



# Ohio Board of Nursing

www.nursing.ohio.gov

17 South High Street, Suite 400 • Columbus, Ohio 43215-7410 • (614) 466-3947

August 1, 2011

Susan Thomas, M.S.N., R.N.  
Program Administrator  
Ohio American Health Care, Inc.  
Registered Nurse Program  
2323 Lake Club Drive  
Columbus, OH 43232

Dear Ms. Thomas:

Enclosed is your Notice of Opportunity for a Hearing. Please review the document carefully. Please direct any communication regarding this correspondence to the attention of **Lisa Ferguson-Ramos, RN, JD, Compliance Manger**, by telephone at (614) 995-3635 or by e-mail at [hearing@nursing.ohio.gov](mailto:hearing@nursing.ohio.gov).

Sincerely,

A handwritten signature in black ink that reads "Betsy J. Houchen". The signature is written in a cursive style.

Betsy J. Houchen, R.N., M.S., J.D.  
Executive Director

LFR/bck

Cc: Melissa Wilburn, Assistant Attorney General

Certified Mail  
Receipt No. 7011 1150 0000 9357 0424

Enclosure



July 29, 2011

## NOTICE OF OPPORTUNITY FOR HEARING

Susan Thomas, M.S.N., R.N.  
Program Administrator  
Ohio American Health Care, Inc.  
Registered Nurse Program  
2323 Lake Club Drive  
Columbus, OH 43232

Dear Ms. Thomas:

In accordance with Chapter 119, Ohio Revised Code (hereinafter "ORC"), you are hereby notified that the Ohio Board of Nursing (hereinafter "Board") proposes under authority of Section 4723.06(A)(6), ORC, to withdraw conditional approval and deny full approval status to Ohio American Health Care Inc. Registered Nurse Program ("Program") for the following reasons:

1. On or about March 22, 2011 and May 25, 2011 the Board conducted an announced survey visit of the Program to review whether the Program was meeting and maintaining the standards for education programs established in Chapter 4723-5, Ohio Administrative Code (OAC), in accordance with Rule 4723-5-06(A)(4), OAC. On or about June 15, 2011, the Board sent the Program a Survey Visit Report identifying standards not met and maintained. On or about June 28, 2011, the Board received documentation in response to the Survey Visit from the Program (Response). On July 28-29, 2011, the Board met and, having considered the Survey Report and the Program's Response, has determined that the following standards established in Chapter 4723-5, OAC, have not been met or maintained:
  - a. Despite being required by Rule 4723-5-09(B), OAC, the Program Administrator did not implement an orientation process for faculty members. The submitted Faculty orientation Policy required that each new employee receive an orientation. Upon review of six employee files, no documentation of orientation existed.
  - b. Despite being required by Rule 4723-5-12(A), OAC, the Program did not:
    - (i) Implement its policies for student admission as follows: Student #1's (*See Attached Student Key To*

*Remain Confidential and Not Subject To Public Disclosure*) file did not include evidence of a passing grade on a pre-entrance exam or CPR certification as required; Student #2's file did not contain evidence of malpractice insurance as required; and Student #3's file did not include CPR certification and documentation of malpractice insurance as required; and

- (ii) The student progression for the level of achievement a student must maintain in order to remain in the program or progress from one level to another was not implemented, as follows: The Program's written policy set forth in the Student Handbook/Catalog required an 85% minimum level of achievement, with the option to retake an exam. However, the Administrator changed the policy to 75% without the option to retake an exam, but did not change the written policy manual. Students were informed of the change in the policy but the Student Manual/Catalog continued to state the 85% level of achievement with option to retake the exam; and
- (iii) The requirements for satisfactory completion of each course required in the nursing curriculum were not implemented, as follows: Although students had been actively engaged in the Program since May 17, 2010, as of March 22, 2011, the students had only progressed to RN002, and had not started course work content of RN003, or RN004, each of which was approximately ten (10) weeks in duration. Further, the Program implemented an unplanned "break" in the coursework for 17 students until the second group of students "caught up" with them in the coursework, and the Program Administrator informed the students that they would not complete the program on the scheduled completion date. When the Board representative questioned the Administrator about these discrepancies, the Administrator responded by stating that the Program had not followed its own grading and progression policy, that the Program works with the students so that no students fail, and allows the

students to take the tests as many times as they want until they pass. Further, Students progressed from RN001 to RN 002 without completing RN001 Content of Computers and without performing the required 72 hours for lab skills.

- c. Despite being required by Rule 4723-5-13, OAC, the Program did not establish a Curriculum Plan that was implemented by the Program, and did not provide instruction to students that would be consistent with curriculum plans and course syllabi that were provided to the Board. Examples include, but are not limited to the following:
- (i) Students progressed from RN001 to RN 002 without completing RN001 Content of Computers and without performing the required 72 hours for lab skills;
  - (ii) The Curriculum Plan submitted to the Board in the Program's Progress Report for RN001 indicated 126 hours of theory and 72 hours of laboratory skills; however, only 138 hours of theory and no laboratory skills were provided to students;
  - (iii) The Syllabi for RN002 provided for a total of 318 contact hours (200 theory), 30 skills laboratory, 88 clinical) but students received only 280 hours (no skills, laboratory and 80 clinical);
  - (iv) The performance objectives for RN002 required that students use "medical surgical nursing" skills; the School Catalog/Student Handbook included a statement that clinical facilities utilized by the Program would include "acute and long term care agencies, ambulatory care settings, local hospitals, and ethics . . ." Despite this, the Administrator admitted during the March 22, 2011 Survey Visit that no clinical experiences were provided to students to complete the performance objectives for medical surgical nursing;
  - (v) The performance objectives for RN002 required students to "apply principles of psychology;" however, students in the first cohort did not receive

the Psychology Theory course content required in RN002.

- d. Despite being required by Rule 4723-5-15, OAC, the Program did not implement a systematic plan of evaluation as required by Rule 4723-5-15, OAC. During the March 22, 2011 Survey Visit, when the Board staff requested the Program's systematic plan of evaluation, the Program Administrator stated that the systematic plan for program evaluation had not been completed. During the May 25, 2011 Survey Visit the Program provided a document titled, "Systematic Plan for Program Evaluation Minutes April 25, 2011." The document provided did not indicate that the results of the evaluation of each aspect of the program were summarized and documented.
- e. Despite being required by Rule 4723-5-19, OAC, the Program faculty did not provide a syllabus or outline to each student. During the March 22, 2011 Survey Visit, the students in RN002, the Administrators, and the faculty were unable to produce a course syllabus for RN002 to provide to Board staff.
- f. Despite being required by rule 4723-5-20, OAC, the Program's students engaging in RN002 clinical experience were not provided appropriate supervision during their delivery of care to an individual or group of individuals. The documents to the Board staff by the Program reflected that only six weeks of clinical were completed when ten (10) weeks were planned. When asked by Board staff why the students had not completed the remaining four (4) weeks of the planned clinical experience, the Program Administrator explained that the students did not complete the scheduled clinical rotation days as planned because she learned that the responsible clinical instructor was not providing student supervision at the facility and her Program employment was subsequently terminated.
- g. Despite Rule 4723-5-21, OAC, the Program Administrator did not implement a record retention plan for faculty and teaching assistants. Files for three employees did not contain copies of official academic transcripts. When Board staff requested the transcripts for review on March 22, 2011 the Administrator stated she did not have the transcripts. The file of one employee reviewed on May 25, 2011 did not contain a transcript or curriculum vitae.
- h. Despite Rule 4723-5-25, OAC, the Program, through its Administrator submitted false, misleading or deceptive information or documents to

the Board. The Program Administrator submitted a signed Verification of Rule Compliance document, dated December 13, 2010 which was marked "yes" to meeting and maintaining all of the rules on the document including provisions of each of the following rules:

4.1 Organization and Administration of the Program as set forth in Rule 4723-5-09, OAC

4.4 Curriculum as set forth in: Rule 4723-5-13, OAC

4.5 Evaluation Plan for the Program as set forth in Rule 4723-5-15, OAC

4.9 Program Records as set forth in Rule 4723-5-21, OAC

Despite the Administrator's signed verification of compliance with the above stated rules the survey visit revealed: The Program Administrator did not implement an orientation process for faculty. The Program Administrator did not establish and implement a curriculum as required. The Program did not implement a systematic plan of evaluation as required. The Program Administrator did not implement the required records retention plan related to faculty and teaching assistant records.

Section 4723.06(A)(6), ORC, requires that, for a prelicensure nursing education program that has been granted conditional approval by the Board, at the Board's first meeting after the first class has completed the program, the Board shall determine whether to grant full approval to the program. If the Board does not grant full approval or if it appears that the program has failed to meet and maintain standards established by rules adopted under Section 4723.07 of the Revised Code, the Board shall hold an adjudication under Chapter 119. of the Revised Code to consider the program. Based on the results of the adjudication, the Board may continue or withdraw conditional approval, or grant full approval

Accordingly, the Board is authorized to propose to deny full approval and withdraw conditional approval of the Program based upon its failure to meet and maintain the standards established in rules adopted under Section 4723.07, ORC

In accordance with Chapter 119, ORC, you are hereby informed that the Program is entitled to a hearing in this matter. If the Program wishes to request such hearing, the request must be made in writing and must be received in the Board office within thirty (30) days of the time of mailing of this notice

Ohio American Health Care, Inc  
Registered Nursing Program  
Page 6

You are hereby further informed that, if the Program timely requests a hearing, Section 119.07, ORC, states that "at the hearing [the Program] may appear in person, by its attorney, or by such other representative as is permitted to practice before the [Board], or may present [its] position, arguments, or contentions in writing." At the hearing the Program may also present evidence and examine witnesses appearing for and against the Program.

Should you choose to request a hearing, please mail or deliver the request, in addition to any other correspondence regarding this matter, to **Lisa Ferguson-Ramos, Compliance Unit Manager, Ohio Board of Nursing, 17 South High Street, Suite 400, Columbus OH, 43215-7410, or to the email address, [hearing@nursing.ohio.gov](mailto:hearing@nursing.ohio.gov).**

If the Board fails to receive a request for a hearing within thirty (30) days of the time of mailing of this notice, the Board may, in the Program's absence and upon consideration of the factual and legal allegations set forth in this Notice of Opportunity for Hearing, withdraw conditional approval and deny full approval status.

Sincerely,

Handwritten signature of Bertha M. Lovelace, RN, CRNA in black ink.

Bertha M. Lovelace, RN, CRNA, President

Certified Mail Receipt No. 7011 1150 0000 9357 0424

cc: Michelle Sutter, Assistant Attorney General