding transfer of credit despite the fact that the ADON had previously indicated to the site visitors that no transfer of credit was allowed in this program.
9. Student files contained multiple admission letters with different dates. One audited student file contained no transcript or official GED verification.
10. Ms. Cooper and Ms. Kiefner Crawford interviewed multiple students. Students expressed the following concerns:
 - A. Constant change of policies and lack of information to students;
 - B. Students were unaware of the NCLEX pass rates for the campus;
 - C. Faculty were inconsistent in their knowledge level;
 - D. Students were told they would be "grandfathered" into the National Accreditation process;
 - E. Students in clinicals were treated differently with no explained reason. Some students participation was limited to simulation lab vs. other students who were allowed to travel to outside clinical partners;
 - F. Admission reps told students their credits were transferrable to other programs. Site visitors asked multiple times for articulation agreements and were told that none exist;
 - G. All students except one indicated they would not attend the program if they had to do it all over again and they would not recommend the program to family or friends;
 - H. Staff are not available for office hours;
 - I. Nine of the ten "bridge" program members received their education in Practical Nursing from MedTech. MedTech grads indicated they received an email regarding the "bridge" program in the Spring of 2013. The original time period called for 12 months total and on the first day of class students were told the program would be 15 month in length;
 - J. Students in the "bridge" program were told they would receive credit for their Practical Nursing work experience in the community and had to fill out forms with employer information. This form was verified in at least one student's files;
 - K. Students in the "bridge" program felt there was duplication of course work and felt as though the same books and assignments were being used for the "bridge" program as in their Practical Nursing program;
11. No one on staff could produce marketing materials for the "bridge" program despite multiple requests;
12. Emails were later received by the site visitors from current "bridge" program students which indicated the "bridge" program was being marketed as early as May 2013 without the Indiana State Board of Nursing's approval;
13. Ms. London provided emails from June 2013 in which Ms. Crawford clearly indicated that MedTech would have to receive approval from the Indiana State Board of Nursing before starting the "bridge" program;
14. No documentation exists which demonstrates that MedTech sought approval from the ISBN for the evening programs (which doubled their admissions) in July 2009;
15. Other concerns found by the site visitors:
 - A. Faculty minutes were in bullet point format;
 - B. Decisions for the nursing program appeared to be made by administration and not by nursing faculty;
 - C. Organizational chart was outdated;

- D. Current course material review found pharmacology course was for allied health professionals;
 - E. Exams lack rigor/ NCLEX format is not in the exams as they may be “fill in the blank” or true/false questions; very limited use of alternate format style questions, etc.
16. Approximately two days after the site visit Ms. Crawford received the resignation of Ms. London. At some point, that resignation was later rescinded.
 17. Ms. Cooper indicated the most troubling part was that students seemed as relieved to have us there as the faculty was. Ms. Cooper understands why students were confused due to lots of policies, paperwork, etc.
 18. Ms. Hall indicated this is a report of what was uncovered as wrong in one day’s time only and that there is a lot of improvement needed.
 19. Ms. Cooper indicated that staff said there was no marketing of a bridge program, etc. and there was no email. However, those same students provided copies of the email.
 20. Ms. Cooper also indicated were students being given credit for work and were told “NO” and was asked why employment was verified and were told there was no such form at that time. There was inconsistency in the message being given to students and the answers being given to site visitors.

MedTech was represented by Myra Selby and presented the following information:

1. Ms. London spoke and wanted to clarify that her signature was not on the verification of scope of practice form;
2. Ms. London also wanted to point out that she maintains her position that if an email existed for the “bridge” program it was not seen by her and not sent out by herself as the PD;
3. Ms. Cooper asked if there were other things that went out without the PD’s approval and Ms. London indicated that her expectation is that this is not acceptable. The condition of her remaining in the position is that Nursing will have full support and knowledge of what is going on;
4. The marketing director in corporate compliance could not produce the emails marketing the “bridge” program either;
5. Ms. Laux asked how cohorts were tracked and Ms. London indicated that student success navigators are tracking this and indicated it is an area of improvement and needs to be more robust;
6. Ms. London indicates she has weekly meetings with student success navigators at this time and that information is presented to faculty;
7. Ms. Laux had a concern regarding students failing all exams but passing the class because of other things- how have they resolved that and do they have a policy- Ms. London indicated in May 2012 faculty approved a new grading scale. Ms. Laux indicated the grading scale has nothing to do with her question; and clarified whether the percentage of exams was weighted for the passing grade, method of evaluation and rigor of class, etc. Ms. London indicated currently 70% of a grade comes from exams, 10% of a grade comes from activities and 20% of a grade comes from final exam. Ms. Cooper indicated again she reviewed exams after the passage of the May 2012 policy and that exams still lacked rigor for NCLEX.
8. Ms. Cooper indicated that to call some tests “exams” is a stretch. Ms. London agreed with that statement and said that MedTech needs to improve on item writing as well.
9. Dr. McIntosh asked if anyone has been to an NCLEX meeting. Ms. London indicated that herself and two faculty attended NCLEX in September 2013. Ms. London reviewed exams beginning with the Fall quarter of 2013. As of October 7th, 2013, all faculty has to include NCLEX style questions on their exams. MedTech is also looking at mocking the process for NCLEX to deal with student test anxiety.
10. Ms. Laux asked how many of MedTech’s faculty are nationally certified in their area. Ms. London indicated that none are. Ms. Cooper asked about the number of didactic faculty presently at MedTech. Ms. London indicated that there are 23 full time RN faculty and Ms. London only teaches “as needed.” Ms. Cooper expressed concerns that the PD did not realize that the exams should be “based” on NCLEX, not just “include” NCLEX.
11. Ms. Hall indicated she has an issue with Ms. London saying that she is “holding the faculty accountable”. As there is no wonder faculty don’t have time to update their exams or learn NCLEX style questions with the number of contact hours they have been required to work. Ms. Hall indicated that faculty have to be given the time to jump onboard and assist.
12. Dr. McIntosh indicates she was one of the survey visitors for initial accreditation because at that time they seemed to have it all together and the current PD at the time indicated there is a plethora of administration that can help with these items. Dr. McIntosh indicated they have a huge corporate office but there is no assistance with test plans, admissions, advising, etc. Dr. McIntosh asked Ms. London if this campus gets the help from corporate administration and the corporate office that they need and Ms. London indicated “up until this moment no.”
13. Ms. Ogle asked Ms. London if she has reviewed of the recommendations made by the site visitors and whether MedTech can abide by them. Ms. London has reviewed all of the recommendations and agrees that the program could meet all of the recommendations.
14. Ms. Cooper asked about criminal background checks and a full fledged policy to manage positive drug testing or positive criminal backgrounds on application. Ms. London said there is a policy for who needs to be seen with a positive criminal background record. Ms. Cooper said that the policy is very subjective and it did not appear to be a partnership with Medtech and the clinical partners. Ms. London agreed and said that one faculty member is currently drafting a policy to share with the faculty at their next faculty meeting. **Ms. Cooper wants to see the policy and the development of the policy so that it is not just one person making the decision. Dr. McIntosh indicated they also need to consider if more than one background check will need to be done and if they have to self disclose arrests during the program. Dr. McIntosh wants to know what happens if a student self-discloses a criminal background.**

15. Ms. Cooper also indicated that on the TEAS exam students who did not have a passing score were not admitted, if you review the ATI report and the TEAS test the student with 41% on TEAS has a basic score and has missed more than half of the questions and is still admitted to MedTech's program. **Ms. Cooper would like to see discussion brought back about admission requirements as this is very low.**
16. Ms. Cooper asked for the rationale on making the decision as to why the cutoff score is 41% (PN) and 52% (ASN) for the TEAS. Ms. London said that the individuals responsible for that policy are no longer with the MedTech program.
17. **Ms. Cooper also wants feedback on the interview process at the time of admission.** Ms. Cooper had a mix of interview results within a cohort which was all admitted at the same time. Some students reported being interviewed, some students showed up and interview were cancelled with no notice, etc. The Board needs a clear understanding of the admission plan at this time.
18. Ms. London indicated they have admitted no additional students after 1/1/14 and the bridge program has ceased.

Board Action: A motion was made and seconded to accept the site visitors' recommendations as laid out in the report with the additions in bold in the minutes. Ogle/Laux, 8-0-0, motion carries

Note: The site visitors recommendations in the report are as follows:

- During the site visit, it became clear that the focus of the Nursing program is not the production of prepared and qualified Nursing graduates, but is focused more on the quantity of students enrolled and the fiscal impact of that number.
- Suspension of admissions for the "bridge" program and evening cohorts for the traditional PN and ASN programs until proper accreditation measures have been approved by the Board;
- No new additional cohorts shall begin classes after January 1, 2014 in the "bridge" program or the evening PN or ASN programs until proper accreditation is received from the Board;
- Monthly appearances by the Program Director and corporate representatives beginning in January 2014;
- All programs placed on conditional accreditation with a systematic plan of correction submitted with the response to this report;
- Provision of a complete listing of faculty members classified by teaching assignment (ASN vs PN), degree type, current course load, experiential qualifications for teaching assignment.
- Provision of a complete and accurate listing of current clinical affiliates for this particular campus defining the course each site is utilized for.
- Monthly written reports received by the 5th of each month which address the following:
 - Changes in personnel; Updated organizational chart;
 - Changes in admission standards;
 - Changes in Nursing program policies and procedures;
 - In order to obtain the faculty's perspective independent from Administrative staff, a report which is placed on letterhead and in a sealed envelope, detailing the progress made in the program;
 - Development of anonymous student surveys, which are approved by the Board and conducted on a monthly, which indicate their satisfaction with the program at all levels including faculty, policies and procedures, clinical sites, student services, etc. This must include an area where students can provide written feedback. A roster must be submitted so that the number of submitted student surveys and the number of student surveys equal the same number. The process for distribution and submission of the surveys must be presented and approved to the Board.
 - Monthly meeting minutes highlighting shared governance, clear delineation of responsibilities, and education concerning program activities.
- Faculty need education regarding the policies of the nursing program, requirements of the Indiana State Board of Nursing for programs of nursing, and current and past NCLEX pass rates for program graduates.
- Plan for advisement of seated program students and prospective students needs to be developed and articulated to the students, faculty and college personnel.
- Faculty need to be involved in the decisions for the Nursing programs including policies and procedures, admission protocols, etc.
- Faculty contact hours appear to be very high given the faculty to student ratio and the concerns for high faculty turnover. The Program needs to evaluate this and determine whether adjustments are required. This information needs to be included in the systematic plan of correction.
- There appears to be a discrepancy in how members of cohorts are treated in regards to how clinicals are carried out. The systematic plan of correction needs to include detailed information about the simulation experience is being provided (other than videos) and how students will be treated equally in regards to outside clinical experiences.

Board Action: A motion was made and seconded regarding giving MedTech Indianapolis a definite amount of time to carry out these recommendations. The organizational/structure piece must be completed within six (6) months, i.e. by June 16, 2014. The program will have with one full year to improve NCLEX scores, i.e. by January 2015. McIntosh/Narwold 8-0-0, motion carries

B. MedTech College Greenwood Site Visit

Ms. Hall and Ms. Cooper reported the following regarding the MedTech Greenwood campus site visit:

1. This visit was made on 12/4/13 and was unannounced in response to an anonymous letter from a faculty member highlighting concerns re: presence of the bridge program. The Board has also taken notice of the turnover in the Dean position at this campus, as three separate Deans have been named in 2013 alone.
2. Concerns about NCLEX scores- all scores fell below pass rate requirements for ISBN;
3. Site visitors reviewed the organization chart, faculty minutes, student and faculty files, and their unsuccessful NLNAC site visit attempt.
4. Ms. Cooper indicated that no one appeared to be in charge upon the site visitors' arrival. The site visitors waited nearly an hour for someone to take control. They were told the Program Director was ill and no one appeared to be assisting in her absence. The only person who appeared to know where to find things was the campus registrar, who is not a nurse.
5. Site visitors were told there are 360 students enrolled with 10-15 full time and 6 + part time faculty, which is heavier towards part time ratio and out of compliance with the ISBN rules.
6. Ms. Zanders, the Program Director, arrived at some point during the site visit and was interviewed by the site visitors. The site visitors felt that she could not articulate information from ISBN statutes and rules re: programs.
7. The site visitors have concerns about clinical site availability especially in the area of pediatrics which was meeting on campus for the entire rotation. The campus explanation was that their original site had an RSV outbreak but the campus had no back-up plan in place.
8. The explanation given for the campus' below standard NCLEX scores was faculty turnover, no orientation for new faculty, turnover in admissions dept and Nursing not being involved in the admissions process.
9. The site visitors met with faculty who were mostly newly employed as of the Summer of 2013. These individuals could not articulate current pass rates for the campus. One individual indicated that he could contact corporate office and get a snapshot of the information needed. Also, their admission process/requirements were not reported in a consistent manner by anyone.
10. One staff member was asked how the campus calculates nursing job placements as the number reported was higher than the campus' NCLEX pass rate. This individual indicated that if a graduate takes any position it is counted as a successful placement. The example was given that a student could successfully graduate, take the NCLEX and fail, obtain a position as a CNA and the campus would still count that as a successful placement. Obviously, the site visitors have problems with this method as it is not an accurate measure for successful Nursing job placement and could be misleading to consumers.
11. TEAS scores for admissions were inconsistent at this campus as well as students files contained lower TEAS scores than the stated cut rate.
12. Students interviewed indicated they were told that pass rates were "around 80%" which is inconsistent with the data kept by the Board.
13. Seven ASN students were present for pediatric clinicals in a simulation lab at the campus and it was reported that the entire clinical rotation was in the lab. Students were talking and doing textbook work and were observed interacting with the instructor's children. A small child was located in the lab along with a baby in a push stroller.
14. Students discussed clinical experiences but no acute care experiences clinicals were made available for them.
15. Students were asked about ATI and reported inconsistent use between faculty and courses.
16. Students reported that missed clinicals were the responsibility of students and were capped to 10 students. The site visitors expressed concerns about how students could make up dates if all clinicals are already full.
17. Faculty interviewed reported 38-41 teaching contact hours per week not including office or advisory hours.
18. Faculty is teaching multiple sections of the same course with different starts.
19. Faculty reported student handbooks are not consistently followed and the faculty has no decisions or input into the Nursing program.
20. Faculty reported being forced to teach in the "bridge" program with little to no knowledge.
21. Faculty feel that they have no feedback with the enrollment process- that is left entirely to administration.
22. No faculty member could give the site visitors the cut off for TEAS scores for admissions into the Nursing programs.
23. Faculty feel unsuccessful due to lack of support in administration.
24. The Program Director position has turned over a number of times in the last year which leads to instability in the Nursing program.
25. Faculty had no knowledge/education about NCLEX test writing, etc. Faculty could not tell the NCLEX pass rates for their scores but reported being told their scores were "around 80%".
26. Student success navigator- confusion about the position between the SN and the PD as one reported being involved from the beginning of the student experience and the other reporting they do resume/career development only.
27. Curriculum and testing lacks adequate rigor with no leveling from semester to semester, no NCLEX formatting, etc.
28. Course syllabi were inconsistent and do not list office hours and contain different versions of ATI for students admitted in the same cohort.
29. Student textbooks appear to be dated as newer versions exist than are listed on the syllabi.

30. Significant concerns with faculty minutes as they do not show discussion, or shared governance.
31. No student participation is contained within faculty minutes.
32. Information was not organized into "old business", "new business", NCLEX scores, etc.
33. Affiliation agreements- volume appears to be large volume of clinical sites but agreements are for the entire corporation and not just this campus, agreements are outdated, unsigned, etc.
34. The Organization chart is out of date.
35. Assessment of student lab room- student instructors were present and working on linen changes. Sharp containers were on a ledge area with dirty items in them; lab area only had two stations available for students.
36. Ms. Hall added that the site visitors were taken to nursing AA and were told the Program Director was out ill. The site visitors then asked for ADON and she was not there. They then asked for campus president who was not there that day and it was frustrating that there was no one overseeing the program.
37. Ms. Narwold asked about NLNAC report and attempt to achieve accreditation for both the ASN and PN program but they were both denied by NLNAC. Ms. Narwold asked whether any recommendations have been addressed from the time of that report to present- not that the site visitors could see in the one day visit.

MedTech- Greenwood campus was represented by Myra Selby and reported the following:

1. In regards to pediatric clinical that was observed-the Program Director Ms. Zander reported that students were in the lab for that day but not for the entire clinical experience as students could not get to "observation sites". Ms. Cooper asked about the back up plan and her concern was that there was no back up.
2. Ms. Laux asked if they have a simulation lab- they have a clinical coordinator but the faculty themselves run the simulations but they do not have a high fidelity simulation lab and most of their mannequins do not work.
3. Dr. McIntosh asked about the clinical coordinator- the qualifications are RN, MSN and she schedules all clinical site visits, takes care of labs and supplies, makes sure simulators are working for 257 ASN students. That person was not there the day of the site visit and teaches a class as well. The Board expressed that that is too much work for one person.
4. The Program Director indicated she is in the process of assessing the Nursing program and that she was "totally out of it" when the site visitors came.
5. The PD indicated contact hours are decreased for faculty to work on different things. Ms. Hall indicated this has been an issue for years and it took an unannounced site visit to complete these changes.
6. Dr. McIntosh asked how often corporate staff come to the campus. Corporate representatives present indicated that they come to conference calls virtually. One corporate person had been with the company five years and has been to the Greenwood campus four times- the last visit was February/March 2013 but mostly involved training for Program Director in the medical assistant and billing programs. The corporate representative indicated that she was present 3 or 4 days but had limited time with the Nursing program. That same individual has been to the Indianapolis campus approximately 5 times and to the Fort Wayne campus 3 times. They have no RN's at corporate level besides this individual. The corporate level representative RN is an associate-level only and has a bachelor's degree in legal studies. The Board express serious concerns at having an ASN level educated Nurse at the corporate level.
7. Dr. McIntosh indicated the faculty turnover is very high and that there is concern about who is hiring at this level.
8. Ms. Cooper asked about faculty contact hours and Ms. Zander indicated that faculty contact hours have been reduced. Ms. Cooper asked how the campus reduced contact hours with the same number of students in place. Ms. Zander indicated she has hired two new faculty since the site visit in December 2013. She reports 12 full time faculty and 6 adjunct faculty for the campus at this time. Faculty has 28 contact hours at this point. The Program Director is still working on this issue.
9. A Board member asked how many applications were received for the clinical faculty openings. Ms. Zander indicated approximately 10 applications were received. Ms. Zander reported that all new hires are educated at an MSN degree level. Orientation is ongoing at this time. There are experienced instructors working with the new instructor.
10. Ms. Cooper asked about SN position and the qualifications of the individual. The current success navigator is not BSN prepared.

Board Action: A motion was made and seconded to accept the recommendations given. Ms. Narwold indicated that the campus needs to involve the faculty in making decisions regarding the Nursing program. The organizational/structure piece must be completed within six (6) months, i.e. by June 16, 2014. The program will have with one full year to improve NCLEX scores, i.e. by January 2015. Narwold/Laux, 8-0-0, motion carries

Note: The site visitors' recommendations in the December 2013 site visit report are as follows:

- During the site visit, it became clear that the focus of the Nursing program is not the production of prepared and qualified Nursing graduates, but is focused more on the quantity of students enrolled and the fiscal impact of that number.
- Suspension of admissions for the "bridge" program and evening cohorts for the traditional PN and ASN programs until proper accreditation measures have been approved by the Board;
- No new additional cohorts shall begin classes after January 1, 2014 in the "bridge" program or the evening PN or ASN programs until proper accreditation is received from the Board;
- Monthly appearances by the Program Director and corporate representatives beginning in January 2014;

- All programs on conditional accreditation with a systematic plan of correction submitted with the response to this report;
- Provision of a complete listing of faculty members classified by teaching assignment (ASN vs PN), degree type, current course load, experiential qualifications for teaching assignment.
- Provision of a complete and accurate listing of current clinical affiliates for this particular campus defining the course each site is utilized for.
- Monthly written reports received by the 5th of each month which address the following:
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 - In order to obtain the faculty's perspective independent from Administrative staff, a report which is placed on letterhead and in a sealed envelope, detailing the progress made in the program;
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- Plan for advisement of seated program students and prospective students needs to be developed and articulated to the students, faculty and college personnel.
- Faculty need to be involved in the decisions for the Nursing programs including policies and procedures, admission protocols, etc.
- Faculty contact hours appear to be very high given the faculty to student ratio and the concerns for high faculty turnover. The Program needs to evaluate this and determine whether adjustments are required. This information needs to be included in the systematic plan of correction.
- Faculty hours need to be posted and include periods available for student advisement.
- There appears to be a discrepancy in how members of cohorts are treated in regards to how clinicals are carried out. The systematic plan of correction needs to include detailed information about the simulation experience is being provided (other than videos) and how students will be treated equally in regards to outside clinical experiences.

C. FYI Only- Vincennes University names Alice Hildenbrand, MSN, RN Interim Chair of the RN to BSN Completion Program and Kelly Hartwick, MSN, RN Interim Chair of the Jasper Nursing Department effective November 13, 2013.

VI. DISCUSSION

A. ISNA Report- Presentation of Strategic Plan (Gingy Harshy-Meade)

Ms. Harshy-Meade was unable to attend the January 2014 Board meeting but did email a strategic plan the evening before the meeting which was given to Board members. Ms. Harshy-Meade will attend the March 2014 Board meeting for additional discussion and review.

B. Midwifery License Inquiry for Jemima Chijioke, License No. 09000184A

The Board discussed the issuance of a license to this individual in 2009 without proper credentials. A motion was made and seconded to send a denial letter to the individual and to request that the individual reapply when the proper credentials are met. McIntosh/Cooper- 5-0-0, motion carries

C. Judicial Review Status- Virginia Davis

Mr. White reported that an opinion was issued as "not for publication" in favor of the Board. The Office of the Attorney General has filed a request asking for the decision to be published so that it may be properly cited as legal precedence. That request is outstanding.

D. Election of Officers for 2014

The Board elected the following officers for 2014:

A nomination was made and seconded to elect Dr. McIntosh as President of the Board. A vote carried the motion. Cooper/Laux, 7-0-0, motion carries

A nomination was made and seconded to elect Ms. Hall as Vice-President of the Board. A vote carried the motion. Laux/Cooper, 8-0-0, motion carries

A nomination was made and seconded to elect Ms. Presley as Secretary of the Board. A vote carried the motion. Cooper/Laux, 8-0-0, motion carries

VIII. BOARD DIRECTOR REPORT

Ms. Kiefner Crawford reported the following:

- Toni Herron has been hired as the Board's Education Compliance Officer. She is in orientation at this time.
- A copy of the NCSBN environmental scan for 2013-2014 was distributed to all Board members.
- The Board needs to determine whether anyone besides Ms. Crawford can attend the National Council of State Boards of Nursing mid-year meeting in Kansas City, Missouri from March 8-10, 2014.
- Ms. Kiefner Crawford and Dr. McIntosh are working on a submission to the Journal of Nursing Regulation with Indiana Center for Nursing Director Kim Harper regarding the collaborative efforts of the Board and the Center to improve Nursing practice in Indiana.
- The Salute to Nurses selection dinner will be held on February 19, 2014.
- An update was given regarding attendance at the Access to Care meetings hosted by the Indiana Center for Nursing.

VIII. PERSONAL APPEARANCES

8:45am

PERSONAL APPEARANCES

8:45am

Board Action: A motion was made and seconded to approve all personal appearance recommendations made by ALJ Dolk and ALJ Burghdoff on this date. McIntosh/Presley, 7-0-0, motion carries

A. Appearances by Applicants for Licensure

1. Tamatha Kirby RN Exam 7 Fails/ Grad Date 2002

Ms. Kirby appeared for her personal appearance regarding her application for licensure. She has taken the test 7 times. She is now taking the ATI preparation course. She graduated from nursing school in 2002. Ms. Dolk recommends that once the applicant provides documentation of a 95% personal probability of passing the NCLEX she will be allowed to test. Upon successful passage of the NCLEX, the license is to be issued free and clear.

2. Christin Rethlake RN Exam CBC Hit/ Positive Response

Ms. Rethlake appeared for her personal appearance regarding her application for licensure. In April 2012, she was at a party and was arrested for minor consumption. Currently, she reports drinking once a month, if that. She is currently working as a technician and has no employment issues. Ms. Dolk recommends that the applicant be allowed to test with the license to be issued free and clear upon successful passage of the NCLEX.

3. Bridget Stark RN Exam Positive Response

Ms. Stark appeared for her personal appearance regarding her application for licensure. She reported an incident where she had a BAC of .08 and was issued a citation. Currently, she reports drinking once a week, if that. Ms. Dolk recommends that the applicant be allowed to test and her license is to be issued free and clear upon successful passage of the NCLEX.

4. Brandon Williams RN Exam CBC Hit/ Positive Response

Mr. Williams appeared for his personal appearance regarding his application for licensure. In 2009, he was arrested in Indiana for two outstanding warrants and intimidation of an officer. He was placed in the Marion County jail for 14 days. He indicates that the outstanding warrants were not his as he is a victim of identity theft. In an unrelated incident in 2012, Mr. Williams was pulled over for speeding. A search of the car revealed a bag containing what the officer believed was marijuana. Mr. Williams was not charged in this matter. Ms. Dolk recommends that the applicant be allowed to test and his license is to be issued free and clear upon successful passage of the NCLEX.

5. Kayci Winiger RN Exam CBC Hit/ Positive Response

Ms. Winiger appeared for her personal appearance regarding her application for licensure. In October 2013, she received a DUI. She reports that she had been drinking beer for a few hours. Her BAC was 0.15. She spent the night in jail. She is on criminal probation until December 16, 2014 and is participating in a deferred sentence program. She needs to have an ISNAP evaluation. Ms. Dolk recommends that the applicant is allowed to test and that, upon successful passage of the NCLEX, her license is issued on probation for the length of RMA or criminal probation, whichever is longer.

6. Ashton Huston LPN Exam CBC Hit/ Positive Response

Ms. Huston appeared for her personal appearance regarding her application for licensure. She was arrested in December 2012, on a warrant for failure to appear. In 2011, she was charged with falsifying information for using a friend's id to get into a bar. She was not drinking at the bar. She entered into a criminal diversion program. Her criminal attorney told her if she paid her fine she would not need to appear for court. She paid the fine six days after its due date and was not aware that a

warrant was issued. Ms. Dolk recommends that the applicant be allowed to test and that, upon successful completion of the NCLEX, her license is to be issued free and clear.

B. Appearances by Applicants for Renewal

1. Kaitlin Shave RN Renewal Positive Response

Ms. Shave did not appear for her personal appearance; but attorney Latoya Wright appeared on her behalf. Ms. Shave is in the military and was caught diverting. She is currently in treatment at Fort Gordon. She is enrolled with ISNAP and is currently not practicing. Ms. Dolk recommends that the license be renewed on probation for the length of the ISNAP RMA.

2. June Simons RN Renewal Positive Response

Ms. Simons did not appear for her personal appearance regarding her application for renewal. Ms. Dolk recommends that the request for renewal be denied.

3. Barbara Merritt RN Renewal Positive Response

Ms. Merritt appeared for her personal appearance regarding her application for renewal. She was demoted for arguing with a doctor for mistreating a staff member. She was asked to step down from her management position. She is currently a staff nurse. She reports no other employment issues. Ms. Dolk recommends that the license be renewed free and clear.

4. Janice Brett RN Renewal Positive Response

Ms. Brett did not appear for her personal appearance regarding her application for renewal. Ms. Dolk recommends that the request for renewal be denied.

5. Dana Schultz RN Renewal Positive Response

Ms. Schultz appeared for her personal appearance regarding her application for renewal. She received a DUI in June 2013 with a BAC of .108. She is currently enrolled in a diversion program in Kentucky and reports that her Kentucky license is active. She has a criminal court date of July 31, 2014 to expunge the record. She is not practicing in Indiana. She reports that she currently drinks one glass of wine a week. She has been in contact with ISNAP. Ms. Dolk recommends her license be renewed free and clear.

6. Yvette Harris RN Renewal Positive Response

Ms. Harris appeared for her personal appearance regarding her application for renewal. She has been a nurse in 24 years. She was a direct biller for the state of Wisconsin. She was working with a co-worker on a case for approximately 10 months. Six months after she had finished that case, the patient contacted Ms. Harris demanding money. Ms. Harris indicates that the patient wanted money or she would call the state and say she didn't know these nurses. Both Ms. Harris and her co-worker obtained counsel and the matter went to trial. During the course of the trial, billing found a duplication of 8 hours of services that equaled \$300.00. Therefore, in Wisconsin she can no longer be in private practice as a nurse. Ms. Harris indicates that she is appealing this issue. Ms. Dolk recommends that the license remain valid to practice and that the matter be referred to the Office of the Attorney General for investigation.

7. Jacqueline Gannon RN Renewal Positive Response

Ms. Gannon appeared for her personal appearance regarding her application for renewal. She reports an OWI in April 2012 related to a break up. Her reported BAC was 0.27. She went to jail over night and eventually her criminal matter was resolved by spending four days in jail and being on criminal probation for a year. At the time she was recommended into outpatient treatment but she did not follow the recommendation. In October of 2012, she self admitted herself to the hospital for detoxification. She currently does not drink. Her sobriety date is October 7, 2012. She has an AA sponsor. She is also a sponsor for 2 other people. She has been working since March 2013, as a nurse with no issues. Ms. Dolk recommends that she contact ISNAP and that her license be renewed on probation for the length of her RMA.

8. Daniel Keesling RN Renewal Positive Response

Mr. Keesling appeared for his personal appearance regarding his application for renewal. He has been in full compliance with ISNAP since 2012. His Ohio and Kentucky licenses are currently suspended. Once he has completed ISNAP his RMA will be transferred to the KARE program in Kentucky. He knows there is also an unresolved issue with his Illinois licensee but does not know the status. He is in the process of being charged with theft of narcotics in Ohio with the potential for a felony charge. Ms. Dolk recommends that his license be renewed on suspension for the sole purpose of participating in ISNAP until his Ohio matter is cleared up and Mr. Keesling agrees.

9. Jennifer Criddle RN Renewal Positive Response

Ms. Criddle appeared for her personal appearance regarding her application for renewal. She was terminated from St. Joseph Hospital after being employed there for 10 years. She had been taking too long for charting and stayed over to get the charting completed. She had been working night shift but that position was eliminated and went to days. She was ultimately terminated for time management. She is currently working and the only issue is with time management as she still stays over shift to get charting done. She has not had any verbal warnings about it. Ms. Dolk recommends that the license be renewed free and clear.

10. Paula Norman RN Renewal Positive Response

Ms. Norman appeared for her personal appearance regarding her application for renewal. She was convicted of a misdemeanor in Kentucky in June 2013 for disorderly conduct regarding a domestic issue with her ex-husband. The police were called and she was arrested since she struck her ex-husband. There have been no other issues. The Kentucky Board is aware of the issue and her license there is in good standing. Ms. Dolk recommends her license be renewed free and clear.

11. Melissa O'Haver RN Renewal Positive Response

Ms. O'Haver appeared for her personal appearance regarding her application for renewal with attorney John Fierek. In the spring of 2012 she was at a friend's birthday party, drank then received a DUI. Her BAC was 0.09. She was placed on criminal probation for a year, which has now been successfully completed. She does not currently drink. Ms. Dolk recommends her license be renewed free and clear.

12. Anna Hutcheson RN Renewal Positive Response

Ms. Hutcheson appeared for her personal appearance regarding her application for renewal. In 2012, she was terminated from Floyd County Hospital due to issues with procedures. She asked a charge nurse for help with a morphine pump and reports another issue where she asked another nurse to help transport a patient. She also needed help starting IVs. She asked for extra training on this but never received it. She is currently employed and there have been no issues with skills or procedures. Ms. Dolk recommends that her license be renewed on probation for six months active practice with quarterly employer reports.

13. Michelle Gregory RN Renewal Positive Response

Ms. Gregory appeared for her personal appearance regarding her application for renewal. She reports pending criminal charges for theft and possession of narcotics. She is currently in a criminal deferral program with 10 more months before it is completed. She is in ISNAP and is in full compliance. She is currently not working but is looking for employment. Ms. Dolk recommends that the license be renewed on probation for the length of her RMA.

14. Cara Benson RN Renewal Positive Response

Ms. Benson appeared for her personal appearance regarding her application for renewal. She was named in a lawsuit from a patient at the cardiology practice where she was working. The case settled and she was not found personally liable for any liability. She saw the patient in June of 2010 and the matter was settled in 2013. She is currently employed with no reported issues. Ms. Dolk recommends that the license be renewed free and clear.

15. Kian Busard RN Renewal Failed to Provide Statement

Ms. Busard appeared for her personal appearance regarding her application for renewal. In May 2013 she was terminated due to a patient complaint related to an on call issue. A family called in and she took the call. She knew the patient had fallen but was not aware that the patient was in pain. The patient's case manager was coming out the following morning so she was under the impression that she would not be going to the patient's house. The family thought she was supposed to be coming out. The family called the next morning and stated that she said she would be coming and never came. She is currently not working. She has been taking care of her daughter and her granddaughter. She reports that he daughter has health issues that need to be met prior to returning to work. Ms. Dolk recommends that the license be renewed free and clear.

16. Michelle Burnett RN Renewal Failed to Provide Statement

Respondent appeared regarding her application for renewal. She reported a termination related to her entry into the ISNAP program. She was terminated from her job at St. Margaret's for suspected diversion and subsequently enrolled in ISNAP in February 2012. A motion was made and seconded to renew the license free and clear. McIntosh/Ogle, 7-0-0, motion carries

17. Amber Baxter RN Renewal Positive Response

Ms. Baxter appeared for her personal appearance regarding her application for renewal. She was terminated from Indiana University in September 2013. She was working on a Saturday and went off the floor to pick up lunch without telling the charge nurse. She is currently looking for a job. Ms. Dolk recommends that the license be renewed free and clear.

18. Jennifer Barwig RN Renewal Failed to Provide Statement

Ms. Barwig did not appear for her personal appearance. Ms. Dolk recommends her request for renewal be denied.

19. Shannon Bell RN Renewal Failed to Provide Statement

Ms. Bell did not appear for her personal appearance. Ms. Dolk recommends her request for renewal be denied.

20. Ashley Armstrong RN Renewal Failed to Provide Statement

Ms. Armstrong appeared for her personal appearance regarding her application for renewal. She is currently in ISNAP. Her last drug screen was in October. ISNAP staff report that she is consistently late on submitting items to ISNAP. She reports receiving a DUI in April 2013. She completed 7 months in jail and has gone through treatment. She has successfully completed ISNAP in the past. The first time she in ISNAP was related to pain medication. She didn't realize she had an issue with alcohol. Ms. Dolk recommends that the license be renewed on probation for the length of her RMA.

21. Peter Bartkiewicz RN Renewal Failure to Disclose

Mr. Bartkiewicz did not appear for his personal appearance. Ms. Dolk recommends his request for renewal be denied.

22. Jennifer Adams RN Renewal Failed to Provide Statement

Ms. Adams appeared for her personal appearance regarding her application for renewal. She talked with the doctor she was working with about getting a patient additional education on her condition. The doctor took the chart and walked away. She was informed a couple days later that she was rude to the doctor and he no longer wanted her taking care of any of his patients. She was terminated for this. She is not currently working but is looking for employment. She has never had any other issues in 20 years of nursing. Ms. Dolk recommends her license be renewed free and clear.

23. Nancy Cornett RN Renewal Positive Response

Ms. Cornett did not appear for her appearance. Ms. Dolk recommends her request for renewal be denied.

24. Teresa Eubank RN Renewal Positive Response

Ms. Eubank appeared for her personal appearance regarding her application for renewal. She worked an 8 hour shift and her employer wanted her to stay an extra 4 hours. She agreed and during the course of the extra time, she pulled 3 patients' medications incorrectly. This incident took place while she was under a probation period at the facility. She was terminated from the facility. She is currently working as a full-time nurse and reports no other issues Ms. Dolk recommends her license be renewed free and clear.

25. Rachel Clarkson RN Renewal Failed to Provide Statement

Ms. Clarkson appeared for her personal appearance regarding her application for renewal. She was asked to resign from St. Francis in June 2013. She was on a disciplinary track for time management; as she was charting after shift was over. There were no safety issues, solely a time management issue. She realizes she has to chart in real time but she spends more time with patients than on the computer charting. She is currently working at Franklin Meadows. She has received a verbal warning for charting after her shift. She started there in August 2013. She received the verbal warning in December 2013. She has been a nurse since 2005 and became licensed as an RN in 2008. She worked at St. Francis for 4 years. Ms. Dolk recommends that the license be renewed on probation for 12 months active practice with quarterly reports from employer indicating her progress with time management.

26. Nancy Cole RN Renewal Failed to Provide Statement

Ms. Cole did not appear for her appearance. Ms. Dolk recommends her request be denied.

27. Casey Cooper RN Renewal Failed to Provide Statement

Ms. Cooper appeared for her personal appearance regarding her application for renewal. She was terminated for documentation. She was hired as manager; she never had any manger experience before. She didn't feel she was getting the support she needed. She asked twice to step down. She went on medical leave and then came back she asked to step down again and they agreed. A few days later she was terminated. She is currently not working as a nurse. Ms. Dolk recommends that the license be renewed free and clear.

28. Samantha Hill LPN Expired Renewal Positive Response

Ms. Hill did not appear for her personal appearance. Ms. Dolk recommends her request for renewal be denied.

29. Delicia Brooks RN Renewal Did Not Disclose

Ms. Brooks appeared for her personal appearance regarding her application for renewal of her APN. She will also be filing her application for CSR. She went to work for a company in May 2013. In July 2013, the office was raided by the DEA. She was interviewed and was told no criminal charges would be filed against her. They asked her to surrender her DEA. Due to the fact that the office knew her DEA number, she surrendered it as she did not want them to use it without her consent. She did not report the DEA surrender to the Board. She is currently working with no problems. Her APN is to be renewed and she will not have to reappear when she files her CSR application. Ms. Dolk recommends both her APN and CSR be renewed and issued free and clear.

30. Betty Dobbins RN Renewal Failed to Provide Statement

Ms. Dobbins appeared for her personal appearance regarding her application for renewal. Her yes answer was an error made in the renewal process. Ms. Dolk recommends that the license be renewed free and clear.

31. Carrie Douglas RN Renewal Failed to Provide Statement

Ms. Douglas appeared for her personal appearance regarding her application for renewal. She was terminated from Indiana University in July 2013 after working there for 8 years. Her termination was due to an event with a patient. They had a very aggressive patient. There were 5 nurses and 2 security guards involved in restraining the patient. She voiced her opinion several times that the patient was not being handled correctly. The following morning two of the other nurses involved stated she had hit the patient. She challenged her termination. Her appeal was not processed by the hospital and a month later she was laid off. She states she did not hit the patient and the way he was being held it would have been impossible for her to hit his face. She is currently not employed. She has never had any other issues. The hospital did not pursue any abuse allegations regarding this matter. Ms. Dolk recommends her license be renewed free and clear.