

HEARINGS

- | | | |
|--------------------------|-----------------------|------------------------------|
| • Olesja Whalen, RN | Petition No. 2020-336 | Staff Attorney Linda Fazzina |
| • Arlene E. Clarke, LPN* | Petition No. 2022-580 | Staff Attorney Linda Fazzina |
| • Danielle D. Works, LPN | Petition No. 2021-519 | Staff Attorney Linda Fazzina |
| • Candance Staines* | Petition No. 2022-470 | Staff Attorney Joelle Newton |
- * Currently Summarily Suspended

PRE-HEARING REVIEW

- | | | |
|----------------------|-----------------------|------------------------------|
| • Lisa Alexander, RN | Petition No. 2020-697 | Staff Attorney Linda Fazzina |
| • Melissa Wilson, RN | Petition No. 2020-685 | Staff Attorney Joelle Newton |

Board of Examiners for Nursing – (Meeting/Hearings) via Microsoft TEAMS

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The following minutes are draft minutes which are subject to revision and which have not yet been adopted by the Board.

The **Board of Examiners for Nursing** held a meeting on February 2, 2022 via Microsoft TEAMS.

BOARD MEMBERS PRESENT: Patricia C. Bouffard, RN, D.N.Sc. - (RN Member, Chair)
Cynthia L. Arpin, RN, MSN – (RN Member)
Jason Blando - (Public Member)
Mary E. Dietmann, EdD, APRN, ACNS-BC, CNE - (RN Member)
Lisa S. Freeman, BA - (Public Member)
Jennifer C. Long, APRN, MSN, NNP-BC - (APRN Member)
Geraldine Marrocco, Ed.D., APRN, ANP-BC, FAANP - (RN Member)
Gina Reiners, PhD, APRN, PMHNP, PMHCNS - (RN Member)

BOARD MEMBERS ABSENT: Rebecca Martinez, LPN – (LPN Member)

ALSO PRESENT: Stacy Schulman, Legal Counsel to the Board, DPH
Dana Dalton, RN, Supervising Nurse Consultant, DPH
Helen Smith, RN, Nurse Consultant, DPH
Linda Fazzina, Staff Attorney, DPH
Joelle Newton, Staff Attorney, DPH
Diane Wilan, Staff Attorney, DPH

The meeting commenced at 8:30 a.m. All participants were present via Microsoft TEAMS.

CHAIR UPDATES

Nothing to report.

APPROVAL OF AGENDA

Gina Reiners made a motion, seconded by Cynthia Arpin, to approve the agenda. The motion passed unanimously.

OPEN FORUM

Nothing to report.

NATIONAL COUNCIL STATE BOARDS OF NURSING

Chair Bouffard reported that Vermont just became the 36th State to implement the Nurse Licensure Compact.

Everyone was reminded that the mid-year meeting is scheduled for March 14 – 17, 2022

CONNECTICUT LEAGUE FOR NURSING – Monthly Update

The Board received an update from Marcia Proto of Connecticut League for Nursing and the Connecticut Center for Nursing Workforce and from Audrey Beauvais on behalf of the Deans and Directors.

CONTINUING EDUCATION FOR RNS AND LPNS

Dana Dalton presented information regarding Public Act 21-46 which requires continuing education for registered nurses and licensed practical nurses. Department of Public Health Legislative Liaison Jill Kennedy provided background information.

SCHOOL ISSUES

- Lincoln Technical Institute
Patty DeLucia and Sara Johnson were present for Lincoln Technical Institute.
Cynthia Arpin made a motion, seconded by Jennifer Long, to approve Sara Johnson as Regional Director of Nursing for Lincoln Technical Institute. The motion passed unanimously.
- Sacred Heart University
Elizabeth Denny was present from Sacred Heart University.
Gina Reiners made a motion, seconded by Cynthia Arpin, to grant a 6-month temporary waiver for Karen DeCato, BSN as a clinical instructor for NU 340: Introduction to Adult Nursing for the Spring 2022 semester. The motion passed with all in favor except Mary Dietmann and Jason Blando who recused themselves from voting.
- Three Rivers Community College
Cynthia L. Arpin recused herself in this matter.
Kem Barfield was present from Three Rivers Community College.
Mary Dietmann made a motion, seconded by Geraldine Marrocco, to approve Cynthia L. Arpin as Interim Director of Nursing for Three Rivers Community College. The motion passed unanimously.
- University of Connecticut
Angela Starkweather was present from The University of Connecticut.
Geraldine Marrocco made a motion, seconded by Mary Dietmann, to grant a 12-month temporary waiver for Carly Muller, BSN as a clinical instructor for NU 3334: Theory and Nursing Practice for Perinatal and Women's Health. The motion passed unanimously.

SCOPE OF PRACTICE

Helen Smith, Nurse Consultant, DPH provided a summary of 37 nursing scope of practice inquiries received by the Department of Public Health during December 2021.

REVIEW OF CURRENT SUMMARY SUSPENSION STATUS

Ashley Lambert, L.P.N - Petition No. 2021-931

Jennifer Long made a motion, seconded by Geraldine Marrocco, to vacate the Summary Suspension of respondent's licensed practical nurse license, No. 040682, which was ordered on December 21, 2021. Pending the issuance of a Memorandum of Decision in Petition No. 2021-931, respondent's license is reinstated to probation subject to the terms of a January 15, 2020 Consent Order. The motion passed with all in favor except Jason Blando who abstained.

MEMORANDA OF DECISION

Natalie Primini, LPN – Reinstatement Request

Jennifer Long made a motion, seconded by Lisa Freeman to affirm the Memorandum of Decision in the matter of Natalie Primini, LPN which reinstates her license to probation for a period of two years. The motion passed unanimously.

MOTION TO AMEND STATEMENT OF CHARGES

Steven M. Lamoureux, APRN, RN - Petition Nos. 2021-652; 2021-653

Staff Attorney Joelle Newton presented the Board with a Motion to Amend Statement of Charges in the matter of Steven Lamoureux. Respondent and his attorney were not present. Respondent's license was summarily suspended on September 15, 2021

Jennifer Long made a motion, seconded by Cynthia Arpin, to grant the Department's motion to amend the Statement of Charges.– The motion to amend passed with all in favor except Gina Reiners who recused her self from voting.

Sheryl Lacoursiere, RN, APRN - Petition Nos. 2021-1072; 2021-1199

Staff Attorney Joelle Newton presented the Board with a Motion to Amend Statement of Charges in the matter of Sheryl Lacoursiere. Attorney Ellen Costello was present for respondent and objected to the Department's motion. Respondent's license was summarily suspended on January 5, 2022.

Jennifer Long made a motion, seconded by Cynthia Arpin, to grant the Department's motion to amend the Statement of Charges. The motion to amend passed with all in favor except Gina Reiners who recused herself from voting.

MOTION FOR SUMMARY SUSPENSION

Amanda Espinosa., LPN - Petition No. 2021-1222

Staff Attorney Aden Baume presented the Board with a Motion for Summary Suspension for Amanda Espinosa. Respondent was not present and was not represented.

Geraldine Marrocco moved to grant the Department's Motion for Summary Suspension in that respondent's continued practice as a nurse is a clear and immediate danger to public health, safety, and welfare. The motion was seconded by Mary Dietmann and passed unanimously. A hearing will be scheduled for February 16, 2022.

Rebecca S. Berslepsch, LPN - Petition No. 2021-946

Staff Attorney Linda Fazzina presented the Board with a Motion for Summary Suspension for Rebecca S. Berslepsch. Respondent was not present and was not represented.

Jennifer Long moved to grant the Department's Motion for Summary Suspension in that respondent's continued practice as a nurse is a clear and immediate danger to public health, safety, and welfare. The motion was seconded by Geraldine Marrocco and passed unanimously. A hearing will be scheduled for February 16, 2022.

CONSENT ORDERS

Bryan Smith, RN - Petition No. 2019-827

Staff Attorney Linda Fazzina presented a Consent Order in the matter of Bryan Smith, RN. Respondent was not present or represented.

Gina Reiners made a motion, seconded by Geraldine Marrocco, to approve the Consent Order which imposes a \$500.00 civil penalty. The motion passed unanimously.

Mary, Kelley RN -Petition No. 2019-827

Staff Attorney Linda Fazzina presented a Consent Order in the matter of, Mary Kelleay, RN. Respondent was present with Attorney Phillip Walker.

Geraldine Marrocco made a motion, seconded by Jennifer Long, to approve the Consent Order which imposes a reprimand and probation for a period of four years. The motion passed unanimously.

ADJOURNMENT

Upon a motion by Geraldine Marrocco, seconded by Cynthia Arpin the meeting adjourned at 10:36 a.m.

BOEN meeting 09/21/2022

1. Albertus Magnus College, Notice of Intent -For Your Information:

Albertus Magnus College is providing a written notice of intent to establish a Bachelor of Science in Nursing (BSN) Program, a day program that will start in the Fall of 2024, and will accept two classes per year for a total of 52 students per year for the next three years.

2. Updates to the NCLEX data for 05/01/2021 to 04/30/2022- based on requests from the CT Nursing Programs/Schools to correct candidate information. For Your Information:

- a. Quinnipiac University, Accelerated 82 to 81 %
- b. Southern CT State University, BSN from 92 to 91 % and Accelerated 100 to 97 %
- c. Lincoln Technical Institute:
 - i. New Britain campus, day group 81 to 82 % and evening group 83 to 81 %.
- d. Stone Academy:
 - i. East Hartford campus, day group 62 to 67 % and evening group 48 to 43%.
 - ii. Waterbury campus, day group 61 to 58 % and evening group 65 to 70 %.
 - iii. West Haven campus, day group 44 to 47 % and evening group 47 to 43%.

3. Gateway Community College- approval of Interim Nursing Department Chair:

Gateway Community College (GCC) is requesting approval of the appointment of **Barbara McFarland, MSN, RN** as the Interim Department Chair of Nursing at GCC as of 08/25/2022. Ms. McFarland earned a Diploma in Nursing from St. Vincent's Medical Center School of Nursing in May of 1984, a Bachelor of Science in Nursing from Florida International University in December of 1988, and a Master of Science in Nursing, Nursing Education from University of Hartford in May 2005. Her educational experiences include Associate Professor of Nursing at GCC from 2005 to 2018, Clinical adjunct faculty at Southern Connecticut State University and GCC, Assistant Professor of Nursing at St. Petersburg Community College, Nursing/Allied Health Advisor at GCC and Assistant Professor of Nursing at GCC since 01/2022. Ms. McFarland's clinical experiences include staff nurse at long term care facilities, acute state and federal hospitals-in the intensive care, and emergency department units. Ms. McFarland was oriented to this role and mentored by Dr. Shelia Solernou, the former Division Director of Allied Health & Nursing, since 06/01/2022.

4. Goodwin University- Revised Action Plans:

a. Associate Degree Program, 1st time test takers NCLEX results 69%.

i. The action plan includes:

1. Review admission policies & points system, discussion about raising the passing grades to B minus, and assess assignments & testing for possible grade inflation.
2. Share data with faculty, have an Assessment Technologies Institute (ATI) consultant work with faculty, review curriculum weaknesses with faculty and revise courses, increase opportunities for students to practice with online testing, offer testing support sessions, mandate remediation of questions students get wrong & examine how much time is allowed.
3. Any changes to the admissions criteria & point test policies will be implemented for the Fall 2023 semester.
4. Examination of Progression Policies including any student who achieved less than a 77% on an exam will be referred to a faculty member to meet and given a “tutoring prescription”, all students must pass the ATI Predictor with a 95% or higher and if unsuccessful will recommend participation in the Virtual ATI/Green Light process.
5. A review of tests and testing process including ATI reinstated, faculty workgroups, track percentages of application or higher-level questions, and increase the number of computer-generated test questions.
6. Curriculum revisions planned include additional content woven throughout the curriculum, revisions based on data from Mountain Measurement, senior capstone review, continue to offer remote test-taking strategy workshops, formative evaluation activities added to each course, and NCLEX NGN style questions included in every class.
7. Monitor enrollments in course sections.
8. SwiftRiver/virtual assignment for select clinical experiences-use data from in Fall 2022 /Spring 2023 semesters and examining course grades & assignments to ensure academic integrity.
9. New faculty, significant pay raises, newly established plan with ATI and have all faculty on-boarded , ongoing faculty educational updates & continuing education activities, search for a Dean of the School of Health Professions and Nursing.
10. For students that did not pass the NCLEX during the Fall of 2021, Spring 2022 and Summer of 2022:
 - a. Complete select ATI modules

- b. Take a comprehensive practice assessment & complete 6 hours of focused review-the faculty will track on ATI analytics
 - c. Faculty to review the student's report, assign specific practice assessments based on their areas of weakness.
 - d. Individualized meetings with students.
 - e. Students will take another comprehensive practice assessment.
 - f. Repeat as needed.
- b. Accelerated Bachelor of Science Degree in Nursing (ABSN) Program, 1st time test takers, NCLEX results 52%.**
- i. The action plan includes:
 1. Review admission criteria, discussion about raising the passing grades to B minus, and assess assignments & testing for possible grade inflation.
 2. Include opportunities for The Test of Essential Academic Skills (TEAS) provided by ATI preparations and assess the weight of TEAS score in admission decision.
 3. Curriculum revision including pharmacology from online to on-ground, assign full-time faculty to teach this course and align the teaching schedule with pathophysiology starting in the Fall of 2022.
 4. Review of tests and testing process.
 5. Examine the progression policy including remediation requirements for students who fail to achieve a score of B minus on module exams and students must have an average grade of 77% or higher for unit exams before grades for other course work can be added.
 6. ATI reinstated for present and subsequent cohorts.
 7. Maintain course enrollment at 30 students for the next two years.
 8. Review faculty expertise, consider additional faculty and provide faculty workshops with ATI & NCSBN.
 9. Closer monitoring of all exams, on-ground and on-line, and increased interaction with on-ground courses.
 10. For senior levels students increased emphasis on NCLEX preparation, and ensure clinical capstones are appropriate to the student's level of achievement and practice.
 11. Clinical placements-Nurse Think products will be replaced by ATI .
 12. Faculty have begun mapping new essentials to existing courses.

5. Sacred Heart University, Dr. Susan L. Davis, R.N., & Richard Henley College of Nursing- faculty waiver request:

Sacred Heart University, Dr. Susan L. Davis, R.N., & Richard Henley College of Nursing is requesting a temporary 12-month waiver for **Araina Rick, RN, BSN-BC** to serve as a clinical instructor for Nursing 300: Psychiatric Mental Health. This waiver request will not exceed the 10% outlined in the regulations. Ms. Rick earned a Bachelor of Science in Nursing from Fairfield University in August of 2016 and is enrolled in a Doctor of Nursing Practice, Psychiatric Mental Health Nurse Practitioner program at Fairfield University with an expected graduation date of May 2023. On 08/19/2020 and 08/11/2021 the BOEN granted Ms. Rick 12-month temporary waivers as a clinical instructor for the same course at SHU. Her clinical experiences include staff nurse on a hospital child/adolescent behavioral health unit and on a hospital adult behavioral health unit. Her educational experiences include adjunct clinical faculty for SHU since 09/2020. In the Fall of 2022 Ariana will teach a clinical group of junior level students at St. Vincent's Behavioral Center. Ms. Rick has been oriented to clinical instructor role by the course coordinator, Norman Weller, MSN, RN, and he will continue to mentor her. Ms. Rick will complete an orientation to the clinical unit and the managers will be contacts for her at the clinical location. In addition, SHU provided student feedback regarding Ms. Rick that was positive.

6. Stone Academy:

- a. **The Office of Higher Education (OHE) is requesting to present the violations, concerns and recommendations based on a site visit to the East Hartford campus on 07/29/2022.**
- b. **Corrective Action Plans for the East Hartford campus, evening group and the West Haven campus, evening group:**
 - i. **East Hartford campus, evening group 1st time test takers NCLEX results 43% (updated results).**
 1. There was a decrease in competency related to the subject areas of coordinated care, physiological adaptation, health promotion and maintenance as well as a deficiency in preparing students to answer NCLEX-PN style questions.
 2. Initiatives included faculty education & training, ATI Live review for students, integration of NCLEX-PN questions into courses, instructor led study groups, and increased staff/faculty meetings.
 3. Future initiatives include strengthen the post-graduation NCLEX-PN preparation course, provide faculty professional development, redesign the new faculty orientation, adjust faculty meeting times, use alternate formats & continue to mix all faculty/staff to create cross functional teams, assist the students with the NCLEX-PN and licensure applications, revise & implement the instructor

evaluation process and establish a formalized instructor specific on-boarding and professional development program

ii. **West Haven, evening group 1st time test takers NCLEX results 43 % (updated results).**

1. There was a decrease in competency related to the subject areas of pharmacology, psychosocial integrity and coordinated care as well as a deficiency in preparing students to answer NCLEX-PN style questions.
2. Initiatives included faculty education & training, ATI Live review for students, integration of NCLEX-PN questions into courses, instructor led study groups, and increased staff/faculty meetings.
3. Future initiatives include redesign a formalized instructor-specific on boarding program, begin post-graduation NCLEX-PN preparation course, evaluate the use of the rideshare program, revise & implement the instructor evaluation process and conduct professional development for faculty.

7. University of Bridgeport- faculty waiver request:

The University of Bridgeport is requesting a temporary 6-month waiver for **Elliot Wolfer, RN, BSN** to teach NURS 202: Fundamentals in Nursing for sophomore level students and to facilitate two of the associated labs sections. This waiver request will not exceed the 10% outlined in the Regulations. Mr. Wolfer earned an Associate Degree in Nursing from SUNY, Alfred College in 2008, a Bachelor of Science in Nursing from Western Governors University in 2016 and is currently matriculated at Aspen University in a Master of Science in Nursing, Nursing Education Program with an expected date of graduation on 12/19/2022. Mr. Wolfer's clinical experiences include staff nurse in a hospital emergency department, staff nurse, team coordinator & nurse supervisor at an urgent care facility, staff nurse & nurse educator in correctional facilities, and clinical educator for long term care facilities. Elliot's educational experiences include clinical and classroom instructor at Porter & Chester Institute in the Practical Nursing Program since 06/2019. Mr. Anthony Kepler, MSN, RN will orient Mr. Wolfer to the faculty role and serve as a mentor.

8. Griffin Hospital School of Allied Health Careers:

- a. Griffin Hospital School of Allied Health Careers is requesting approval of their feasibility study for a Practical Nursing Program.
- b. Griffin Hospital School of Allied Health Careers is requesting approval of their proposal to offer a Practical Nursing Program.
- c. Griffing Hospital School of Allied Health Careers is requesting approval of the appointment of **Kayla Bennett, MSN, RN, CNL** as the Program Director. Ms. Bennett earned a Bachelor of Science in Nursing from the University of Saint

Jospeh on 05/15/2011 and a Master of Science in Nursing, Clinical Nurse Leader from Sacred Heart University on 05/12/2018. Her educational experiences include adjunct faculty in the Certified Nursing Assistant (CNA) program at Manchester Community College and nursing professional development specialist for various acute care hospitals. Kayla's clinical experiences include staff nurse on cardiovascular-surgical step down, gi/hepatic medical, and interventional cardiology units at acute care hospitals and staff nurse and nurse supervisor at a long-term care facility.

Smith, Helen

From: Jaime Sinutko <jsinutko@gmail.com>
Sent: Tuesday, August 16, 2022 7:04 PM
To: Smith, Helen
Subject: Albertus Magnus Written Notice of Intent to Establish a Program
Attachments: Nursing Letter 8.16.2022.doc

EXTERNAL EMAIL: This email originated from outside of the organization. Do not click any links or open any attachments unless you trust the sender and know the content is safe.

Good Afternoon,
Please find the updated Albertus Magnus Written Notice of Intent to Establish a Program attached. I look forward to being virtually present at the Board meeting on 9/21/22 beginning at 0830.
Much Appreciation,
Jaime Sinutko



ALBERTUS MAGNUS COLLEGE

August 16, 2022

State of Connecticut Department of Public Health
Board of Examiners for Nursing
410 Capitol Avenue, MS#13PHO
P.O. Box 340308
Hartford, CT 06134-0308

Re: *Written Notice of Intent to Establish a Bachelor of Science in Nursing (BSN) Program*

Dear Board Chairperson:

Thank you for the opportunity to submit this written notice of intent to establish a new nursing program at Albertus Magnus College in New Haven, Connecticut. Our intent is to establish a Bachelor of Science in Nursing (BSN) degree program.

Our projected timeline is to build nursing simulation and skills laboratories to be completed by May, 2023 in order to invite the State of Connecticut Department of Public Health for a site visit. We plan to submit the full feasibility study, appointment of a nursing director, and formal request for a new nursing program in March, 2023.

Our request will be to have nursing faculty teach nursing classes beginning in fall 2024. We acknowledge that this would require students to take pre-requisite courses at Albertus Magnus College beginning in fall 2023 as general education students. This BSN program would mostly offer classes, labs, and clinicals during the day and afternoon time periods.

We will have the resources to accept 26 new nursing students per class and two classes per year (fall and spring admits) a total of 52 new nursing students per year. The first year of nursing, fall 2024, may have fewer students, but we plan to keep enrollment to 52 new nursing students per year for all three first years. In three years, fall 2027, we project to have approximately 150 total nursing students between the 3 levels of sophomore, junior, and senior status. Albertus Magnus College is grateful for the opportunity to plan a high-quality BSN program to serve Connecticut.

Please reach out if any information requires clarification or if additional details are required.

Sincerely,
Jaime Sinutko RN, RHIA, MSN, PhD
jsinutko@gmail.com
(248) 561-7596

ORIGINAL

NCLEX-RN First Time Candidates % Passed	<u>2019</u>	<u>2019</u>	<u>2020</u>	<u>2020</u>	<u>2021</u>	<u>2021</u>	<u>2022</u>	<u>2022</u>
MASTERS								
Yale School of Nursing	94		98		96		87	
Fairfield University Open 03/2021							No data	
BACCALAUREATE	BS	Accelerated	BS	Accelerated	BS	Accelerated	BS	Accelerated
Central CT State University	100		97		96		96	
Fairfield University	93	98	97	98	96	97	94	86
Goodwin University						83		52
Quinnipiac University	94	96	90	96	85	85	85**	82**
Sacred Heart University	99		95		99	No data	95**	100**
Southern CT State University	100	97	95	100	100	94	92**	100**
University of Bridgeport	N/A		No data		78	No data	81	No data
University of Hartford					No data		No data	
University of Connecticut								
Groton Campus/CEIN		97		97		96		90
Stamford Campus/CEIN		94		78		96		85**
Storrs Campus	98	98	98	100	94	96	91**	91**
Waterbury Campus/CEIN		100		97		98		94**
University of Saint Joseph	95	88	96	97	100	86	96	77
Western CT State University	94		92		91		91	
ASSOCIATE DEGREE	Day							
Capital CC*	89		87		80		86	
Gateway CC*	91		88		76		80	
Goodwin University	80		85		87		69	
Naugatuck Valley CC*	98		94		84		80	
Northwestern CC*	90		90		88		96	
Norwalk CC*	95		91		78		85	
ST. Vincent's College	82		85		77		83**	
Three Rivers CC*	93		92		97		94	
(* Community Colleges)								

**= Results may change based on request from Nursing Programs/Schools to correct candidate information.

NCLEX- PN First Time Candidates % Passed	<u>CAMPUS</u>	<u>2019</u> Day	<u>2019</u> Evening	<u>2020</u> Day	<u>2020</u> Evening	<u>2021</u> Day	<u>2021</u> Evening	<u>2022</u> Day	<u>2022</u> Evening
	LINCOLN TECHNICAL INSTITUTE	New Britain	95	100	95	89	89	83	81**
	Shelton	89	91	84	86	58	60	59	81
PORTER and CHESTER INSTITUTE	Bridgeport Open 09/15/2021	N/S	N/A	N/A	N/A	N/A	N/A	60	100
	Enfield	94	100	100	100	72	100	100	83
	Hamden	100	83	63	50	58	50	83	80
	Rocky Hill	79	100	82	54	93	67	94	77
	Stratford Close 09/2021	85	50	87	73	71	100	43	92
	Waterbury	80	89	90	88	75	50	88	43
STONE ACADEMY	East Hartford	84	93	73	84	75	74	62**	48**
	Waterbury	N/A	N/A	100	No data	82	82	61**	65**
	West Haven	71	93	48	80	51	73	44**	47**

UPDATED

NCLEX-RN First Time Candidates % Passed	<u>2019</u>	<u>2019</u>	<u>2020</u>	<u>2020</u>	<u>2021</u>	<u>2021</u>	<u>2022</u>	<u>2022</u>
MASTERS								
Yale School of Nursing	94		98		96		87	
Fairfield University Open 03/2021							No data	
BACCALAUREATE	BS	Accelerated	BS	Accelerated	BS	Accelerated	BS	Accelerated
Central CT State University	100		97		96		96	
Fairfield University	93	98	97	98	96	97	94	86
Goodwin University						83		52
Quinnipiac University	94	96	90	96	85	85	85	81
Sacred Heart University	99		95		99	No data	95**	100**
Southern CT State University	100	97	95	100	100	94	91	97
University of Bridgeport	N/A		No data		78	No data	81	No data
University of Hartford					No data		No data	
University of Connecticut								
Groton Campus/CEIN		97		97		96		90
Stamford Campus/CEIN		94		78		96		85**
Storrs Campus	98	98	98	100	94	96	91**	91**
Waterbury Campus/CEIN		100		97		98		94**
University of Saint Joseph	95	88	96	97	100	86	96	77
Western CT State University	94		92		91		91	
ASSOCIATE DEGREE	Day							
Capital CC*	89		87		80		86	
Gateway CC*	91		88		76		80	
Goodwin University	80		85		87		69	
Naugatuck Valley CC*	98		94		84		80	
Northwestern CC*	90		90		88		96	
Norwalk CC*	95		91		78		85	
ST. Vincent's College	82		85		77		83**	
Three Rivers CC*	93		92		97		94	
(* Community Colleges)								

**= Results may change based on request from Nursing Programs/Schools to correct candidate information.

NCLEX- PN First Time Candidates % Passed	<u>CAMPUS</u>	<u>2019</u> Day	<u>2019</u> Evening	<u>2020</u> Day	<u>2020</u> Evening	<u>2021</u> Day	<u>2021</u> Evening	<u>2022</u> Day	<u>2022</u> Evening
	LINCOLN TECHNICAL INSTITUTE	New Britain	95	100	95	89	89	83	82
	Shelton	89	91	84	86	58	60	59	81
PORTER and CHESTER INSTITUTE	Bridgeport Open 09/15/2021	N/S	N/A	N/A	N/A	N/A	N/A	60	100
	Enfield	94	100	100	100	72	100	100	83
	Hamden	100	83	63	50	58	50	83	80
	Rocky Hill	79	100	82	54	93	67	94	77
	Stratford Close 09/2021	85	50	87	73	71	100	43	92
	Waterbury	80	89	90	88	75	50	88	43
STONE ACADEMY	East Hartford	84	93	73	84	75	74	67	43
	Waterbury	N/A	N/A	100	No data	82	82	58	70
	West Haven	71	93	48	80	51	73	47	43



OFFICE OF THE CHIEF EXECUTIVE OFFICER
William (Terry) Brown, Ph.D.

August 25, 2022

Helen M. Smith, R.N., M.S.N.
Nurse Consultant
Practitioner Licensing and Investigations Section
Healthcare Quality & Safety Branch
Department of Public Health
State of Connecticut

RE: Notification of Appointment of Interim Nursing Department Chair at Gateway Community College

Dear Ms. Smith:

It is my pleasure to notify you that Barbara McFarland has been appointed Interim Department Chair for Nursing at Gateway Community College, effective today. Professor McFarland has great depth of experience in clinical nursing, nursing education and nursing leadership, including serving as respected member of the Gateway Nursing clinical faculty.

We are extremely fortunate to have Professor McFarland take the reins of leadership of our Nursing program upon the retirement of its founding Director, Dr. Sheila Solernou. She most certainly has my full confidence and support as she begins this appointment.

You are welcome to contact me at any time if you need additional information or have any questions.

Sincerely,

A handwritten signature in black ink that reads "William J. Brown, Ph.D.".

William (Terry) Brown, Ph.D.
Chief Executive Officer, Gateway Community College



OFFICE OF THE CHIEF EXECUTIVE OFFICER
William (Terry) Brown, Ph.D.

August 15, 2022

Dear Professor McFarland,

Upon the recommendation of Dr. Sheila Solernou and Dean Rose Ellis, it is with great pleasure that I write to inform you that I am approving your appointment to serve as the Interim Chair for the Nursing Department at Gateway Community College, effective August 25, 2022.

As you know, the leadership of the department chair is critical for bridging students' classroom experiences, faculty's teaching experiences, and the needs of the institution. This is complicated and messy work, and I encourage and invite you to reach out to Dean Ellis or me with any questions, concerns, or requests you may have.

Your leadership is going to be incredibly pivotal in the progress we make as a college during these very unusual and challenging times.

Sincerely,

William J. Brown, PhD

William (Terry) Brown, Ph.D.
Chief Executive Officer

cc: Dr. Rose Ellis, Dean; Marlene Cordero, Shoreline West Human Resources Manager

Barbara McFarland, MSN, RN

I

Phone:

bmcfarland@sbcglobal.net; bmcfarland@gwcc.commnet.edu

EDUCATION

- Master of Science in Nursing Education May 2005
University of Hartford, West Hartford, CT
- Bachelor of Science in Nursing December 1988
Florida International University, North Miami, FL
- Diploma in Nursing May 1984
St. Vincent's College, Bridgeport, CT

AWARDS

- 2010- Certificate of Appreciation: Gateway Community College
- 2009- Nightingale Award for Excellence in Nursing: Visiting Nurse Association of South Central CT
- 2008- Advisor of the Year Award: Gateway Community College, Student Government Association
- 2005- National Honor Society of Nursing, Sigma Theta Tau
- 1984- Medical Staff Award for Clinical Excellence: St Vincent's School of Nursing

POSITIONS HELD

Assistant Professor of Nursing <i>Gateway Community College, New Haven, CT</i>	January 2022 until present
Clinical Adjunct Faculty <i>Gateway Community College, New Haven, CT</i>	July 2021 until December 2021
Part Time Nursing/Allied Health Advisor <i>Gateway Community College, New Haven, CT</i>	March 2021
Assistant Professor of Nursing <i>St Petersburg Community College, St Petersburg, FL</i>	January 2020 until August 2020
Clinical Adjunct Faculty <i>Gateway Community College, New Haven, CT</i> <i>Clinical instruction with second year Associate Degree nursing students</i>	August until December 2019
Clinical Adjunct Faculty <i>Southern Connecticut State University, New Haven, CT</i> <i>Clinical instruction of traditional and accelerated nursing students</i>	January 2008 until 2016

Associate Professor of NursingFall 2005 until
January 2018,
retired*Gateway Community College, New Haven, CT**Course Leader for senior level courses in medical-surgical nursing. Coordination of course schedule, preceptorships, and clinical experiences for students. Syllabus and content creation along with test development and evaluation, clinical rotation scheduling, and adjunct faculty evaluations.**Coordination of all senior level courses (fall and spring semester) in the nursing program of study.**Expert Content Lectures: Neurology, Respiratory, Cardiac and Advanced Surgical/Medical content.**Hybrid Pharmacology Course for senior level courses. Syllabus and content creation, along with test development and evaluation of on ground and online modalities.**Faculty Advisor for the Gateway Student Nurses Association. Advise students on the policies and procedures of operating an organization (student club) based on the bylaws; assist with coordinating local volunteer community activities; and stress the importance of attending local and national conferences and maintaining membership in national nursing organizations.**Member of the Nursing Advisory Board. Meet with community and hospital representatives to discuss program enrollment, curriculum revisions, end-of-program outcomes, partnership opportunities, and involvement in the local community. Gain input from members into program processes and decision-making to ensure that the program meets community and nursing practice needs.**Member of the Connecticut Community College Nursing Program (CT-CCNP) Program Committee. Served as the senior level Gateway faculty representative in evaluating the CT-CCNP curriculum to ensure that it meets ACEN standards, CT Regulations for Nursing Programs, and contemporary nursing practice. Actively involved in the redesign of the curriculum to a concept-based framework.***Staff Registered Nurse, Surgical Intensive Care/Emergency Room**May 1984 until
October 2014,
(retired)*Veterans Administrative Medical Center, West Haven CT**Registered nurse/charge nurse in the Emergency Department.**Registered nurse in the surgical intensive care unit managing care for 2-5 critical surgical/medical patients. Assisted with charge nurse related duties.***Staff Registered Nurse (Per Diem), Acute Care Unit**

2003- 2004

*Masonic Home, Wallingford, CT**Provided nursing care for hospitalized critical patients on the acute care unit.***Staff Registered Nurse (Per Diem), All Intensive Care Units**August 1989-
May 1994*St. Raphael's Hospital, New Haven, CT**Provided nursing care for critically ill medical/surgical patients as part of a newly created pool that served all of the intensive care units.***Staff Registered Nurse (Per Diem), Geriatric Department**October 1984-
April 1985*Arden House, Hamden CT**Provided general nursing care (physical care, medication administration, dressing changes) for 40 geriatric nursing home patients on the night shift.*

CERTIFICATIONS AND LICENSURE

Advisor Certification from the National Student Nurses Association (NSNA)	April 2009
CCRN (Certified Critical Care Nurse) certification	1988 - 2014
Advanced Cardiac Life Support (ACLS) certification	1987 - 2015
Basic Cardiac Life Support (BCLS) certification	1980- present
Registered Nurse Licensure in Connecticut	1984- present
Registered Nurse Licensure in Florida	1986- present

PROFESSIONAL ORGANIZATIONS

National Student Nurses Association	January 2008-2019
National League for Nursing	September 2005- 2019
Connecticut National League for Nursing Member of the program committee	September 2005- present
American Nurses Association	April 2005-2017
Connecticut Nurses Association	April 2005-2017
Sigma Theta Tau, The National Honor Society of Nursing	April 2005-current
South Central Chapter of the American Association of Critical Care Nurses	May 1989 to May 2009
American Association of Critical Care Nurses	May 1989 – 2014 (retired)

PROFESSIONAL LEADERSHIP

Attended multiple seminars on issues pertaining to critical care and academia/education/ teaching.

Presented mini seminars to colleagues to promote ongoing professional development.

Attended National League for Nursing Summits September 2006 to 2017.

Served as a preceptor to at least 20 nursing colleagues over my 37-year nursing career.

Served as preceptor to new clinical and full-time faculty at Gateway Community College.

Served as a preceptor to graduate nursing students from the University of Hartford, Walden University, Southern CT State University, Sacred Heart University, and Fairfield University.

PROFESSIONAL INTERESTS

- **Nursing Education**
- **Critical Care Nursing**
- **End of Life Care**
- **Patient Advocacy**
- **Neurological Nursing**
- **Respiratory Nursing**
- **Cardiac Nursing**

REFERENCES FURNISHED UPON REQUEST



State of Connecticut

Lookup Detail View

Name

Name
BARBARA K MCFARLAND

License Information

License Information

License Type	License Number	Expiration Date	Granted Date	License Name	License Status		Licensure Actions or Pending Charges
Registered Nurse	E46846	08/31/2023	08/30/1984	BARBARA K. MCFARLAND	ACTIVE	CURRENT	None

Generated on: 9/1/2022 7:55:27 PM

STUDENT Name McFarland, Barbara (Mrs.)

St. Vincent's Medical Center
School of Nursing
2800 Main Street
Bridgeport, Connecticut 06606

Address _____
Street Address City State

Citizenship American Length of program 30 months Date of entry 8/23/82 Date of completion: 5/23/84

Birth date _____

Sex female If withdrawn: Date _____ Reason _____

Student Final Record

Education Prior to Entrance to School of Nursing	Year	Semester	SUMMARY OF PROGRAM	Credits of Instruction Earned	Final Grade
HIGH SCHOOL Name and location Amity Regional Woodbridge, CT Year diploma received <u>1979</u>			Credits transferred from Quinnipiac College		
			Anatomy & Physiology I	4	
			Anatomy & Physiology II	4	
			Credits transferred from Southern Connecticut State College		
			Chemistry	3	
			General Psychology	3	
			Microbiology	4	
			English	3	
			Sociology	3	
			Child Psychology	3	
COLLEGE(S) Name and location *Sacred Heart Univ. Fairfield, CT Years attended Degree or credit <u>6</u>			Course credits transferred from St. Raphael's Hospital School of Nursing		
			Nursing 101		
			Nursing 102		
			Religion 101		
			Nutrition (integrated)		
			Pharmacology (integrated)		
		'82	FA Nursing 202	8	B
		'82	FA Nursing 203	8	B+
		'83	SP *Developmental Psychology Ps272	3	B
		'83	SP Nursing 201	16	C+
GRADING SYSTEM A (Superior) 4.0 B+ (Generally excellent) 3.5 B (Very Good) 3.0 C+ (Good) 2.5 C (Satisfactory) 2.0 D+ (Poor) 1.5 D (Very Poor) 1.0 F (Failure) 0.0 I (Incomplete) — W (Withdrawal) — WF (Withdrawal Failure) — WP (Withdrawal Passing) — The minimum passing grade in nursing courses is C		'83	SP Religion 201	1	P
		'83	FA *Contemporary Moral Problems Rs257	3	A
		'83	FA Nursing 300	3	A
		'83	FA Nursing 301	5	B
		'83	FA Nursing 302	8	B
		'84	SP Nursing 303	8	B
		'84	SP Nursing 304	8	A
				Total	

INSTITUTIONS AND AGENCIES USED FOR LEARNING EXPERIENCES BY THE SCHOOL OF NURSING

Fairfield Hills Hospital, Newtown, CT

Cumulative Average: 3.04 Date 5/23/84

Rank: 12/32

Gene A. Drobner

Director, School of Nursing

Signature and title

Official Academic Transcript from:
FLORIDA INTERNATIONAL UNIVERSITY
OFFICE OF THE REGISTRAR
3000 NE 151ST STREET
MIAMI, FL 33181

TELEPHONE: 305-348-7000

Official Academic Transcript of:
BARBARA KARLA MCFARLAND
Transcript Created: 23-Jun-2022

Requested by:
BARBARA KARLA MCFARLAND

E-Mail: bmcfarland@gwcc.commnet.edu



Document Type: THIRD-PARTY SECURE PDF

Intended Recipient:
DIVISION OF NURSING
GATEWAY COMMUNITY COLLEGE
20 CHURCH STREET
NEW HAVEN, CT 06510

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Florida International University
Miami, Florida 33199

PAGE		DATE PRINTED	STUDENT IDENTIFICATION NUMBER	BIRTH DATE
01 OF 02		06/23/2022		
STUDENT NAME				
LAST MCFARLAND		FIRST BARBARA	MIDDLE MARIEN	KNUDSEN KARLA
TEST SCORES				
SEX	F	CLAST MATH 305	READ 318	WRITE 312 ESSAY 207 -06/88

PERMANENT
ACADEMIC
RECORD

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COURSE				SEMESTER HR. CREDITS			COURSE				SEMESTER HR. CREDITS			
PREFIX / NUMBER	SEC.	TITLE	TYPE GRADE	ATTEMPTED	EARNED	GRADE POINTS	PREFIX / NUMBER	SEC.	TITLE	TYPE GRADE	ATTEMPTED	EARNED	GRADE POINTS	
UNDERGRADUATE TRANSFER CREDIT GRANTED							FLORIDA INTERNATIONAL UNIVERSITY ADMITTED TO UNDERGRADUATE DEGREE PROGRAM							
ST RAPHAEL SCH NURS 1974-1976				0			FALL TERM 1987 3J 1203				NU			
UNDERGRAD TRANSFER CREDIT				0			ENC 3210 52 TECHNICAL WRITING				B+	3.0	3.0	9.99
STHN CONN STATE COLL 1974-1981				0	36.0		STA 3122 51 INTRO TO STAT I				C+	3.0	3.0	6.99
UNDERGRAD TRANSFER CREDIT				0			NUR 3825 41 PRO NURSING: SOCIAL				A-	2.0	2.0	7.34
QUINNIPIAC COLLEGE 1981-1982				0	8.0		CREDIT CREDIT CREDIT				GRADE			
UNDERGRAD TRANSFER CREDIT				0			TOTALS ATTEMPTED EARNED FOR GPA				POINTS			GPA
SACRED HEART UNIV 1983-1983				0	6.0		TERM 8.0 8.0				B.0	24.32		3.040
UNDERGRAD TRANSFER CREDIT				0			OVERALL 97.0							
ST VINCENTS SCH NURS 1982-1984				0			SPRING TERM 1988 3J 1203				UC			
UNDERGRAD TRANSFER CREDIT				0			SSI 3240 51 WORLD PROSP & ISSUE				B-	3.0	3.0	8.01
SOUTH CENTRAL CC 1985-1986				0	12.0		NUR 3066C51 CLIENT ASSESSMENT				A-	3.0	3.0	11.01
UNDERGRAD TRANSFER CREDIT				0			CREDIT CREDIT CREDIT				GRADE			
8801							TOTALS ATTEMPTED EARNED FOR GPA				POINTS			GPA
CLEP 00 NATURAL SCIENCES				Z	8.0		TERM 6.0 6.0				6.0	19.02		3.170
CLEP 00 NATURAL SCIENCES				Z	7.0		FIU 14.0 14.0				14.0	43.34		3.096
8808							OVERALL 103.0							
CLEP 00 NATURAL SCIENCE				Z	13.0		SUMMER TERM 1988							
8809							ENC 1137 51 ESSAY WRITING				B A	3.0	3.0	12.00
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CREDIT CREDIT CREDIT CREDIT				GRADE			NUR 3827 51 NURSING LEADERSHIP				A A	2.0	2.0	8.00
TOTALS ATTEMPTED EARNED FOR GPA				POINTS			CREDIT CREDIT CREDIT				GRADE			
OVERALL 89.0							TOTALS ATTEMPTED EARNED FOR GPA				POINTS			GPA
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Dulce M. Beltran
University Registrar

Florida International University
Miami, Florida 33199

PAGE	DATE PRINTED	STUDENT IDENTIFICATION NUMBER	BIRTH DATE
02 OF 02	06/23/2022		
STUDENT NAME			
LAST MCFARLAND		FIRST BARBARA	MIDDLE MAIDEN KNUDSEN KARLA
TEST SCORES			
SEX	F	CLAST MATH 305 READ 318 WRITE 312 ESSAY 07 -06/88	

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NUR	4636C51	COMMUNITY NURSING		A-	4.0	4.0	4.68																																																																								
NUR	4895 51	SENIRO SEMINAR		A	2.0	2.0	8.00																																																																								
NUR	4945L51	NURSING PRACTICUM		P	4.0	4.0	0.00																																																																								
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Dulce M. Beltran
Dulce M. Beltran
University Registrar

FLORIDA INTERNATIONAL UNIVERSITY

Accreditation

Florida International University is accredited by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) to award associate, baccalaureate, master specialist, and doctoral degrees. Professional degree programs at FIU are accredited or approved by the appropriate specialized accreditation agency or pursuing full accreditation or approval. Each of these accrediting bodies have their own specific criteria, review process, and time frame. Additional information is available at accreditation.fiu.edu.

Classification of Students

Freshmen are degree-seeking students who have earned fewer than 30 credit hours; sophomores have earned at least 30 but fewer than 60 credit hours; juniors have earned at least 60 but fewer than 90 credit hours; seniors have earned 90 credit hours but have yet to earn a baccalaureate degree. Other classifications of students include masters, specialist, doctoral, non-degree seeking undergraduate, and non-degree seeking graduate.

Academic Calendar and Credit Hour

The academic calendar consists of two semesters lasting approximately fifteen weeks for Fall and Spring, and one condensed Summer semester. Semesters may include several shorter sessions.

Beginning in the fall 1981 semester, Florida International University began operating on the semester system. Prior to 1981, the University granted credits under the quarter system. All credit hours on this transcript are expressed in semester hours.

Dean's List

An undergraduate degree-seeking student who earns an FIU term / semester GPA of 3.50 or higher on the basis of completing nine or more credit hours for which grade points are earned, will be placed on the Dean's List for that semester.

Dean's List (Law)

Students who attain a grade point average of 3.00 or higher during any term / semester (excluding summer sessions) are eligible to be included on the Dean's List for that semester. To be included on the Dean's List, full-time students must earn at least 12 credit hours for the semester with a minimum of 6 graded credit hours. For inclusion on this list, part-time students must earn at least 8 credits for the semester with a minimum of 5 credit hours in graded courses.

Graduate GPA

Effective Fall 1992, the "Graduate GPA" includes graduate level courses taken once the student has been admitted into the graduate program only. Once students are admitted to graduate programs, their graduate GPAs excludes grades from undergraduate courses.

Grading System (Fall 2016 to Present)

Grade	Description	Points per Credit Hour
A		4.00
A-		3.67
B+		3.33
B		3.00
B-		2.67
C+		2.33
C		2.00
D		1.00
F	Failure	0.00
F0	Failure based on non-attendance	0.00
P	Satisfactory (Pass)	N/A
EM	Departmental Examination	N/A
IN	Incomplete	N/A
AU	Audit	N/A
W	Withdrawn from course	N/A
WA	Administratively Withdrawn	N/A
WI	Withdrawn from the University	N/A
+	National / International Student Exchange Credit	N/A
U	Unsatisfactory	N/A
S	Satisfactory	N/A
DR	Dropped Course	N/A
NC	No Credit Earned	N/A
NG	No grade assigned by instructor (system generated)	N/A
TR	General grade for test and/or courses accepted for Transfer credit	N/A

For a complete list of historical grades, please visit <https://onestop.fiu.edu/classes/grades/>.

Florida Statewide Course Numbering System (SCNS)

1000-2999 - Undergraduate - lower division
 3000-4999 - Undergraduate - upper division
 5000 and above - Graduate and Professional

For more information visit the State of Florida SCNS <https://flscns.fldoe.org/>

Repeated Courses

Students may repeat courses, both the original and repeat grades will be used in the computation of GPA. For non-repeatable courses, credit for only one attempt will apply towards graduation. Undergraduate students may apply for grade forgiveness, for a maximum of 3 classes, and only one grade will count towards the GPA calculation. Repeat attempts and forgiveness are noted on the transcript. All attempts and grades will remain on the student academic record/transcript.

Student Conduct and Academic Integrity

For student disciplinary information contact: Office of Student Conduct and Academic Integrity at Phone: (305) 348-3939 / Fax: (305) 348-6477
 Email: conduct@fiu.edu Web Page: conduct.fiu.edu

Undergraduate Academic Warning, Probation, and Dismissal

An undergraduate student whose cumulative GPA falls below a 2.00 will be placed on warning. An undergraduate student who is on warning whose cumulative GPA remains below 2.00 will be placed on probation. An undergraduate student on probation who fails to achieve a cumulative and term GPA of 2.00 or greater will be dismissed from his or her program and the University.

An undergraduate student will not be dismissed from the University prior to attempting 20 semester hours of coursework. The student will be ineligible to enroll for a minimum of one year. After one year, a dismissed student may apply for re-admission to the University in the same or a different program; the student can also register as a non-degree seeking student.

Graduate Academic Warning, Probation, and Dismissal

A graduate student whose cumulative GPA falls below a 3.00 will be placed on warning. A graduate student who is on warning whose cumulative GPA remains below 3.00 will be placed on probation. A graduate student on probation who fails to achieve a cumulative and term GPA of 3.00 or greater will be dismissed from his or her program and the University.

A graduate student will not be dismissed from the University prior to attempting 12 semester hours of coursework. The student will be ineligible to enroll for a minimum of one year. After one year, a dismissed student may apply for re-admission to the University in the same or a different program; the student can also register as a non-degree seeking student.

Undergraduate Academic Amnesty

This policy allows FIU undergraduate students who have a cumulative GPA of less than 2.00 and have not been enrolled in any university or college for at least five calendar years to reapply for admissions under academic amnesty. If readmission is approved, students will be readmitted with a new GPA of 0.00. No previously earned grades will be included in this GPA, but credit for previous courses in which students earned a grade of C or better may be applied toward the degree. Transcripts for students who are granted amnesty will retain all courses and their original grades; for the readmission term, transcripts will contain the following statement: "READMITTED – ACADEMIC AMNESTY."

Undergraduate Academic Salvage

This policy allows FIU undergraduate students who were academically dismissed from the University or whose GPA fell below 2.00, and who subsequently received an Associate in Arts degree from another Florida public institution of higher learning, to reapply for admissions. If re-admitted, students will begin with a new FIU grade point average of 0.00. Students will be credited with a maximum of 60 semester credit hours. Transcripts for students who are granted salvage will retain all courses and their original grades; for the readmission term, transcripts will contain the following statement: "READMITTED– ACADEMIC SALVAGE."

Revision Date: 12/09/2021

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UNIVERSITY OF HARTFORD

200 BLOOMFIELD AVENUE
WEST HARTFORD, CT 06117

Student No:

Date of Birth: :

Date Issued: 23-JUN-2022

Record of: Barbara McFarland
Current Name: Barbara McFarland
Issued To: Dr. Sheila Solernou, Gateway C
Parchment DocumentID: TWDZBM7M

OFFICIAL

Page: 1

Course Level: Graduate
Advisor:

Current Program
Master of Science Nursing
College : Educ., Nursing & Health Prof.
Major : Nursing

Degrees Awarded Master of Science Nursing 15-MAY-2005
Primary Degree
Major : Nursing

SUBJ NO.	COURSE TITLE	CRED GRD	PTS R
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Institution Information continued:

Fall Term 2004

NUR 621	Advanced Nursing Practice	3.00 A	12.00
NUR 627	Theor.Basis Nursing Education	3.00 B-	8.01
Ehrs: 6.00 GPA-Hrs: 6.00 QPts: 20.01 GPA:			3.33

Spring Term 2005

NUR 631	Practicum&Seminar Nursing Ed.	4.00 A	16.00
NUR 633	Prespective Transformation II	3.00 A	12.00
Ehrs: 7.00 GPA-Hrs: 7.00 QPts: 28.00 GPA:			4.00

Summer Term 2005

NUR 690	ST: End-of-Life Nursing Care	3.00 A	12.00
Ehrs: 3.00 GPA-Hrs: 3.00 QPts: 12.00 GPA:			4.00

***** TRANSCRIPT TOTALS *****

Earned Hrs		GPA Hrs	Points	GPA
TOTAL INSTITUTION	34.00	34.00	126.01	3.70

TOTAL TRANSFER	0.00	0.00	0.00	0.00
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OVERALL	34.00	34.00	126.01	3.70
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***** END OF TRANSCRIPT *****

SUBJ NO.	COURSE TITLE	CRED GRD	PTS R
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INSTITUTION CREDIT:

Spring Term 2003

NUR 615	Th of Lrning&Teach Health Prof	3.00 A-	11.01
Ehrs: 3.00 GPA-Hrs: 3.00 QPts: 11.01 GPA:			3.67

Summer Term 2003

NUR 612	Process of Patient Education	3.00 B+	9.99
Ehrs: 3.00 GPA-Hrs: 3.00 QPts: 9.99 GPA:			3.33

Fall Term 2003

NUR 609	Perspective Transformation I	3.00 A	12.00
Ehrs: 3.00 GPA-Hrs: 3.00 QPts: 12.00 GPA:			4.00

Spring Term 2004

NUR 610	Theoretical Perspectives Nur	3.00 A	12.00
NUR 619	Scholarly Inquiry in Nursing	3.00 B	9.00
Ehrs: 6.00 GPA-Hrs: 6.00 QPts: 21.00 GPA:			3.50

Summer Term 2004

NUR 607	Writing in Nursing	3.00 A	12.00
Ehrs: 3.00 GPA-Hrs: 3.00 QPts: 12.00 GPA:			4.00

***** CONTINUED ON NEXT COLUMN *****

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NATALIE N. DURANT
DIRECTOR REGISTRATION AND RECORDS

**UNIVERSITY OF HARTFORD
WEST HARTFORD, CONNECTICUT 06117
OFFICE OF THE REGISTRAR**

The University of Hartford is an independent co-educational institution of higher learning and is accredited by the New England Association of Schools and Colleges.

ACADEMIC CREDIT

The academic year is composed of a fall semester, winter term, a spring semester, and two summer terms. Academic credit is awarded in terms of semester hours. Regardless of the length of the semester or term, the same academic credit is given for a course and a standing number of contact hours is maintained. Each course listed on the transcript will include the following information: Subject and Course Number, Descriptive Title, Semester Hours of Credit, and Grade.

COURSE NUMBERING SYSTEM

In addition to the alphabetic code designating an area of instruction, each course is assigned a three digit number.

9/1/1957-5/13/1984. The first and third digits are for institutional classification purposes only. The second (or middle) digit indicates the level of work as follows: 1-4 level courses are undergraduate only; 5 level courses are graduate level courses intended primarily for graduate students but which are open by special permission to advanced undergraduates; 6 and above level courses are for graduate students only, a zero (0) in the middle position indicates a non-credit course.

5/14/1984-Present: The University's course numbering system was changed effective for the Summer 1984 and subsequent terms. Under the current numbering system, the first digit identifies the course level as follows:

- 0 = Non-credit course
- 1, 2, 3, or 4 = Undergraduate level course
- 5 = Graduate level course which may be taken by advanced undergraduates
- 6, 7, 8, or 9 = Graduate level course open only to graduate students

EXPLANATION OF GRADES

OTHER CURRENT SYMBOLS

GRADE	DEFINITION	GRADE POINTS PER CREDIT HOUR		
		AS OF 9/1/82	1/1/66-8/31/82	9/1/57-12/31/65
A	Excellent	4.00	4.00	4.00
A-	(9/1/57-8/31/82)	3.67	4.00	NA
B+		3.33	3.50	NA
B	Good	3.00	3.00	3.00
B-	(9/1/57-8/31/82)	2.67	3.00	NA
C+		2.33	2.50	NA
C	Satisfactory	2.00	2.00	2.00
C-	(9/1/57-8/31/82)	1.67	2.00	NA
D+		1.33	1.50	NA
D	Poor	1.00	1.00	1.00
D-	(9/1/57-8/31/82)	0.67	1.00	NA
F	Failure	0	0	0

GRADE	DEFINITION	GRADE POINTS PER CREDIT HOUR		
		AS OF 9/1/82	9/1/66-8/31/82	9/1/57-8/31/66
A	Excellent	4.00	4.00	NA
A-	(9/1/61-8/31/82)	3.67	NA	NA
B+		3.33	NA	NA
B	Good	3.00	3.00	NA
B-	(9/1/61-8/31/82)	2.67	NA	NA
C+		2.33	NA	NA
C	Satisfactory	2.00	2.00	NA
C-	(9/1/61-8/31/82)	1.67	NA	NA
D+		1.33	NA	NA
D	Poor	1.00	NA	NA
D-	(9/1/61-8/31/82)	0.67	NA	NA
F	Failure	0	0	NA
H	Honors	NA	NA	*
G	Graduate Credit	NA	NA	*
N	Not Accepted for Graduate Credit	NA	NA	*

NA: Grade NOT used in Grading System for period shown.

*: Grade used, but no grade point equivalent assigned.

Effective 9/1/82. The policy for assigning plus and minus grades or grades lower than C in schools offering graduate programs is to be determined by the individual school or college. Grades in the A range are excellent, in the B range are good, in the C range fair, and in the D range poor. F is failure.

Prior to Summer 1984:

If an asterisk appears to the left of the course code, the student has repeated that course. A student repeating a course he/she has previously Failed will receive additional credits attempted, credits earned, and grade points. A student repeating a course he/she has previously Passed will receive additional credits attempted and grade points, but will not receive additional credits earned.

P Pass "P" is counted in hours earned but excluded from hours attempted and from computation of grade points.

NP No Pass "NP" is not counted in hours attempted, hours earned, or in the grade points.

W Withdrawn is not counted in hours passed or grade points.

WF Withdrawn Failure is treated as an "F."

I Incomplete is not counted in hours attempted, hours earned, or grade points. Converted to mandatory "F" for undergraduates if course is not completed by the end of the next regular semester while in residence. This policy became effective in the fall semester of 1969. There is no time restriction for graduate students to make up the incompletes.

AUDIT will not be calculated into semester or cumulative totals.

V if a "V" appears to the left of the course code, the credits and grade points of this course do not enter directly into general University summaries and grade point averages.

NG No Grade is issued by the instructor... It is not counted in hours attempted, hours earned, or grade points. This is a temporary code until a grade is issued.

NR No Report on entire class is issued by the instructor... It is not counted in hours attempted, hours earned, or grade points. This is a temporary code until the report is issued.

Effective Summer 1984 to present:

P Pass "P" is calculated into the semester and cumulative earned hours.

NP No Pass "NP" will not be calculated into semester or cumulative totals.

W Withdrawn will not be calculated into semester and cumulative totals.

I Incomplete "I" will not be calculated into semester and cumulative totals.

NG No Grade Issued "NG" will not be calculated into semester and cumulative totals.

NR No Report From Instructor "NR" Registrar Assigned Only.

AU Audit "AU" will not be calculated into semester and cumulative totals.

V Void if "V" appears to the left of the grade, the credits and grade points of this course do not enter into University summaries and grade point averages.

SP Special Program These courses are non-credit and grades are not given.

Repeat Course Indicators

If "X" appears next to the course code: Student has repeated a previously passed course. Grade points are computed into semester and cumulative totals.

If "R" appears next to the course code: Student has repeated a previously failed course. Credits and grade points are computed into semester and cumulative totals.

If "*" appears to the right of the grade, and the grade is a D+ or lower, the credits and grade points do not enter into University summaries and grade point averages.

As of January 1987

the symbol is used to indicate a non-credit course.

E: The grade is excluded in the grade point average.

UNIVERSITY OF HARTFORD

Record of: John Q. Public

Date Issued: 09-SEP-2017

UNOFFICIAL

Student No: 000-00-0000

PAGE: 1

Course Level: Undergraduate
Matriculated: Fall Term 2004

Current College(s): College of Arts and

Current Major(s): Psychology

Degree(s) awarded:
Major:

SUBJ COURSE NO. COURSE TITLE CRED GRD PTS R

TRANSFER CREDIT: Contains name of transfer institution, attendance period, and transfer credits for that attendance period.

Fall Term 2004

College of Arts and Sciences
No Major
Undergraduate

1010	Intro to Biology	4.00	B	12.00
ENG 120	English Composition & Writing	3.00	A	12.00
PSY 110	Psychology I	3.00	A-	11.01
SOC 110	Basics of Sociology	3.00	B+	9.99

Ehrs: 13.00 GPA-Hrs: 13.00 Pts: 45.00 GPA: 3.46

TRANSCRIPT TOTALS

	Earned Hrs	GPA Hrs	Points	GPA
INSTITUTIONAL TOTAL	56.00	56.00	185.33	3.30
TRANSFER TOTALS	0.00	0.00	0.00	0.00
OVERALL TOTALS	56.00	56.00	185.33	3.30

END OF TRANSCRIPT

EXPLANATION OF TRANSCRIPT KEY

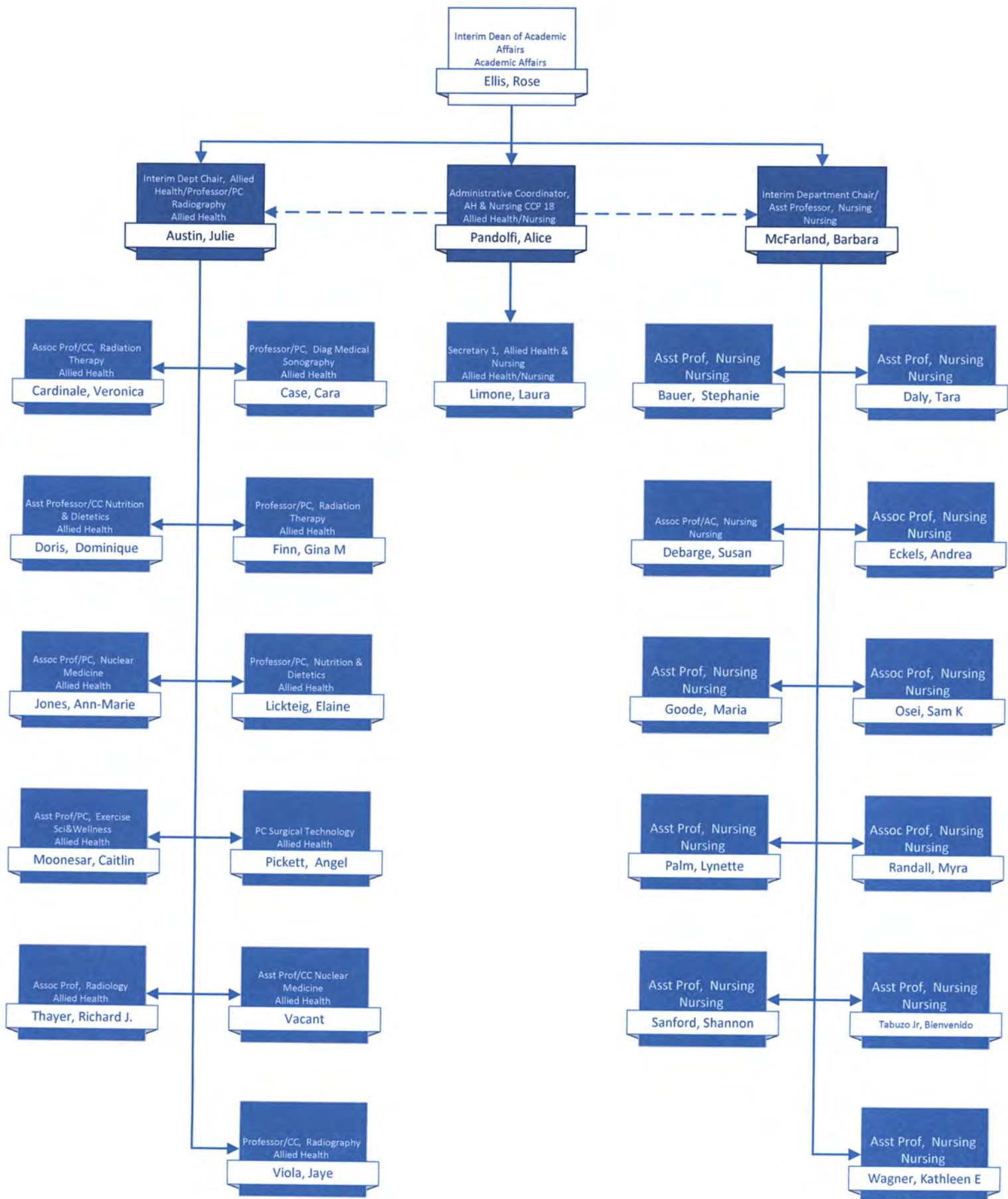
- 1 Date transcript was produced
- 2 Student's name
- 3 Student's ID number
- 4 COLLEGE: Indicates the college in which the student is currently enrolled
- 5 MAJOR: Indicates the major in which the student is enrolled.
- 6 Degree information pertaining to the student including the name of the degree, date, any honors, and the major in which the degree was earned
- 7 Repeat course
- 8 TRANSFER CREDIT: contains transfer credit information including: transfer institution name, institution attendance period, and transfer credits for that attendance period.
- 9 Semester in which the courses immediately following were taken
- 10 College in which student is enrolled in a particular semester
- 11 Subject area of course
- 12 Course number
- 13 Course title
- 14 Course credits
- 15 Grade earned
- 16 Grade points earned
- 17 E HRS: earned hours
- 18 GPA-HRS: grade point average hours
- 19 PTS: cumulative grade points
- 20 GPA: semester grade point average
- 21 Cumulative earned points
- 22 Cumulative GPA hours
- 23 Cumulative grade points
- 24 Cumulative grade point average
- 25 Cumulative transfer hours
- 26 Overall total hours

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UNIVERSITY OF HARTFORD
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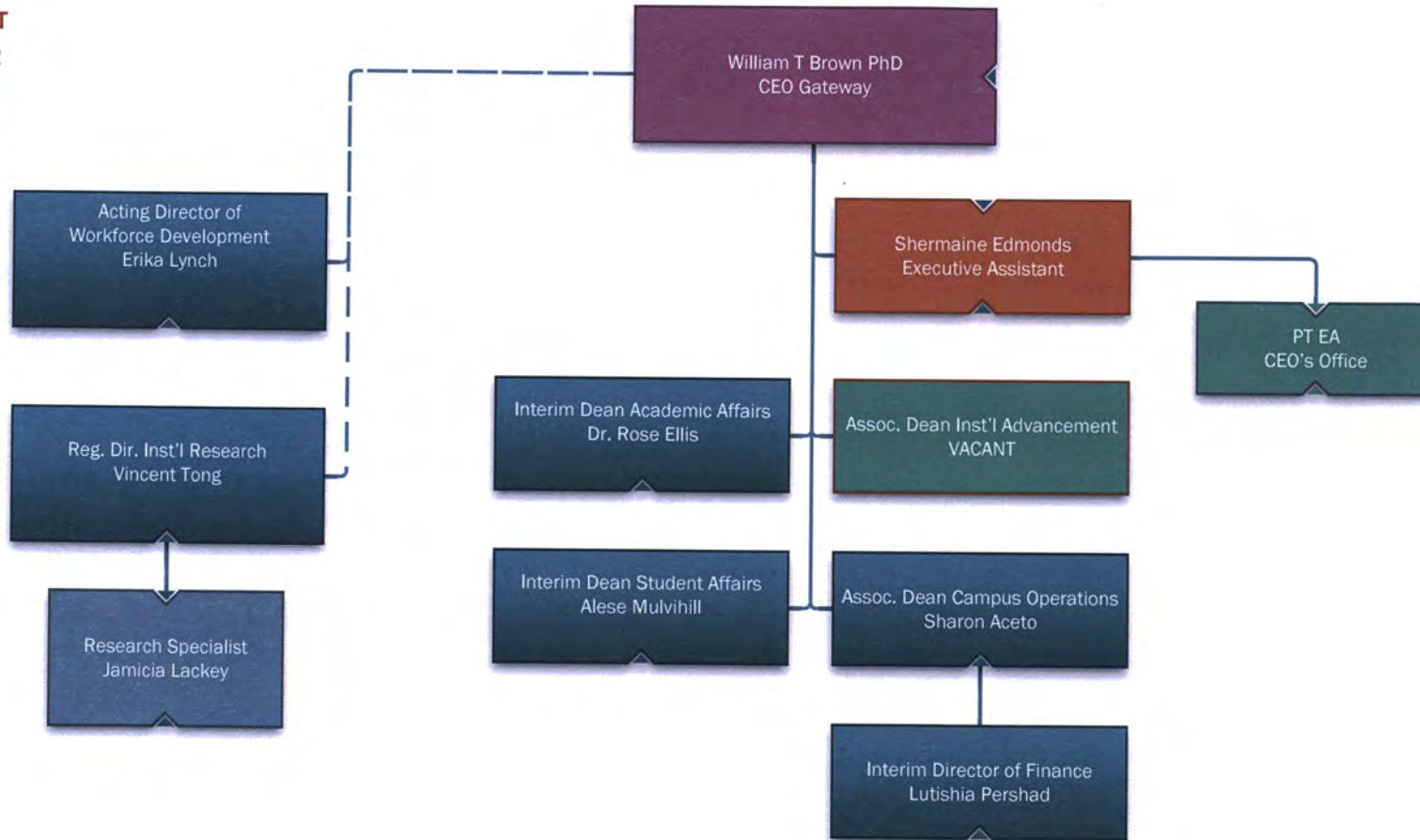
NATALIE N. DUPONT
DIRECTOR, REGISTRATION AND RECORDS



GATEWAY COMMUNITY COLLEGE

ORGANIZATIONAL CHART
EXECUTIVE DIVISION AS OF 08/29/2022

LEGEND
EXECUTIVE
ASSISTANT
MANAGER
POSITION
VACANT





DR. SUSAN L. DAVIS, R.N.,
& RICHARD J. HENLEY
COLLEGE OF NURSING

Sacred Heart University

August 31, 2022

Helen Smith, RN, MSN
Nurse Consultant/Investigator
410 Capitol Ave. MS#12 HSR
PO Box 340308
Hartford, CT 06134

Dear Ms. Smith,

Sacred Heart University wishes to petition the State Board of Nurse Examiners for a temporary 12-month waiver for Ariana Rick, RN, BSN-BC, in order to enable her to serve as clinical instructor for the Fall 2022 semester. The Board previously met and approved a 12-month waiver for Ms. Rick on 8/11/21. We propose that Ariana Rick provide adult psychiatric clinical instruction at St. Vincent's Behavioral Center in Westport, CT for junior nursing students in their NU 300: Psychiatric Mental Health Nursing course.

Ms. Rick holds a BSN degree from Fairfield and is currently completing her DNP with a specialty as a Psychiatric Nurse Practitioner at Fairfield University with an expected graduation date of May 2023. Ms. Rick currently functions as a full-time psych RN at St. Vincent's Behavioral Health Services in Westport working with children and adolescents and works on the adult unit as needed. The candidate's education, along with her clinical experience, are appropriate to support the requirements of the DHCON course NU 300: Psychiatric Mental Health Nursing. Ms. Rick has worked in the role of clinical instructor in NU 300 for the past two years. During that time, she worked with eight clinical groups and a total of 54 students. Student feedback is favorable for Ms. Rick highlighting her passion and enthusiasm for behavioral health nursing which translated into a positive student experience and a quest to learn which is essential in this ever growing and complex specialty area. Direct quotes from students include: "She was very positive and loved psychiatric mental health nursing, which then made me excited to learn more about it" as well as "I liked how she was very positive. She encouraged students and made them feel comfortable" additionally "she has such a passion for psych nursing, she was constantly asking us questions and giving us background information to learn from past

experiences”, “I am extremely grateful that I was placed with my clinical instructor because she kept me engaged in the clinical experience and really showed us that she wanted us to have a good and meaningful experience. During a very personally challenging semester, she helped me regain my confidence as a future nurse and showed me that I can make a difference in the lives of patients in the slightest way "and finally “she was helpful at debriefing of the situations, and I thought it was very helpful”.

Professor Norman Weller MSN, RN is the course coordinator who is knowledgeable and experienced with the clinical site and is responsible for the oversight of students and instructors in the NU 300 course. He oriented Ms. Rick to the role of clinical instructor previously and will oversee her clinical experience and be her mentor while she is instructing at St. Vincents. Since Ms. Rick is a current employee of the facility where she will be assigned, she is very knowledgeable about the policies, processes and procedures specific to the facility. Additionally, the managers of the unit, Linda Scillia, Karra Diffley or Patricia Dennis, will facilitate orientation to the unit and will be contacts for her at the site.

Sacred Heart University’s College of Nursing has 40 full time faculty, 2 part time faculty, approximately 80 UG adjunct clinical faculty, and 10 Graduate adjunct clinical faculty. We currently have one permanent waiver for Adetutu Olomola.

We appreciate the prompt response and support of the Department of Public Health and the State Board of Nurse Examiners. Please feel free to contact me with any further questions at ferrilloh@sacredheart.edu or 203-416-3931. Thank you in advance for your attention to this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Heather Ferrillo", with a stylized, flowing script.

Heather Ferrillo, PhD, APRN, FNP-BC, CNE
Chair, Undergraduate Nursing Programs

Ariana Rick, DNPc, BSN, RN-BC

Employment

Bridges Healthcare- Student Intern

Milford, CT
May 2021-May 2022

- Provided direct care in an outpatient setting to child/adolescent and adult clients.
- Worked closely with psychiatric APRN and LCSW preceptors to develop med management and therapy skills
- Attended adult IOP and other meetings as well as provided documentation in the clinical setting.

Sacred Heart University- Adjunct Mental Health Nursing Clinical Professor

Fairfield, CT
September 2020-Present

- Provided an example of safe nursing practice to undergraduate nursing students.
- Worked closely with Bridgeport Hospital Adult Psychiatric Floor staff to ensure an enriching clinical experience for students
- Graded curriculum-based assignments such as nursing care plans and process reports.

St. Vincent's Behavioral Health Services- Staff Nurse on North II (Child/Adolescent Unit)

Westport, CT
February 2017-Present

- Provided direct patient care and interaction for psychiatric patients aged 5-17, as well as when needed worked with adult psychiatric patients on dual diagnosis and adult psychiatric units.
- Lead challenging therapeutic groups to teach patients self-care, nutrition, and other topics
- Worked closely with other staff members to ensure a safe and satisfactory patient experience

Education

Fairfield University

Doctorate of Nursing Practice

Fairfield, CT
May 2023

Specialty: Psychiatric Mental Health Nurse Practitioner across the Lifespan

Fairfield University

Bachelor of Science

Fairfield, CT
August 2016

Major: Nursing (Second Degree Accelerated BSN Nursing program)

GPA: 3.75, Magna Cum Laude graduate

Fairfield University

Bachelor of Arts

Fairfield, CT
May 2015

Major: Psychology

GPA: 3.76

Honors: Dean's list (7 semesters), Loyola Scholarship, Magna Cum Laude graduate

Certifications: BLS CPR/AED certification, State of CT RN license (#138344)

Other Experience

Fairfield University

Peer Tutor of Biological Bases of Behavior

Fairfield, CT
January 2014-May 2015

- Provided extra support for students taking a challenging required psychology course
- Facilitated group learning and review sessions aimed to clarify difficult subject matter
- Worked closely with professor to oversee student's well-being and problem areas

Fairfield University

Teaching Internship: Biological Bases of Behavior

Fairfield, CT
September 2014-December 2014

- Accompanied college professor of Biological Bases of Behavior in teaching the class
- Graded exams, prepared original quizzes, and created hands-on activities for students
- Implemented regular review sessions and office hours for students as well as attended meetings with professor

Additional Information

Florence Nightingale 2020 Award for Nursing Excellence Recipient
ANCC Psychiatric and Mental Health Nurse Board Certification

March 2020
October 2019-Present

Record of: Ariana M. Rick



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Issued To: ARIANA MARY RICK
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FOR OFFICIAL USE

Course Level: Undergraduate
Matriculated: Summer 2015

Program of Study
College : School of Nursing (PT Matric)
Major : Nursing

Comments:
Rank: 88/758
August grads are not ranked

Degree Awarded: Bachelor of Arts 17-MAY-2015
Ehrs: 13.00 GPA-Hrs: 13.00 QPts: 49.69 GPA: 3.82
College : College of Arts and Sciences
Major : Psychology
Inst. Honors: Magna Cum Laude

Degree Awarded: Bachelor of Science 30-AUG-2016
Ehrs: 12.00 GPA-Hrs: 12.00 QPts: 45.36 GPA: 3.78
College : School of Nursing (PT Matric)
Major : Nursing
Inst. Honors: Magna Cum Laude
Sigma Theta Tau

SUBJ NO.	COURSE TITLE	CRED GRD	PTS R
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Institution Information continued:

Spring 2012			
CH 0084	General Chemistry for Health Science	3.00 A-	11.01
CH 0084L	General Chemistry for Health Science Lab	1.00 A	4.00
EN 0012	Texts and Contexts II: Writing About Literature	3.00 A-	11.01
PH 0010	Questions in Ancient and Medieval Philosophy	3.00 A-	11.01
PY 0101	General Psychology	3.00 A	12.00
SP 0211	Intermediate Spanish II	4.00 A	16.00
Ehrs: 17.00 GPA-Hrs: 17.00 QPts: 65.03 GPA: 3.83		Good Standing	

Fall 2012			
EN 0101	Gateway/Litr & Cultrl Studies	3.00 A-	11.01
MA 0017	Intro Probability & Statistics	3.00 A	12.00
PY 0264	Developmental Psychology for Majors with Lab	4.00 B+	13.32
RS 0101E	Exploring Religion: Peoples of the Book, Sacred Texts, and Their Communities	3.00 A	12.00
SA 0012	Foundation:Drawing	3.00 A-	11.01
Ehrs: 16.00 GPA-Hrs: 16.00 QPts: 59.34 GPA: 3.71		Good Standing	

SUBJ NO.	COURSE TITLE	CRED GRD	PTS R
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INSTITUTION CREDIT:

Fall 2011			
AY 0110	Biological Anthropology	3.00 A	12.00
BI 0170	General Biology I	4.00 B-	10.68
EN 0011	Texts and Contexts I: Writing as Craft and Inquiry	3.00 B	9.00
FE 0001	First Year Experience	0.00 S	0.00
SP 0210	Intermediate Spanish I	4.00 A	16.00
Ehrs: 14.00 GPA-Hrs: 14.00 QPts: 47.68 GPA: 3.41		Good Standing	

Spring 2013			
BI 0151	ElementsofMicrobio(Nsmjrsonly)	4.00 B+	13.32
MA 0019	Introduction to Calculus	3.00 B+	9.99
PY 0251	Abnormal Psychology-Majors	3.00 A-	11.01
PY 0290	Drugs and Behavior	3.00 A	12.00
Ehrs: 13.00 GPA-Hrs: 13.00 QPts: 46.32 GPA: 3.56		Good Standing	

***** CONTINUED ON NEXT COLUMN *****

Summer 2013			
BI 0107	Human Anatomy & Physiology	4.00 A	16.00

***** CONTINUED ON PAGE 2 *****

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Lynn M. Kohn, University Registrar

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Record of: Ariana M. Rick
Level: Undergraduate



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SUBJ NO.	COURSE TITLE	CRED	GRD	PTS	R	SUBJ NO.	COURSE TITLE	CRED	GRD	PTS	R
Institution Information continued:						Institution Information continued:					
B.	0108	Human Anatomy and Physiology	4.00	A	16.00	PY	0365L	Neuroanatomy and Behavior Lab	0.00	A	0.00
		Ehrs: 8.00 GPA-Hrs: 8.00 QPts: 32.00	GPA:	4.00		SA	0139	Watercolor	3.00	A	12.00
Good Standing						TA	0030	Acting I	3.00	A	12.00
						Ehrs: 13.00 GPA-Hrs: 13.00 QPts: 49.69 GPA: 3.82					
Fall 2010						Good Standing					
H.	0910	Origins of the Modern World Since 1500	3.00	A	12.00	Summer 2015					
PY	0201	Statistics for Life Sciences	4.00	A-	14.68	NS	0110	Introduction to Professional Nursing	3.00	A-	11.01
PY	0261	Biological Bases of Behavior	3.00	A	12.00	NS	0112	Healthcare Delivery Systems	3.00	A-	11.01
PY	0262	Sensation and Perception	3.00	A-	11.01	NS	0270	Health Assessment	4.00	A	16.00
RS	0221	Good News of the Gospels	3.00	A	12.00	NS	0272	Geriatric Nursing	4.00	A	16.00
		Ehrs: 16.00 GPA-Hrs: 16.00 QPts: 61.69	GPA:	3.86		NS	0307	Fundmtls of Nursing Care	3.00	A	12.00
Good Standing						Ehrs: 17.00 GPA-Hrs: 17.00 QPts: 66.02 GPA: 3.88					
Spring 2014						Good Standing					
AE	0262	Ethics and the Community	3.00	A	12.00	Fall 2015					
AH	0012	Intro to the Art History of Asia, Africa, and the Americas	3.00	A	12.00	NS	0301	Health and Wellness	4.00	A	16.00
PY	0202	Research Methods in Psychology	4.00	B+	13.32	NS	0303	Basic Pathophysiology and Pharmacology	3.00	A	12.00
P.	0221	Social Psychology	3.00	A-	11.01	NS	0305	Mental Health Nursing	4.00	A	16.00
PY	0272	Hormones and Behavior	3.00	A	12.00	NS	0312	Medical Surgical Nursing I	5.00	B	15.00
		Ehrs: 16.00 GPA-Hrs: 16.00 QPts: 60.33	GPA:	3.77		Ehrs: 16.00 GPA-Hrs: 16.00 QPts: 59.00 GPA: 3.69					
Good Standing						Good Standing					
Fall 2014						Spring 2016					
AE	0261	Intro/ Hist of Western Science	3.00	A	12.00	NS	0310	Foundations of Research for Evidence Based Practice	3.00	A	12.00
AE	0270	Aesthetics	3.00	A-	11.01	NS	0314	Maternal and Newborn Nursing	4.00	B+	13.32
PY	0230	Human Neuropsychology	3.00	A	12.00	NS	0321	Professional Nursing Leadership	3.00	A	12.00
PY	0271	Internship/Teaching of Psychology	3.00	A	12.00	NS	0325	Medical Surgical Nursing II	5.00	B	15.00
PT	0300	Health Psychology Sr Seminar	3.00	A	12.00	Ehrs: 15.00 GPA-Hrs: 15.00 QPts: 52.32 GPA: 3.49					
		Ehrs: 15.00 GPA-Hrs: 15.00 QPts: 59.01	GPA:	3.93	Good Standing						
Good Standing											
Spring 2015						Summer 2016					
PY	0234	Theories in Psychotherapy	3.00	A-	11.01	NS	0323	Pediatric Nursing	4.00	A-	14.68
PY	0365	Neuroanatomy and Behavior	4.00	A-	14.68	***** CONTINUED ON NEXT COLUMN *****					
***** CONTINUED ON NEXT COLUMN *****						***** CONTINUED ON PAGE 3 *****					

EXPLANATION LEGEND AND ADDITIONAL INFORMATION APPEAR ON REVERSE SIDE

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Lynn M. Kohm, University Registrar

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Record of: Ariana M. Rick
Level: Undergraduate



Fairfield
UNIVERSITY

ACADEMIC TRANSCRIPT

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SUBJ NO.	COURSE TITLE	CRED GRD	PTS R
Institution Information continued:			
NS 0330	Community, Public and Global Health Nursing	4.00 A	16.00
NS 0332	Transition to Professional Nursing	4.00 A-	14.68
Hrs: 12.00 GPA-Hrs: 12.00 QPts:		45.36 GPA:	3.78

***** TRANSCRIPT TOTALS *****				
	Earned Hrs	GPA Hrs	Points	GPA
TOTAL INSTITUTION	188.00	188.00	703.79	3.74
TOTAL TRANSFER	0.00	0.00	0.00	0.00
OVERALL	188.00	188.00	703.79	3.74
***** END OF TRANSCRIPT *****				

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Lynn M. Kohn, University Registrar

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Record of: Ariana M. Rick



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Issued To: ARIANA MARY RICK
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Accept As Official

Course Level: Doctorate
Matriculated: Fall 2019

SUBJ NO. COURSE TITLE CRED GRD PTS R

Institution Information continued:

Program of Study

College : Egan School of Nursing/Health
Major : PMHNP Across the Lifespan

Fall 2020
NURS 7608 Research Methods for
Evidenced-Based Practice 3.00 A 12.00

SUBJ NO. COURSE TITLE CRED GRD PTS R

NURS 7650 Psychopathology 3.00 A 12.00
NURS 7651 Mental Health Nursing of
Children and Adolescents 2.00 A 8.00

INSTITUTION CREDIT:

Ehrs: 8.00 GPA-Hrs: 8.00 QPts: 32.00 GPA: 4.00
Good Standing

Fall 2019

NS 0610 Advanced Nursing Roles and
Reflective Practice 3.00 A 12.00

Spring 2021

NURS 7601 Epidemiology and Biostatistics 3.00 B+ 9.99

NS 0640 Advanced Physiology and
Pathophysiology 3.00 B+ 9.99

NURS 7652 Mental Health Nursing of
Individuals Across the
Lifespan 3.00 A 12.00

Ehrs: 6.00 GPA-Hrs: 6.00 QPts: 21.99 GPA: 3.67
Good Standing

NURS 7659 Foundational Clinical Skills
for Advanced Psychiatric
Nursing Practice 3.00 A 12.00

Spring 2020

The spring 2020 semester was marked by a
mid-semester transition to remote instruction in
response to the COVID-19 global pandemic. Readers
of the transcript are advised to consider grades
across all semesters as the best representation
of a student's academic achievement.

Ehrs: 9.00 GPA-Hrs: 9.00 QPts: 33.99 GPA: 3.78
Good Standing

Summer 2021

NURS 7667 Psychopharmacology 2.00 A 8.00

NURS 7954 Practicum I: PMHNP 4.00 A 16.00

Ehrs: 6.00 GPA-Hrs: 6.00 QPts: 24.00 GPA: 4.00
Good Standing

NS 0644 Advanced Health Assessment 4.00 A 16.00

NS 0641 Advanced Pharmacology 3.00 B+ 9.99

Fall 2021

NURS 7661 Mental Health Nursing of
Groups and Families Across
the Lifespan 2.00 A 8.00

NS 0647 DNP Immersion 1.00 P 0.00

NS 0647 DNP Seminar I 1.00 A 4.00

Ehrs: 9.00 GPA-Hrs: 8.00 QPts: 29.99 GPA: 3.75
Good Standing

NURS 7687 DNP Immersion 2.00 P 0.00

NURS 7955 Practicum II: PMHNP 4.00 A 16.00

Ehrs: 8.00 GPA-Hrs: 6.00 QPts: 24.00 GPA: 4.00
Good Standing

NS 0610 Advanced Healthcare Policy 3.00 A 12.00

NS 0611 Population Health 3.00 A 12.00

Ehrs: 6.00 GPA-Hrs: 6.00 QPts: 24.00 GPA: 4.00

***** CONTINUED ON PAGE 2 *****

***** CONTINUED ON NEXT COLUMN *****

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Lynn M. Kohn, University Registrar

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Record of: Ariana M. Rick
Level: Doctorate



Fairfield
UNIVERSITY

ACADEMIC TRANSCRIPT

SUBJ NO.	COURSE TITLE	CRED GRD	PTS R
----------	--------------	----------	-------

Institution Information continued:

Spring 2022

NURS 7615	Leadership and Interprofessional Collaboration	3.00 A	12.00
NURS 7663	Primary Mental Health Nursing of At-Risk Populations Across the Lifespan	2.00 A	8.00
NURS 7956	Practicum III: PMHNP	4.00 A	16.00
Ehrs: 9.00 GPA-Hrs: 9.00 QPts: 36.00 GPA: 4.00			

Good Standing

Summer 2022

NURS 7612	Research Translation for Clinical Practice	3.00 A	12.00
NURS 7611	IT for Healthcare Improvement	3.00 A	12.00
Ehrs: 6.00 GPA-Hrs: 6.00 QPts: 24.00 GPA: 4.00			

IN PROGRESS WORK

NURS 7687	DNP Immersion	1.00	IN PROGRESS
In Progress Credits 1.00			

Fall 2022

IN PROGRESS WORK

NURS 7610	Finance and Quality Management in Healthcare Organizations	3.00	IN PROGRESS
NURS 7687	DNP Immersion	1.00	IN PROGRESS
NURS 7699	DNP Seminar II	1.00	IN PROGRESS
In Progress Credits 5.00			

***** TRANSCRIPT TOTALS *****

	Earned Hrs	GPA Hrs	Points	GPA
TOTAL INSTITUTION	67.00	64.00	249.97	3.91
TOTAL TRANSFER	0.00	0.00	0.00	0.00
OVERALL	67.00	64.00	249.97	3.91

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Lynne M. Kutrim, University Registrar

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Fairfield University
EGAN
School of Nursing
& Health Studies

9/6/22

I, Kate Wheeler, hereby certify that Ariana Rick is currently enrolled as a full-time graduate student in good standing in our Psychiatric Nurse Practitioner Program at Fairfield University. Ariana's anticipated graduation date is May 21ST, 2023

If you have any questions or need additional information, please contact me at kwheeler@mail.fairfield.edu.

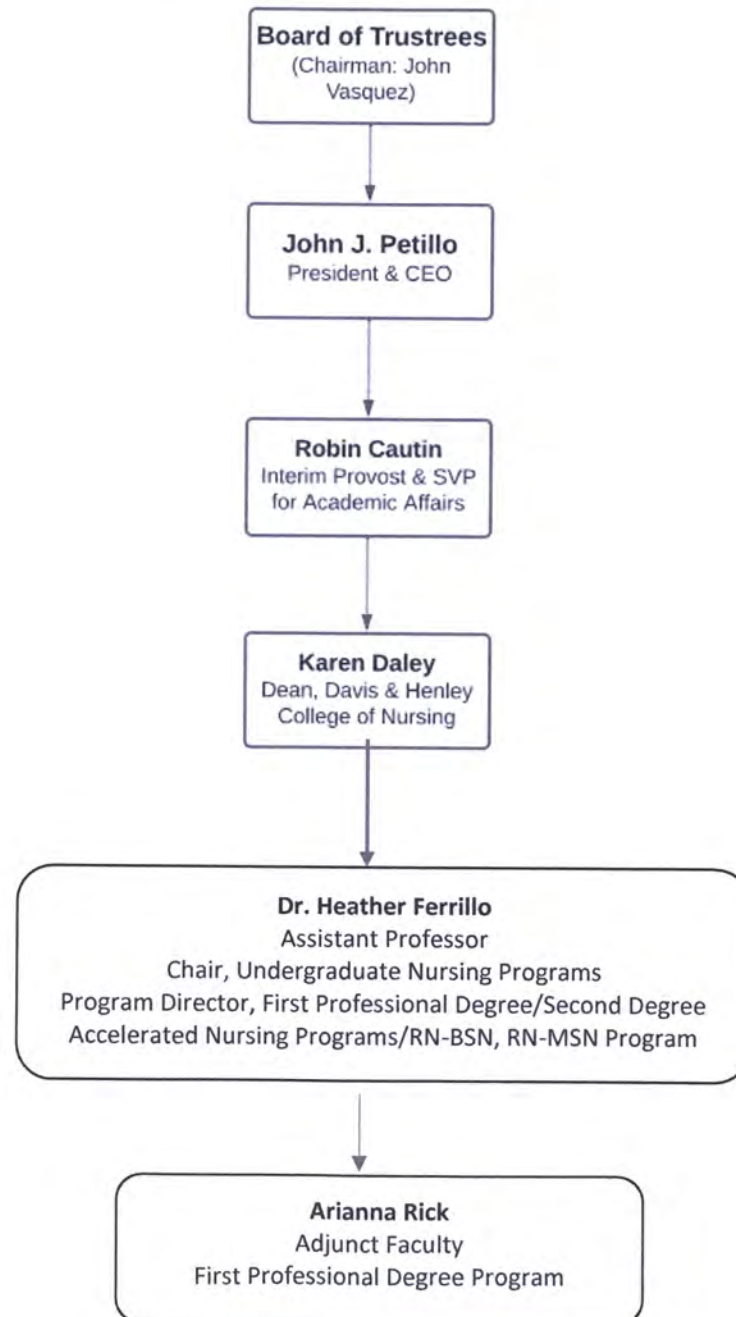
Sincerely,

Kate Wheeler

Kate Wheeler Ph.D., APRN-BC, FAAN
Professor
Fairfield University
School of Nursing
1073 North Benson Road
Fairfield, CT 06824
Phone: (203) 254-4000 X2708
Fax: (203) 254-4126



Sacred Heart University Organizational Chart



Helen Smith, RN, MSN

Nurse Consultant/ Investigator

410 Capital Ave. MS#12HSr

PO Box 340308

Hartford, CT 06134

Dear Ms. Smith;

University of Bridgeport wishes to petition the State Board of Nurse Examiners for a temporary 6-month waiver for Elliot Wolfer, BSN, RN, in order to enable him to serve as FT faculty for the fall semester. We propose the Mr. Wolfer teach the NURS 202: Fundamentals in Nursing Course for the sophomore nursing students along with two of the associated lab sections for NURS 202. This is a first semester skills course for our new students and is an appropriate fit for Mr. Wolfer's expertise. He has been an instructor at Porter and Chester Institute for three years and has 14 years of nursing experience.

Mr. Wolfer holds a BSN degree from Western Governor's University and is currently completing his MSN in Nursing Education at Aspen University with an expected graduation date of December 2022. The candidate's education along with his clinical experience, are appropriate to support the requirements of the UBSN Course.

Mr. Anthony Kepler, MSN, RN will orient Mr. Wolfer to the role of faculty. He will meet with Mr. Wolfer on a regular basis and serve as his mentor.

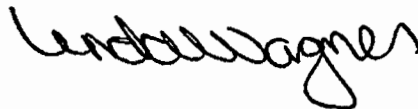
The University Of Bridgeport School Of Nursing has 15 full time faculty, and approximately 40 adjunct clinical faculty. We currently have no waivers.

We appreciate the prompt response and support of the Department of Public Health and the State Board of Nurse Examiners. Please feel free to contact me with any further questions at lwagner@bridgeport.edu or 203-576-4269. Thank you in advance for your attention to this matter.

Linda Wagner, EdD, MSN, RN

Associate Professor

Director, School of Nursing





XXXXXXXXXX



ELLIOT WOLFER

MSN (in progress), BSN, RN

EXPERIENCE

PORTER CHESTER INSTITUTE - LPN PROGRAM | Instructor (Clinical and Classroom)
Waterbury, CT | *June 2019 – present*

- Lead instructor for multiple lecture topics including Nursing Fundamentals, Life Science, Perspectives, Pharmacology, Mental Health, and Clinical Experiences
- Creation and implementation of skills-based learning modules for all courses in a hands-on lab setting
- Develop and modify lecture materials and exams in accordance with curriculum and NCLEX-PN standards
- Offer course content via multiple learning platforms to maximize student comprehension based on specific learning styles (i.e. auditory vs visual learners)
- Create unique educational experiences to encourage student participation and learning
- Clinical instruction for students in an SNF/Rehab facility with a focus on the nursing process including patient evaluation, medication administration, and clinical skills
- Offer flexible office hours to accommodate all student schedules via multiple modes of communication
- Proficient in virtual classroom instruction (Zoom & Canvas LMS) and utilization of modern technology to enhance student learning
- Curriculum Committee member since May 2021

ROCHESTER REGIONAL HEALTH LTC DIVISION | Behavioral Health Educator – DSRIP
Rochester, NY. | *October 2018 – May 2019*

- Responsible for new hire orientation and continuing education programs across 6 long term care (LTC) facilities
- Conducted hands-on training and evaluation of all newly hired CNAs, LPNs, and RNs including:
 - core clinical competencies: patient rights, documentation, person-centered care, scope of practice, and infection and injury prevention
 - focused clinical skills discussion regarding falls, pressure ulcer prevention, and pain management
 - patient transfer aids such as Hoyer lift, SARA lift, HoverJack, etc.
- Responsible for ongoing behavioral health education, dementia training, and other specialized training as necessary
- Led facility specific educators in behavioral health training
- Coordinated educators on competency planning and training
- Used superb teaching technique to adapt training to the audience
- Evaluated teaching outcomes, making revisions as necessary
- Led groups and assisted in guiding team members in the problem-solving process
- Worked in conjunction with educators, leadership, and team members in creation of policies

DEMAY LIVING CENTER – ROCHESTER REGIONAL HEALTH | Clinical Educator
Newark, NY | *September 2017 – May 2019*

- Clinical educator for a 180-bed skilled nursing facility
- Provided and facilitated learning opportunities for employees to promote quality patient care, enhanced wellness, and on-going growth and development

Highly qualified professional Registered Nurse with 14 years of clinical experience, combined with educator, supervisor, and simulation experience.

EDUCATION

MSN Candidate: Nursing
Education Specialty – 2022
Aspen University

BSN – 2016
Western Governors
University

ADN – 2008
SUNY Alfred College

BA Biology – 2006
Alfred University

Handwritten text, possibly a list or notes, located at the top of the page. The text is extremely faint and illegible due to the quality of the scan.



LICENSES & CERTIFICATIONS

Registered Nurse,
Connecticut
License #86663
EXP: 5/2023

BLS / CPR Certification
American Heart
Association
EXP: 12/2023

CHSE Exam Pending
July 2022

Society for Simulation in
Healthcare Member
September 2021

Long Term Care
Leadership Institute RN
Nurse Educator NYSHFA
June 2018

AWARDS & PROFESSIONAL RECOGNITION

Employee of the Month
DeMay Living Center
May 2018

"Lifetime Way" Peer
Recognition Lifetime
Health Urgent Care
2016, 2017

P.A.W.S Award UCONN
Health Center – 2010

Spirit of Nursing Award
State University of New
York – 2008

EXPERIENCE CONTINUED

- Primary responsibilities included:
 - Provided education for 200+ facility staff including clinical and unlicensed/ancillary staff
 - Coordinated orientation for new staff and agency staff members
 - Evaluated and documented clinical staff competence by developing, monitoring, and assessing competencies on a rotating schedule
- Provided in-depth new employee orientation, in-services, and continuing education
- Utilized HealthStream Learning Center to create online learning modules, disseminate new information to staff, and to monitor completion of assigned tasks
- Assisted administration with Plan of Correction following NYS Dept of Health Survey including leading the implementation of the 2018 Plan of Correction, creating educational materials and policies, and coordinating training of staff to ensure 100% compliance in the time allotted

LIFETIME HEALTH URGENT CARE | Interim Nursing Supervisor Rochester, NY | February 2017 – July 2017

- Managed 30+ clinical staff members (RNs, LPNs, and MAs) for three urgent care locations
- Collaborated as part of a cross-functional team, including the Urgent Care Medical Director and Medical Office Supervisor, to ensure excellent staff communication to meet the needs of patients
- Applied a solution-oriented approach to manage staff, resolve conflict, and provide guidance for employee relation issues
- Completed annual employee performance review and training competencies
- Addressed all patients concerns or complaints related to clinical nursing care provided, investigating patient care issues as needed
- Developed and maintained nursing schedule to ensure efficient clinical staffing levels
- Coordinated the hiring, coaching, and termination of staff

LIFETIME HEALTH URGENT CARE | RN Team Coordinator, Educator, Staff Nurse Rochester, NY | October 2015 – September 2017

Team Coordinator/Educator Responsibilities:

- Developed and initiated orientation programs for new nursing staff
- Coordinated education programs, training, and continuing education for all nursing personnel
- Developed initial and annual nursing competencies for all nursing personnel
- Answered urgent questions and assisted in supervisory duties when nursing supervisor was unavailable
- Provided feedback to supervisor regarding staff performances and training needs
- Assisted in creating the clinical nursing schedule

Staff Nurse Responsibilities:

- Roomed and vitalized patients, including assessment of health history
- Performed point of care, CLIA-waived tests, under supervision of provider
- Administered medications via PO, IM, and IV routes
- Cared for patients coming to the clinic for acute migraine management

NYS DEPART. OF CORRECTIONS AND COMMUNITY SUPERVISION | Nurse 2 Soyea, NY | May 2013 – October 2015

- Coordinated and implemented professional nursing interventions for patients incarcerated at a medium security state penitentiary
- Infirmity nurse responsible for coordinating care for all patients housed in the 16-bed medical unit

Page 10 of 10
Date: 10/10/2011
Time: 10:10:10
User: Administrator
IP: 192.168.1.1
Host: 192.168.1.1
Port: 80
Method: GET
Path: /
Status: 200
Size: 1024
MIME: text/html
Request: GET / HTTP/1.1
Response: HTTP/1.1 200 OK
Content-Type: text/html
Content-Length: 1024
Server: Apache/2.2.22 (Ubuntu)



EXPERIENCE CONTINUED

- Provided appropriate patient health screening and teaching, including HIV testing and counseling
- Completed daily rounding with providers and completed orders in accordance with individualized patient treatment plans
- Administered medications via PO, IM, SQ, and IV routes
- Responded to emergencies and conducted daily sick call
- Documented complete, professional, and appropriate record of patient care
- Conducted and participated in individualized tele-health patient encounters

UCONN HEALTH CENTER | Correctional Nurse, Nurse Educator Cheshire, CT | *May 2010 – April 2013*

- Implemented nursing process with inmates including carrying out physicians' orders regarding diet, medication, and treatment
- Performed assessments, change dressings, administer routine tests, monitor and ensure quality care through observation and evaluation
- Utilized critical thinking skills and nursing judgment when administering routine patient care
- Conducted daily sick call, and respond to emergencies
- Conducted training as directed in coordination with the Director of Nursing Education
- Performed education and skills training on the nation's first ever state-of-the-art mobile simulation van

HOSPITAL OF SAINT RAPHAEL | Emergency Room Staff Nurse II New Haven, CT | *October 2008 – May 2010*

- Appropriately triaged and prioritized patients according to needs
- Administered medications as well as performing various nursing procedures, such as catheter placement, NG tube placement, IV insertion, and blood draws
- Assisted physicians during procedures at the bedside, such as conscious sedation
- In charge of codes and traumas for critically ill or injured patients





Aspen University
4615 East Elwood Street, Suite 100
Phoenix, AZ 85040

August 15th, 2022

To Whom It May Concern:

This letter is to confirm that **Elliot Wolfer** is a student at Aspen University. The student is currently enrolled in the **Master of Science in Nursing with a specialization in Nursing Education**. Their start date of the program was on **April 27, 2021**, and their anticipated graduation date is **December 19th, 2022**.

All current terms and future terms are as followed:

Start date: April 27, 2021

End date: Enrolled

Status: Enrolled

Anticipated graduation date: December 19th, 2022

If you have any further questions regarding the student's enrollment at Aspen University, please contact our office at 800-373-7814, Option 5.

Sincerely,

OFFICE OF THE REGISTRAR

Aspen University OPEID: 040803

4615 East Elwood Street, Suite 100

Phoenix, AZ 85040

Phone: (800) 373-7814, Option 5

Fax: 303-200-7428

Student Information

Date Issued : 08.09.2022

First Name	Middle Name	Last Name	Learners ID	Birthdate
Elliot		Wolfer		
Address	City	State/Province	Country	Zip/Postal
		CT	United States	

Program	Degree Earned	Start Date	Conferral Date	Status
Master of Science in Nursing with a specialization in Nursing Education				Enrolled

Master of Science in Nursing with a specialization in Nursing Education

Enrolled

Courses

Course	Course Title	Start Date	End Date	Grade	Credits	GPA
N502	Health Care Systems	04-27-2021	06-21-2021	A	3	4.00
N580	Issues in Nursing Education	04-27-2021	06-21-2021	A	3	4.00
N512	Diverse Populations & Health Care	06-22-2021	08-16-2021	A	3	4.00
N520	Legal and Ethical Issues in Health Care	06-22-2021	08-16-2021	A	3	4.00
N510	Advanced Pathophysiology	08-31-2021	10-25-2021	A-	3	3.67
N511	Advanced Pharmacology	10-26-2021	12-20-2021	A	3	4.00
N518	Advanced Physical Assessment	01-04-2022	02-28-2022	B	3	3.00
N582	Teaching Strategies in Nursing Education	03-01-2022	04-25-2022	A	3	4.00
N584	Curriculum Development, Implementation and Evaluation	05-10-2022	07-04-2022	A	3	4.00
N508	Theory and Research	07-05-2022	08-29-2022	IP		
Total:					27	34.67
					GPA :	3.85

Cumulative GPA : 3.85

Katie Brown
Aspen University Registrar

Western Governors University

4001 S 700 East, #700, Salt Lake City, UT 84107
Academic Transcript

Student Name: Elliot Tobias Wolfer
Other Names:
Current Student Status: Graduated

Student ID:
Date of Birth:
SSN:

Program: Master of Science, Nursing - Education (RN to MSN) Issued for: Elliot Tobias Wolfer
Major: Nursing (RN to MSN)
Course Level: Undergraduate

Date Issued: Aug 11, 2022

Achievements Awarded:

Degree Awarded Bachelor of Science
Major: Nursing
Concentration: None
Date Awarded: Feb 01, 2016

Transfer Credit Accepted By The Institution:

ALFRED UNIVERSITY : 22
SUNY COLG OF TECH AT ALFRED : 6
RN Liscensure : 50
Western Governors University : 5

COURSE #	COURSE TITLE	CU	GRD
NURS C349	Health Assessment	3	Passed
Term: Attempted: 12 Completed: 12			
Term: Feb 2015 - Jul 2015			
NURS RTT1	Organizational Systems and Quality Leadership	3	Passed
NURS C229	Community Health and Population-Focused Nursing Field Experience	2	Not Passed
NURS C156	Advanced Information Management and the Application of Technology	3	Passed
NURS C351	Professional Presence and Influence	2	Passed
NURS C128	Advanced Professional Roles and Values	2	Not Passed
Term: Attempted: 12 Completed: 8			
Term: Feb 2014 - Jul 2014			
SCIE ALT1	Anatomy and Physiology Laboratory	2	Passed
SOSC GLT1	Issues in Behavioral Science	3	Passed
SCIE GRT1	Biochemistry	3	Passed
EWOB ORA1	Orientation	0	Passed
NURS CSC1	Nutrition for Contemporary Society	3	Passed
NURS DPV1	Care of the Older Adult	3	Passed
Term: Attempted: 14 Completed: 14			
Term: Aug 2014 - Jan 2015			
SCIE GMT1	Human Physiology	3	Passed
MATH CJC1	Introduction to Probability and Statistics	3	Passed
NURS C228	Community Health and Population-Focused Nursing	3	Passed


Gabrielle Martinez, MS
Registrar

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Western Governors University

4001 S 700 East, #700, Salt Lake City, UT 84107
Academic Transcript

Page: 2

Student Name: Elliot Tobias Wolfer
Other Names:
Current Student Status: Graduated

Student ID:
Date of Birth:
SSN:
Issued for: Elliot Tobias Wolfer

Program: Bachelor of Science, Nursing
Major: Nursing
Course Level: Undergraduate

Date Issued: Aug 11, 2022

Achievements Awarded:

Degree Awarded Bachelor of Science
Major: Nursing
Concentration: None
Date Awarded: Feb 01, 2016

Transfer Credit Accepted By The Institution:

ALFRED UNIVERSITY : 22
SUNY COLG OF TECH AT ALFRED : 6
RN Liscensure : 50
Western Governors University : 5

COURSE #	COURSE TITLE	CU	GRD
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Term: Aug 2015 - Jan 2016

NURS C229	Community Health and Population-Focused Nursing Field Experience	2	Passed
NURS C304	Professional Roles and Values	3	Passed
NURS C361	Evidence Based Practice and Applied Nursing Research	3	Passed

Term: Attempted: 8 Completed: 8

***** TRANSCRIPT TOTALS *****

	Attempted	Earned
Total Institution:	46	42
Total Transfer/Satisfied:		83
Transfer GPA:		0
Overall:	46	125

***** END OF TRANSCRIPT *****


Gabrielle Martinez, MS
Registrar

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Official Academic Transcript from:
ALFRED STATE COLLEGE
STUDENT RECORDS & FINANCIAL SERVICE
10 UPPER COLLEGE DRIVE
ALFRED, NY 14802-1137

TELEPHONE: 607-587-4253

Official Academic Transcript of:
ELLIOT WOLFER
Transcript Created: 27-Jul-2022

Requested by:
ELLIOT WOLFER

E-Mail:

Statement of Authenticity

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ALFRED STATE COLLEGE
STATE UNIVERSITY OF NEW YORK
SUNY College of Technology
Alfred, New York 14802

PRINTED COPY PRINTED COPY PRINTED COPY

SSN:

Date of Birth:

Date Issued: 27-JUL-2022

Page: 1

Record of: Elliot Wolfer
Current Name: Elliot Wolfer

Issued To: ELLIOT WOLFER

Course Level: Undergraduate
High School: LETCHWORTH CENTRAL SCHOOL 01-JUN-2002
Only Admit: Fall 2006
Matriculated: Fall 2006

Current Program
AAS

Major : Nursing (AAS)

Degrees Awarded AAS 21-MAY-2008
Primary Degree

Major : Nursing (AAS)

SUBJ NO.	COURSE TITLE	CRED GRD	PTS R
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TRANSFER CREDIT ACCEPTED BY THE INSTITUTION:

FA00-SP02	SUNY Genesee CC		
BIOL 2303	Human Biology	3.00 T	
COMP 1503	Fresh Composition	3.00 T	
GEFL 9100	Gen Ed/Elec-Foreign Lang	3.00 T	
HUMA 8800	Humanities - Tr Cr Elective	3.00 T	
MATH 1054	Precalculus	4.00 T	
Ehrs: 16.00	GPA-Hrs: 0.00	QPts: 0.00	GPA: 0.00
FA02-SP06	Alfred University		
BIOL 1404	Anatomy and Physiology I	4.00 T	
BIOL 2504	Anatomy & Physiology II	4.00 T	
BIOL 4254	General Microbiology	4.00 T	
HIST 2153	Surv of American History II	3.00 T	
HPED 8800	Physical Educ - Trans Cr Elec	2.00 T	
LITR 2603	Introduction to Literature	3.00 T	
PSYC 1013	General Psychology	3.00 T	
PSYC 1023	Human Development	3.00 T	
Ehrs: 26.00	GPA-Hrs: 0.00	QPts: 0.00	GPA: 0.00

200608 Alfred State College

***** CONTINUED ON NEXT COLUMN *****

SUBJ NO.	COURSE TITLE	CRED GRD	PTS R
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Transfer Information continued:
GEMA 9250 Gen Ed- HS Math (Waiver) 0.00 T
Ehrs: 0.00 GPA-Hrs: 0.00 QPts: 0.00 GPA: 0.00

INSTITUTION CREDIT:

Fall 2006
Nursing (AAS)
NURS 1108 Nursing I 8.00 B 24.00
Ehrs: 8.00 GPA-Hrs: 8.00 QPts: 24.00 GPA: 3.00
Good Standing

Spring 2007
Nursing (AAS)
HPED 1221 Power Volleyball 1.00 A 4.00
NURS 2208 Nursing II 8.00 C+ 20.00
SOCI 1163 General Sociology 3.00 A 12.00
Ehrs: 12.00 GPA-Hrs: 12.00 QPts: 36.00 GPA: 3.00
Good Standing

Fall 2007
Nursing (AAS)
BIOL 4404 Emergency Medical Technology 4.00 A 16.00
NURS 3310 Nursing III 10.00 C+ 25.00
Ehrs: 14.00 GPA-Hrs: 14.00 QPts: 41.00 GPA: 2.93
Good Standing

Spring 2008
Nursing (AAS)
NURS 4001 Decision-Making in Nursing 1.00 B 3.00
NURS 4201 Preceptorship 1.00 A 4.00
NURS 4410 Nursing IV 10.00 C+ 25.00
Ehrs: 12.00 GPA-Hrs: 12.00 QPts: 32.00 GPA: 2.67
Good Standing

***** CONTINUED ON PAGE 2 *****

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Julie A. Rose
Julie A. Rose
Registrar

PRINTED COPY



PRINTED COPY

SSN:

Date of Birth:

Date Issued: 27-JUL-2022

Record of: Elliot Wolfer
Level: Undergraduate

Page: 2

***** TRANSCRIPT TOTALS *****

	Earned Hrs	GPA Hrs	Points	GPA
TOTAL INSTITUTION	46.00	46.00	133.00	2.89

TOTAL-TRANSFER	42.00	0.00	0.00	0.00
OVERALL	88.00	46.00	133.00	2.89

***** END OF TRANSCRIPT *****

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Julie A. Rose

Julie A. Rose
Registrar

**ALFRED STATE COLLEGE
STATE UNIVERSITY OF NEW YORK**

**10 Upper College Drive
Alfred, NY 14802**

Unless the attached record bears the seal of the College and the signature of the Registrar, it should not be accepted by another college as an official transcript.

STUDENT RECORDS ARE CONFIDENTIAL and transcripts are issued only at the request of the student. PARTIAL TRANSCRIPTS ARE NOT ISSUED. Each transcript must include the student's complete record at Alfred State College State University of New York

The NYS School of Agriculture was established at Alfred on May 6, 1908. Instruction was offered in Agriculture, Teacher Training for rural district schools, and Home Economics. In 1935-36 a curriculum in agriculture business was organized. In 1937, the school became a technical institute. In 1941, the name of the school was changed to the NYS Agricultural and Technical Institute. On April 1, 1948, the institute became a part of the newly formed State University of New York. The granting of the Associate in Applied Science degree was inaugurated in June 1951, as a result of this new association. In the fall of 1964, the name of the School was changed to State University of New York Agricultural and Technical College at Alfred, NY. The degree of Associate in Science was first granted in 1967; the degree of Associate in Arts in 1972; the degree of Associate in Occupational Studies in 1974. The College is also authorized to confer the degrees of Bachelor of Technology (BT), Bachelor of Science (BS), Bachelor of Business Administration (BBA) and Bachelor of Architecture (BARCh) in a number of programs.

The College is regionally accredited by the Commission on Higher Education of the Middle States Association of Colleges and Schools. All of the engineering technology programs are accredited by the Engineering Technology Accreditation Commission (ETAC) of the Accreditation Board for Engineering and Technology (ABET). The court and realtime reporting curriculum is certified by the National Court Reporters Association. This certification indicates that this program has met the general requirements and minimum standards established by the Council on Approved Student Education (CASE) of the National Court Reporters Association. The nursing associate degree program is accredited by the National League for Nursing Accrediting Commission (NLNAC) and the nursing bachelor degree program is accredited by the Commission on Collegiate Nursing Education (CCNE). The health information technology program is accredited by the Commission on Accreditation for Health Informatics and Information Management Education (CAHIIM). The following automotive trades programs in applied technology are ASE Master Certified by the National Institute of Automotive Service Excellence (ASE): autobody repair, automotive service technician, and heavy equipment, truck and diesel technician. The heavy equipment, truck and diesel program is a national Association of Diesel Specialists (ADS) TechSmart program. The following automotive trades programs in applied technology are certified by the National Automotive Technicians Education Foundation (NATEF): autobody repair and automotive service technician. The drafting/CAD (computer-aided drafting) program in applied technology is certified by the American Design Drafting Association (ADDA). The welding technology program in applied technology is certified by the American Welding Society (AWS). The veterinary technology program is accredited by the American Veterinary Medical Association's (AVMA) Committee on Veterinary Technician Education and Activities (CVTEA). The construction management engineering technology program is accredited by the American Council for Construction Education (ACCE). The financial planning program is board registered by Certified Financial Planner Board of Standards, Inc. (CFP Board).

The graduation requirements for all students who entered prior to June 15, 1966, are 99-quarter credit hours and 198 honor points, (based on a 4.00 index system; 99 honor points on a 3.00 index system). All students who entered after June 15, 1966, and prior to June 1974, must have earned a minimum of 90-quarter credit hours with a 2.00 cumulative index. Students who entered after June 1974, are required to have 60 credit hours for an associate's degree and 120 credit hours for a bachelor's degree with a 2.00 index based on a 4.00 index system.

Prior to September 1951, the College operated on the basis of two semesters, each about 16 weeks in duration. From 1951 through 1973, the College academic year was composed of three quarters, each about 11 weeks in duration. In June 1974, the College returned to a two-semester basis, each semester being approximately 15 weeks in duration.

SPECIAL GRADING CODES AND EXPLANATION

AT	Course audit	S	Passing
E	Incomplete (not included in index after June 1964)	T	Transferred credit
F#	Failed due to academic dishonesty	U	Unsatisfactory
G	Withdrew/Leave of Absence from school passing after 30 instructional days	W	Dropped from course by instructor due to non-attendance/violation of standards
H	Withdrew/Leave of Absence from school failing after 30 instructional days	X	Course dropped after 30 days (1974 - 90)
N	Grade not yet issued	XS	Course dropped passing 10 days after interim
NG	No grade	XU	Course dropped failing 10 days after interim
P	Successful challenge	Z	Grade issued at SUNY Binghamton (BT program fall 1986 - Spring 1991)
Q	Course taken on non-credit basis		

NOTES: Code of E or I to right of honor points on transcripts denotes Excluded or Included in cumulative index, either for repeat grades or not required due to change of major.

An asterisk (*) after the grade indicates that the course is designated developmental/remedial for this student. These grades are not calculated in the GPA.

UNOFFICIAL copies are issued to students for personal use.

Revised 12/14

This Academic Transcript from Alfred State College located in Alfred, NY is being provided to you by Credentials Inc. Under provisions of, and subject to, the Family Educational Rights and Privacy Act of 1974, Credentials Inc. is acting on behalf of Alfred State College in facilitating the delivery of academic transcripts from Alfred State College to other colleges, universities and third parties using the Credentials' TranscriptsNetwork™.

This secure transcript has been delivered electronically by Credentials Inc. in a Portable Document Format (PDF) file. Please be aware that this layout may be slightly different in look than Alfred State College's printed/mailed copy, however it will contain the identical academic information. Depending on the school and your capabilities, we also can deliver this file as an XML document or an EDI document. Any questions regarding the validity of the information you are receiving should be directed to: Student Records and Financial Services, Alfred State College, 10 Upper College Drive, Alfred, NY 14802, Tel: (607) 587-4253.

University of Bridgeport
School of Nursing
BSN Program

COURSE TITLE: NURS 202 Fundamentals of Professional Nursing
CREDIT HOURS: 3 credits theory (3 class hours/week)
 1 credit clinical (2.5 clinical lab hours/week)
SEMESTER: Fall 2022
PREREQUISITE: BIO 113, 114, CHEM 113
CLASS HOURS: Monday and Wednesday 9:30-10:45 am HSC 728
 Monday and Wednesday 1:30-2:45 MAND 107

TEXTBOOKS:

Required Wilkinson, J., Treas, L., Barnett, K., and Smith, M. (2020). *Fundamentals of Nursing: Theory, Concepts, and Applications*, (4th ed.). F.A. Davis.
 Ogden, S. & Fluharty, L. (2020). *Calculation of Drug Dosages*, (11th ed.). Elsevier.
 Nurse Think Skills Hub
 Nurse Think Davis Drug Guide

FACULTY: Elliot Wolfer, BSN, RN and Danielle Homkovics, MSN, RN

OFFICE HOURS:

Elliot Wolfer - HSC 324	Danielle Homkovics - HSC 331
Mondays: 11:15am – 1:15pm	Mondays: 9am – 10am
Tuesdays: 1pm – 3pm	Tuesdays: 1pm – 4pm
Wednesdays: 11:15am – 1:15pm	Wednesdays: 9am – 10am
E-mail for other times if needed	

COURSE DESCRIPTION: This course focuses on the fundamentals of nursing practice based on the biological, behavioral, social and nursing sciences. The course presents the professional nurse role as the provider of care and explores safety and environment of the healthcare system. The core competencies of patient-centeredness, spirit of nursing, communication, and nursing judgment are interwoven with basic nursing principles of oxygenation, perfusion, fluid/electrolytes, mobility, elimination, and pain, just to name a few. Clinical laboratory experiences provide opportunities to implement beginning psychomotor skills including medication administration and the nursing process in the delivery of nursing care.

COURSE OBJECTIVES (CO):

1. Utilize the core knowledge from the biological, behavioral, social and nursing sciences when providing care.
2. Demonstrate professional communication and reciprocal caring as a member of an inter-professional team.
3. Apply the nursing process to assess, plan, implement, document and evaluate care of the patient.
4. Demonstrate critical thinking and sound nursing judgment principles in the delivery of safe medication administration, health assessment, and delivery of nursing care to patients.
5. Explain the principles of nursing care delivery that exemplify a foundation for understanding of organizational skills while implementing basic nursing care.
6. Demonstrate psychomotor skills that indicate safe practice within legal and ethical standards of professional nursing care.
7. Safe practice within legal and ethical standards of professional nursing care.

COURSE SCHEDULE:

Lecture Date	Topic	Chapters	Homework//In-class Activities
September 7, 2022	Introduction to Course	Review syllabus and course materials, exam/quiz schedule, group project, ExamSoft, Study habits, study groups, handbook, Q&A	
Sept 12, 2022	Clinical Reasoning and Processes of Person-Centered Care, Documentation	Chapter 2, 18	

Lecture Date	Topic	Chapters	Homework/In-class Activities
Sept 14, 2022	Safety & Security Asepsis & Infection Control	Chapter 23 & 24	
Sept 19, 2022	The Nursing Process	Chapters 3 & 4 Assessment and Diagnosis	
Sept 21, 2022	The Nursing Process	Chapters 5,6,7 Outcomes, Implementation, and Evaluation	The Nursing Process https://youtu.be/Ug4fDIJNQhw
Sept 26, 2022	Hygiene, Rest & Sleep	Chapters 25, 34	
Sept 28, 2022	TEST 1		
Oct 3, 2022	Principles of Medication Administration	Chapter 26	
Oct 5, 2022	Medication Administration Dosage Calculation	Con't Ogden-	
Oct 10, 2022		<i>No Classes</i>	
Oct 12, 2022	Nutrition	Chapter 27	
Oct 17, 2022	Bowel Elimination	Chapter 29	https://www.khanacademy.org/test-prep/nclex-rn/gastrointestinal-diseases/gastroenteritis-rn/v/what-is-gastroenteritis?modal=1
Oct 19, 2022	Urinary Elimination	Chapter 28	https://www.khanacademy.org/science/high-school-biology/hs-human-body-systems/hs-the-digestive-and-excretory-systems/v/urination
Oct 24, 2022	TEST 2		
Oct 26, 2022	Comfort & Pain	Chapter 31	
Oct 31, 2022	Activity and Mobility	Chapter 32	

Lecture Date	Topic	Chapters	Homework/In-class Activities
Nov 2, 2022	Oxygenation & Perfusion	Chapter 36, 37	
Nov 7, 2022	Skin Integrity Wound Care	Chapter 35	
Nov 9, 2022	Stress & Adaptation	Chapter 12	
Nov 14, 2022	Sexuality	Chapter 33	
Nov 16, 2022	TEST 3		
Nov 21, 2022	Sensory function	Chapter 30	
Nov 23, 2022	AM classes only		
Nov 28, 2022	Grief & Dying	Chapter 17	
Nov 30, 2022	Hydration and homeostasis IV administration	Chapter 38	
Dec 5, 2022	Bring it all together		
Dec 7, 2022	Bring it all together		

COURSE REQUIREMENTS AND POLICIES: See Student Handbook

1. **Classroom Conduct:** Students are expected to show respect for order, the rights of others, and to exemplify a sense of honor and integrity in the classroom. Student conduct is considered an integral part of the educational process. Therefore, no student should be denied the right to learn because of disruptions in the classroom, and student behavior that interferes with an instructor's ability to conduct the class is not accepted. Students are expected to be considerate and respectful of the rights, views, and interests of other students and faculty. If you are disruptive, including but not limited to texting, surfing the Web, or excessive talking, you should leave the class and meet with the professor after class.

2. **Course Workload** - For each hour a student spends in classroom instruction, the student is expected to spend a minimum of two hours of out of class work for the semester. Class work may include but is not limited to; readings, preparing for examinations, completing assignments
3. **Grading Criteria**- The School of Nursing is committed to outcomes that facilitate your success and performance during the BSN curriculum and upon graduation. You must attain an average overall passing grade of 77%
 - a. **Clinical Laboratory Performance**
 - i. Clinical laboratory is a required component of NURS 202: Fundamentals of Professional Nursing. Clinical laboratory attendance is MANDATORY. For complete clinical policies refer to the University of Bridgeport, School of Nursing, and BSN Student Guide. Each student must satisfactorily demonstrate clinical laboratory performance and skills for this course and achieve all clinical objectives in a satisfactory manner on the final evaluation tool to pass the course. Students must be prepared and be flexible to address all clinical objectives based on the needs of the patient population.
4. **Academic Honesty**- It is each student's responsibility to become familiar with and adhere to the standards set forth in the policies on cheating and plagiarism as defined in the UB Student Handbook. A high standard of ethical conduct is expected of students in their academic activities. The University does not tolerate cheating in any form. This term is used to include dishonest use of another individual's aid in preparation of written assignments as well as during a classroom-testing period.

Key to UB (<http://www.bridgeport.edu/life/key-to-ub-student-handbook/>)

EVALUATION METHODS:

Homework / In-class Activities	15%
Group Presentation	15%
Exams (3)	45%
Final Exam	25%
Total	100%

GRADING SCALE POLICY:

Grade	Points	QP (Student Nurses Only)
A	100-94	4.00
A-	93-90	3.67
B+	89-87	3.33
B	86-84	3.00
B-	83-80	2.7
C+	79-77	2.33 (minimum passing grade)
C	76-74	2.00
C-	73-70	1.67

D+	69-67	1.33
D	66-64	1.00
D-	63-60	0.67
F	<60	0.00

Validation Assessments: Pass/Fail

- Injection Validation
- Urinary Catheterization Validation
- Sterile Dressing Change Validation

All validations - maximum of 2 retests – Students receiving a failing grade after 3 failed attempts- refer to Student Handbook.

S/U (Pass/Fail): the University’s equivalent of Pass/Fail. Courses with a clinical or on campus lab will have a clinical or laboratory evaluation that is graded S/U.

- **S:** A grade of “Pass” is the successful demonstration of all the required objectives in clinical and/or lab as detailed on the clinical lab evaluation sheet.
- **U:** A Grade of “Fail” is the inability to successfully meet the objective in the clinical and/or lab as detailed on the clinical lab evaluation sheet.

Students with Accommodations:

It is your responsibility to inform the professor via e-mail during the first week of class. Students with questions about the University’s policy concerning disabilities and requests for accommodation should contact Student Accessibility Services (SAS) at Carstensen Hall, 2nd floor; at 203-576-4454 or email: accessibilityservices@bridgeport.edu

Figure I-A1: University of Bridgeport Organizational Chart

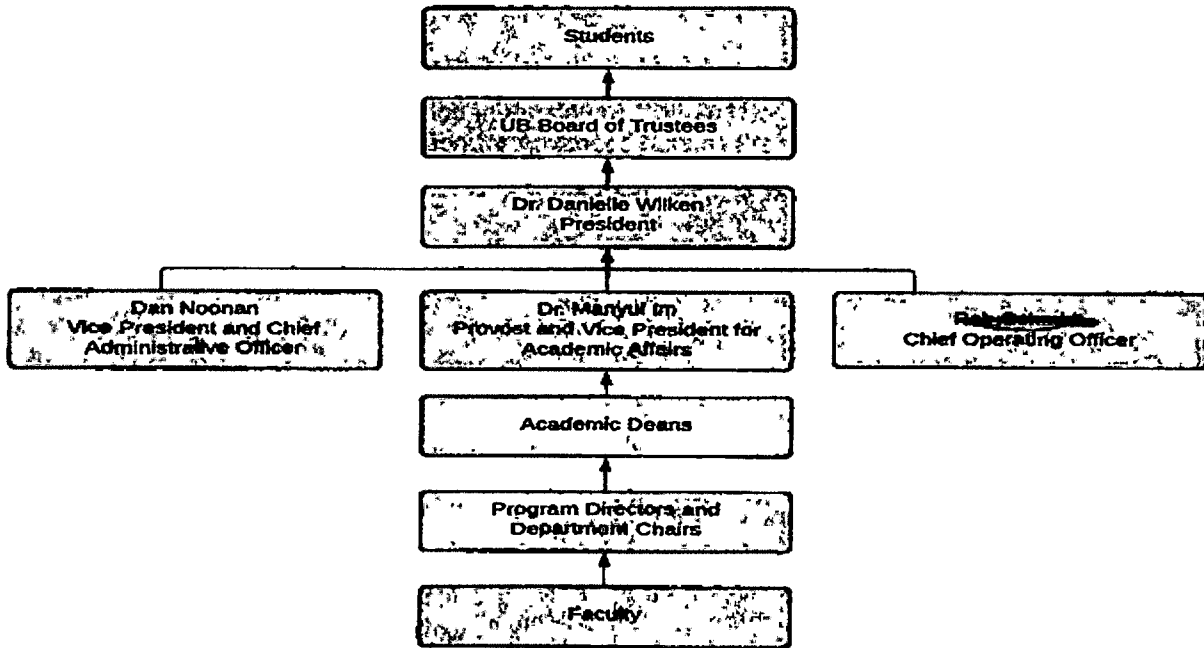
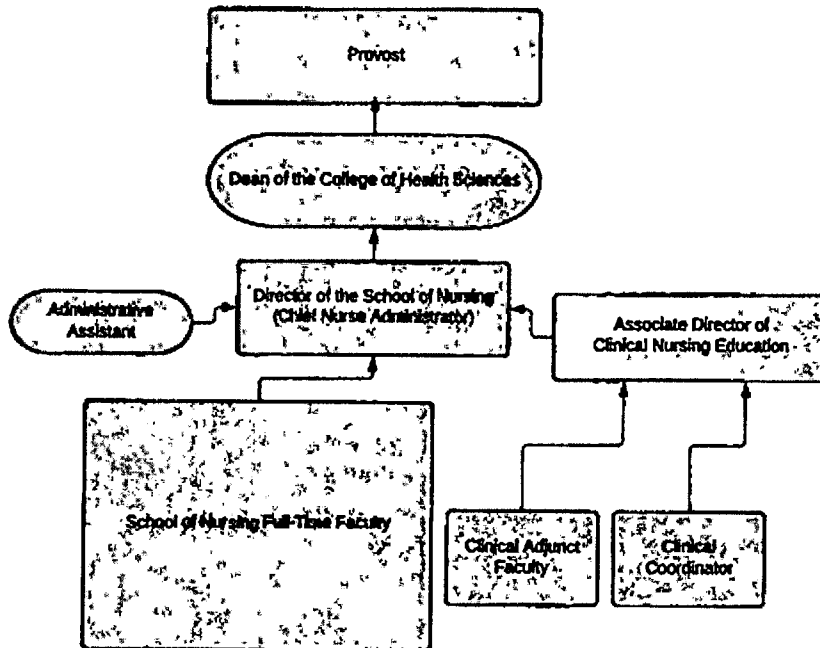


Figure I-A2: University of Bridgeport School of Nursing Organizational Chart



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JAMES J. HEALY

TELEPHONE (860) 278-5555

FACSIMILE (860) 249-0012

WRITER'S E-MAIL:
jhealy@cowderymurphy.com

September 1, 2022

BY EMAIL

Board of Examiners for Nursing
c/o Jeffrey A. Kardys, Administrative Hearings Specialist
State of Connecticut Department of Public Health
Legal Office/Public Health Hearing Office
410 Capitol Avenue, MS #13PHONurse
P. O. Box 340308
Hartford, CT 06134-0308
Email: Jeffrey.Kardys@ct.gov

Re: *Submission from* **Arizona College of Nursing**

Dear Dr. Bouffard and the Members of the Board of Examiners for Nursing:

I write on behalf of my client, the Arizona College of Nursing (“the College”), which has completed the steps for initial approval under the applicable regulations of the Department of Public Health (“DPH”). Following the Board’s meeting of August 3, 2022, the College has prepared detailed correspondence to provide this Board with a thorough explanation of the matters raised that day. (That correspondence is attached hereto as Tab A.) We trust that this information will clarify any concerns, and that the Board will formalize its positive onsite review of the College’s East Hartford campus. The College submits that it has satisfied the applicable DPH regulations, which require the Board to extend initial approval to this program.

As the attached correspondence explains in specific detail, *see* Tab A, the May 25, 2022 consent agreement in Arizona was the product of the College’s collaborative and voluntary efforts to address localized issues with its Arizona regulator by way of a period of probation for the Tempe campus. The College’s program at its Tempe campus has always maintained – and continues to hold – full approval from the Arizona Board of Nursing. The voluntary consent agreement did not indicate any system-wide issues, nor any institutional concerns. The issues that were resolved in this process were limited to the Tempe campus, were remedied in an expeditious manner, and had no impact whatsoever on the College at an institutional level, nor its program in East Hartford. The Tempe program now benefits from a third-party nursing consultant, as well as regular audits.

Dr. Bouffard and the Members of the Board of Examiners for Nursing
August 31, 2022
Page 2

The College has also implemented a system-wide process to monitor faculty credentials and hiring practices, and has adopted additional measures to maintain the integrity of each campus's Dean to administer the program pursuant to both credentialing and state licensing requirements in their respective locations.

I must emphasize that this matter was not hidden from the Board. As we understand the applicable regulations and application materials, no inquiry or other obligation called for formal notification of this voluntary agreement directed solely to a different program in another jurisdiction. Pursuant to DPH's regulations, *see* Conn. Reg. § 20-90-46, *et seq.*, the College has fully complied with the requirements of the prelicensure BSN program application process. This Board has reviewed the program's LOI, Feasibility Study, and Program Proposal, and rightly approved each of those elements as being in full compliance with the regulatory requirements. In her site visit report to the Board on August 3, 2022, Ms. Helen Smith further confirmed that the East Hartford campus satisfied each element of the DPH regulations. As such, the College has provided all materials required by the Board, and has met all of the applicable requirements. Although neither the application materials nor the regulations required any specific notification related to this May 2022 voluntary agreement in Arizona, it should be noted that the College's representatives discussed the matter with representatives of the Office of Higher Education following this site visit, while in the presence of Ms. Smith, who was seated at the same table.

To the extent the Board desired additional information about the voluntary agreement, the attached submission should satisfy this Board that the matter was limited to Arizona, and was neither relevant nor material to the East Hartford program. Pursuant to Section 20-90-47(a)(3), we submit that the appropriate next step is for the Board to accept the favorable recommendation on the East Hartford site visit, and proceed to initial approval.

We trust that the Board can move forward with initial approval for the College's East Hartford program with full confidence that the Arizona agreement was limited to matters particular to the Tempe campus, which have been fully addressed in that jurisdiction, and never impacted the Connecticut program. The College has worked hard to provide its students with first-class education and training in the nursing field, as evidenced by exemplary NCLEX-RN pass rates. The College's students have shown truly exemplary results in passing their licensing exams on their first try more than 90% of the time across all campuses, including the Tempe program. *See* Tab A. This high level of achievement surpasses both the national and Connecticut averages for first-time test takers. In addition to its dedication to preparing students to pass their exams and provide excellent care to their patients, the College is proud that its programs serve a very diverse student body, including nontraditional students and other underserved communities. Knowing that diversity and inclusion efforts are paramount in bringing greater diversity to the ranks of registered nurses everywhere, the College is prepared to do its part not only to address the critical shortage of nurses in Connecticut, but also to open the doors of this noble profession to a wide array of the state's residents.

COWDERY & MURPHY, LLC

Dr. Bouffard and the Members of the Board of Examiners for Nursing
August 31, 2022
Page 3

The College submits that all requirements have been satisfied, and that Section 20-90-47(a)(3) of the DPH regulations requires that initial approval be granted to the East Hartford program. We invite you to contact me in advance of the September meeting if there are any further questions. Thank you for your time and attention to this matter.

Very truly yours,



James J. Healy

JJH:lm
Enclosure

cc (via email; with enclosure): Stacy Schulman, Esq.; Daniel Shapiro, Esq.

Tab A



ARIZONA COLLEGESM of Nursing

Board of Examiners for Nursing
410 Capitol Avenue, MS #13PHO
P. O. Box 340308
Hartford, CT 06134-0308

September 1, 2022

Dear Dr. Patricia Bouffard and the Board of Examiners for Nursing Members,

We appreciate the process by which the Connecticut Board for Examiners for Nursing ("BOEN") has reviewed and approved Arizona College of Nursing's Feasibility Study and Proposal to offer a new pre-licensure Bachelor of Science in Nursing ("BSN") program in East Hartford. I'm writing to reiterate the need for nurses and our commitment to a quality nursing program and to address the questions and concerns that were raised in the August 3, 2022 BOEN meeting.

Connecticut Needs More Nurses

Arizona College of Nursing's BSN prelicensure Program ("AZCN") will help solve Connecticut's nursing shortage. At the BOEN's June 15, 2022 meeting, Marcia Proto, executive director of the Connecticut Center for Nursing Workforce, reported that out of the state's 13,000 qualified applicants, Connecticut graduates about 2,100 registered nurses annually while employers need well over 4,000 each year. Zhang et al. (2018) projected a shortage of 3,891 nurses in Connecticut by 2030. A review of Indeed, on August 4, 2021, revealed postings of 6,795 RN positions in Connecticut and 4,125 nursing positions vacancies in the Hartford, Connecticut area. The November 2018 Statewide Nursing Education Report stated there were 2,452 open seats in all pre-licensure nursing programs and 9,725 qualified applicants, resulting in 7,357 students turned away from nursing programs. According to MaryEllen Kosturko (2018), Senior Vice President and Chief Nursing Officer at Bridgeport Hospital, "There are a lot of applicants going to schools of nursing and only so many spots they can take, and that decreases and limits the number of nurses coming out of the schools in order for us to backfill the (retiring) baby boomers." AZCN is here to help by increasing the capacity of Connecticut's pre-licensure BSN programs and educating nurses who will improve Connecticut's healthcare.

We Will Educate More Nurses and Increase Diversity, While Working With Existing Schools

Arizona College of Nursing has an outstanding track record of developing nurses who stay in their communities and increase diversity in the nursing workforce. We maintain high NCLEX pass rates across multiple campuses, consistently exceeding state regulatory benchmarks. College-wide, our first-time NCLEX-RN test takers achieved annual pass rates over 90% for the past four years (see table below). We similarly commend Connecticut for its strong pass rates in 2021 at 90.66% (NCSBN) and are proud to share that the overall 2021 AZCN pass rate was 91.53%. Both outcomes exceed the national 2021 average for baccalaureate first time test takers of 86.06% (NCSBN).

Campus	Pass Rates			
	2018	2019	2020	2021
Dallas, TX	*	*	*	92.86%
Tempe, AZ	100%	100%	97.33%	91.95%
Las Vegas, NV	91.67%	97.37%	96.61%	90.91%
AZCN overall	96.68%	98.86%	97.01%	91.53%

*No test takers during this reporting period

We have a highly diverse student body and will increase diversity in Connecticut's nursing workforce, a dynamic which has been shown to improve healthcare outcomes for diverse patients (National Academies Press, 2021). AZCN is consistently enrolling a greater number of minority students when compared to other pre-licensure BSN programs in the same area. Currently, the average percentage of students from ethnic and racial minority groups across all AZCN campuses is 64%. Most Connecticut nurses in all license types are white, including 77.6% of RNs. According to the most recent estimates from the U.S. Census, 15.8% of Connecticut residents are Black or African American and underrepresented among RNs with only 9.8% reporting their race as Black or African American. In addition, the most recent estimates from the U.S. Census indicate that 18.8% of Connecticut residents are Hispanic or Latinx and 6.1% are Asian. Yet only a small percentage of Connecticut RNs report being Hispanic or Latinx at 4.7% and Asian at 4.6% (Connecticut Center for Nursing Workforce 2019). Arizona College has partnerships with both the National Black Nurses Association (NBNA) and the National Association of Hispanic Nurses (NAHN), including over \$100,000 in scholarships for students chosen by both associations.

In addition, Arizona College of Nursing will increase Connecticut's nursing education workforce. We offer an opportunity for nurses currently working in practice settings to become AZCN faculty, creating new nurse educators in the community, and encourage applicants with practice degrees (MSN, DNP) to apply for academic positions. We hire many of our faculty from practice settings. Meanwhile, we work collaboratively with other institutions regarding clinical experiences. Arizona College of Nursing routinely utilizes evening and weekend clinical experiences. Our program is unique since it builds the didactic schedule around clinical availability, which allows greater flexibility to secure clinical rotations.

Overview of the Voluntary Tempe Campus Consent Agreement

On May 25, 2022, the Tempe BSN prelicensure program of the Arizona College of Nursing voluntarily consented to a period of probation with the Arizona State Board of Nursing. Despite the probation, the Tempe campus continues to hold full approval from the Arizona Board of Nursing for its prelicensure BSN program. This action does not impact the institutional or programmatic accreditation status of the Arizona College of Nursing BSN pre-licensure program and is limited only to the Tempe campus. In fact, the BSN program was recently re-accredited by the Commission on Collegiate Nursing Education (CCNE) for ten years, the longest term CCNE allows, and in August, the Accrediting Bureaus for Health Education Schools (ABHES) renewed Arizona College's institutional accreditation for five years, after reviewing the Tempe probation. Arizona College of Nursing remains in good standing with state regulators for all existing campus locations. In addition, the campus's graduates continue to pass the NCLEX at the high rate of 95.19% so far in 2022.

The voluntary consent agreement covered three areas of concern:

- First, we identified thirty-two instructors at the Tempe campus location who did not meet the educational requirement of the Accrediting Bureau for Health Education Schools (ABHES), the college's institutional accreditor, and, therefore, the instructors were terminated. Although the Arizona State Board of Nursing allows for schools to employ bachelor's prepared clinical instructors, ABHES does not allow instructors without master's degrees to teach in bachelor's degree programs. Managers leading the campus had previously agreed to replace the instructors by July 2021 and even after ample time, unfortunately failed to do so. At that point, we made the difficult decision to bring in new faculty shortly before the beginning of a semester. Removing the bachelor's prepared instructors caused scheduling issues that resulted in some students experiencing course and schedule changes. Despite these changes, all student clinical requirements were met for the semester.
- Second, there were three instances of faculty actions that were not aligned with AZCN's clinical experience policies. In one instance, a clinical instructor traveled to the wrong clinical site and did not meet the students in a timely fashion. This was viewed as a violation of our policy which requires faculty to be physically present and actively working with students to guide their learning during clinical practice experiences. Another incident related to a clinical instructor releasing students from class prior to the scheduled end time, without notifying the Dean of Nursing/Program Administrator ("Dean"). No post-conference with the students was conducted, as required by policy. The instructor was replaced, and this incident was self-reported by Arizona College of Nursing to the Arizona State Board of Nursing. The last clinical practicum incident identified in the agreement occurred when an instructor went off-site to get lunch, which is a violation of school policy.

- Finally, there were concerns about whether our program administrator had control of the program. Allegations of academic integrity violations were brought to the Dean resulting in a decision to change a testing software function, no longer allowing students to use the back button function during the exam process. The Provost of the institution did not agree that this was an appropriate way to remedy the situation and reversed the decision of the Dean. The Provost and the Dean were unable to agree on this matter and the Dean was left with the feeling that she did not have control over the program testing processes. In addition, the Provost announced with short notice a policy that all exams would be taken on an electronic platform the college had utilized for most exams. According to the AZBON, the manner and timing of the examination procedure change reflected that the Dean did not have control over their program testing processes.

Arizona College of Nursing has moved quickly to remedy all issues that were noted. Internal audits of every campus revealed the faculty qualification and clinical experience issues were limited to the Tempe prelicensure BSN. AZCN has implemented a system to closely monitor faculty credentials and faculty hiring practices, as well as instituting a process to maintain the integrity of the Dean's ability to administer the Nursing program.

While all of these issues were unfortunate, we hope the BOEN will take comfort in seeing that AZCN will make difficult decisions, if necessary, to comply with BOEN and accreditor requirements. As noted above, we took the difficult step of terminating numerous instructors and ultimately replaced the Provost and Tempe campus leadership after this situation arose.

We are not and have not been trying to hide the voluntary consent agreement. We could not have notified the BOEN prior to finalizing the agreement in late May, and we would have notified you if it was relevant, if it was required by regulation, or if there was a request regarding it from the BOEN. Moreover, during the July 13, 2022 onsite visit, Matthew Egan, the Arizona College Vice President of Regulatory Affairs, discussed the consent agreement openly with Dr. Sean Seepersad and Ms. Emily Bjornberg of the OHE, with Ms. Helen Smith at the table.

In conclusion, AZCN's goal is to provide a quality education to a more diverse student population, to work with existing schools to minimize any adverse impacts, and in the process, to increase Connecticut's nurse education capacity and address Connecticut's dire need for more nurses. Arizona College of Nursing has a proven record of providing quality education across several campuses. We have built a high-quality campus in East Hartford that is ready to begin educating Connecticut BSN nursing students. We have met the requirement for a new prelicensure BSN program in the state, and request that the site visit report be approved at the next BOEN meeting.

Arizona College of Nursing looks forward to discussing our application with you at your September 21, 2022 meeting. More importantly, we look forward to a productive partnership with the BOEN for years to come.

Regards,



Nick Mansour III
Chairman of the Board
Arizona College of Nursing

cc: James Healy, Dr. Diane Smith-Levine, Matthew Egan



ARIZONA COLLEGESM of Nursing

July 28, 2022

Sean Seepersad, PhD
Chief Academic Officer
Office of Higher Education
450 Columbus Blvd, Ste 707
Hartford, CT 06103-1841

Dr. Seepersad,

Thank you for your thorough review of our application and for the opportunity to answer the additional questions that you have. After you review this letter, we would be pleased to meet with you or answer any additional questions you may have on these topics.

Consent Agreement:

The Arizona College of Nursing - Tempe campus entered into a voluntary consent agreement with the Arizona State Board of Nursing in May of 2022. Arizona College of Nursing – Tempe continues to hold full approval from the Arizona State Board of Nursing for its registered nursing program. This action does not impact the institutional or programmatic accreditation status of the Arizona College of Nursing BSN pre-licensure program and is limited only to the Tempe campus. Enrolled students will not be impacted by this change in status. Arizona College of Nursing remains in good standing with state regulators for all existing campus locations. The voluntary consent agreement was prompted by the issues outlined below.

- One of the issues addressed in the complaint was around adequate control of the program by the program administrator, particularly around the issue of reported academic integrity by some students. When allegations of academic integrity violations were brought to the Dean, a change was implemented in the testing software that no longer allowed students to use the back button function during the exam. The Provost of the institution did not agree that this was a sufficient, or appropriate, way to remedy the situation and reversed the decision of the Dean. The Provost and the Dean were unable to agree on this matter and the Dean was left with the feeling that she did not have control over the program testing processes.
- The voluntary consent agreement also refers to areas of non-compliance with program policies and standards. This is in reference to an instance where a clinical instructor went to the wrong site and so did not meet with students at a clinical site. This was viewed as a violation of our policy that requires faculty to be physically present and actively work with students to guide their learning during clinical

practice experiences. There is also another incident referenced in which a clinical instructor released students from class prior to the scheduled ending time without notifying the Dean and conducting a post-conference with the students as required by policy. The instructor was replaced, and this incident was self-reported by Arizona College of Nursing to the Arizona State Board of Nursing. The last incident identified in the agreement occurred when an instructor went off-site to get lunch, which is a violation of school policy.

- Finally, the replacement of some instructors, as required by our institutional accreditor, caused schedule changes for students who lodged complaints with the Board of Nursing. Although the Arizona State Board of Nursing allows for schools to employ bachelor's prepared clinical instructors at their clinical sites, the Accrediting Bureau for Health Education Schools (ABHES), which is the institutional accreditor for Arizona College of Nursing, does not allow instructors without master's degrees to teach in bachelor's degree programs. Despite the ABHES requirement, the Dean of Nursing at the Tempe campus had hired some clinical instructors who did not have master's degrees. When the discrepancy was identified internally, removing the bachelor's prepared instructors caused scheduling issues that resulted in some students experiencing course and schedule changes. Despite these changes, all student clinical requirements were met for the semester. Please understand that at Arizona College of Nursing we take our regulatory requirements seriously, just as we will take OHE's regulations seriously, and we are willing to make difficult decisions to comply with them when necessary.

Arizona College of Nursing has taken this situation very seriously and has moved quickly to remedy all issues that were noted. Internal reviews and evaluations of each of the other campuses have shown that these issues were limited to the Tempe campus and do not exist at any of the other locations. There have been many lessons learned from this situation about closely monitoring faculty and faculty hiring as well as maintaining the integrity of the Dean's ability to administer the Nursing program. Please let us know if you have any additional questions regarding this agreement.

Graduation Rates:

There are several factors that make providing an official graduation rate for each of our campuses difficult at this time. Most notably, the nature of the way that graduation rates are reported to the Department of Education through the IPEDS system requires a six-year window, but many of the Arizona College of Nursing campuses are not six years old and so do not yet have graduation data available. In addition, our institutional accreditor, ABHES, does not require us to calculate and report graduation rates. As a result, we only have official, reported graduation data for two of our campuses. The Arizona College – Glendale campus reported a 71% graduation rate and the Arizona College – Mesa campus reported a 67% graduation rate. The outcomes measurement required by ABHES is an official retention rate on an annual basis. ABHES requires a minimum of 70% retention to remain in compliance for

the reporting year which runs from July 1st through June 30th. Below are the retention rates for each of our nursing campuses for the last 3 reporting years, including the most recent year ending June 30th, 2022. Please let us know if there is any other data that you would like us to provide.

Location	Campus Retention Rate-2020	Campus Retention Rate-2021	Campus Retention Rate-2022
Tempe, AZ	77%	76%	77%
Las Vegas, NV	77%	78%	83%
Dallas, TX	60%	70%	71%
Ft. Lauderdale, FL	89%	79%	72%
Tampa, FL	80%	73%	73%
Tucson, AZ	91%	82%	76%
Phoenix, AZ	*	86%	78%
Salt Lake City, UT	*	90%	78%
Southfield, MI	*	*	88%
Falls Church, VA	*	*	89%
Ontario, CA	*	*	98%

NCLEX Results:

We are proud to say our first-time NCLEX test takers have pass rates over 90% for the last three years at every campus, which demonstrates the strength of our curriculum and hard work of our faculty. Arizona College of Nursing has been graduating students at the Tempe, AZ campus (formerly in Mesa, AZ) since December 2015, the Las Vegas, NV campus since April 2018, and had its first graduating class at the Dallas, TX campus in 2021. The campuses in Ft. Lauderdale and Tampa, FL began to graduate students in 2022. The chart below shows the pass rates for first-time test takers by campus for 2019 – 2021.

Location	Campus Pass Rate-2019	Campus Pass Rate-2020	Campus Pass Rate-2021
Dallas, TX	*	*	92.9%
Tempe, AZ	100%	100%	92.0%
Las Vegas, NV	91.7%	97.4%	90.9%
AZCN overall	98.9%	96.6%	91.5%

Default Rates:

The United States Department of Education monitors cohort default rates for all institutions participating in the Federal Student Loan programs. Schools that have cohort default rates over 30% for three consecutive years, or a cohort default rate of over 40% in any given year, face sanctions from the Department of Education. Arizona College has never had a cohort default rate that has reached 30%. Arizona College's official FY18 cohort default rate is 14%. The draft cohort default rate for FY19 is 2.6% and is expected to stay at that number when the rates become official in September. As Arizona College has grown and changed its focus to the Bachelor of Science program, outcomes have improved in all metrics, including cohort default rates. In previous years, a large portion of the students in the cohorts were enrolled in diploma programs that have default rates higher than those seen in the nursing program. If the cohorts in previous years consisted of only nursing students, the default rates would be significantly lower and would not have exceeded 11% in FY17 or 6% in FY18.

Please let me know if you need any additional information.

Thank you,

Matthew Egan
Vice President of Regulatory Affairs
Arizona College of Nursing



September 1, 2022

Helen M. Smith, RN, MSN
Nurse Consultant
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RE: Goodwin University Response to July 6, 2022 Letter from the CT BOEN regarding ADN Program

Dear Ms. Smith and members of the BOEN,

This letter pertains to the July 6, 2022 request by the CT Board of Examiners for Nursing (BOEN) that the Corrective Action Plan for the **Associate Degree in Nursing** (ADN) Program at Goodwin University be revised and modified. In response, Goodwin University and the Department of Nursing initiated a 360-degree review of the Associate Degree Program. (See attached.)

The recent National Council Licensure Examination (NCLEX) scores for Goodwin University's ADN did not meet the required benchmark of 80% for the 2021-2022 timeframe and this is of tremendous concern to us. This letter seeks to apprise the BOEN that the **Corrective Plan of Action** for the ADN program has been completely revised. We recognize that the initial plan made an assumption that the switch away from ATI was the primary issue leading to low NCLEX performance, but a more thorough assessment and data analysis has led nurse leaders to design a comprehensive plan to reverse or eliminate root causes that may have contributed to this sudden decline. Assessments, Findings, and a Plan of Action are included in the revised Corrective Plan of Action.

It is noteworthy that the NCLEX pass rate for the Associate Degree Program was 84% from April through September 2021 and the October 2021 through March 2022 timeframe represents 90% of the failures for the 2021-2022 year. We are working to strengthen the curriculum and offer best practice preparations for graduates taking the licensing exam. Our goal is to ensure continued quality education for our students and high achievement on the NCLEX.

Thank you for your kind attention to this matter and the opportunity to submit this revised plan. We look forward to attending the BOEN meeting on September 21, 2022 to further discuss the corrective initiatives and address any questions that may arise.

Sincerely,

A handwritten signature in black ink that reads "Bruce Hoffman".

Bruce Hoffman, MSN-RN
Director of the Associate Degree in Nursing Program



Revised Corrective Action Plan for Associate Degree in Nursing Program at Goodwin University

ASSESSMENT	FINDINGS	ACTION PLAN
<p>1. Generate a Profile</p> <p><i>Goal:</i> Create a profile of the graduates who did not pass the NCLEX to determine commonalities.</p> <ul style="list-style-type: none"> • Admission demographics: SAT, GPA + other variables • Progression through program: grades, GPA, science grades, repeat courses • ATI testing performance 	<p>1. Findings from the Profile</p> <ul style="list-style-type: none"> • All students met admission criteria. • No graduate repeated more than one course • ATI comprehensive predictor data not available for the cohort who tested between October 2021-March 2022. • 90% of the failures for the measured year took the NCLEX between October 2021 through Mar of 2022. • More data on this cohort pending retrieval 	<p>1. Plan in Motion</p> <ul style="list-style-type: none"> • Review admission policies and points system • Open discussions about raising the passing grades to B minus • Assess assignments and testing for possible grade inflation • Closely examine what was different for the cohort who tested during this last quarter.
<p>2. Assess Aggregate Data</p> <p><i>Goal:</i> Review and analyze aggregate data about ADN class of 2021 with the aid of Mountain Measurement.</p> <p><i>Mountain Measurement is a leader in psychometrics, analytics, reporting and data visualization, serving the licensure and certification sectors of the testing industry.</i></p>	<p>2. Findings from Aggregate Data</p> <p>Aggregated Data Findings (examples)</p> <ul style="list-style-type: none"> • Goodwin NCLEX pass rates were >80% and stable for the ADN program (2019-2021) until October 2021 - March 2022. <ul style="list-style-type: none"> ○ 208 graduates took the exam ○ 143 passed / 65 failed ○ 59 of the failures (90%) occurred between October 2021 and March 2022 	<p>2. Plan in Motion</p> <ul style="list-style-type: none"> • Leaders to share data with faculty at September Retreat. • Schedule ATI consultant to come to campus to work with faculty. • Task Curriculum Committee to review curriculum weaknesses with faculty and revise courses, paying particular attention to raising the (Bloom's) level of the student learning outcomes in each syllabus. • Increase opportunities for students to practice with online testing. • Offer testing support sessions

<ul style="list-style-type: none"> • Mountain Measurement NCSBN NCLEX Reports: <ul style="list-style-type: none"> ○ Aggregated data about students ○ Content Dimension Reports ○ NCLEX_RN Test Plan Report ○ Test Duration/Test Plan Performance Report 	<ul style="list-style-type: none"> • The NCLEX Reports (Oct 21-Mar22) reveal that compared to other CT grads the typical Goodwin graduate's performance fell in all "Client Need" areas from the previous year particularly in Pharmacological & Parenteral Therapies and Physiological Adaptation. This was even more evident when compared to other ADN graduates nationally. <p>Nursing Process:</p> <ul style="list-style-type: none"> • Similar comparisons as above show lower performance in Nursing Process categories, particularly assessment and analysis. <p>Human Functioning:</p> <ul style="list-style-type: none"> • No particular content area emerged though 100% of Goodwin's graduates typical student rankings were below the 50th percentile ranging from 33-47%. <p>Health Alterations:</p> <ul style="list-style-type: none"> • Compared to a national population of ADN grads, there was a clear decline in performance in all content areas in this category during this time. • Typical graduates compared to CT grads demonstrated weakness in Wellness/Illness Continuum both years from Oct-Mar 2021 and Oct-Mar 2022, performance falling at 45th percentile or below. 	<ul style="list-style-type: none"> • Mandate remediation of questions students get wrong. • Examine test policies for how much time is allowed
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	<p>Test Duration Findings: Compared to other CT grads Oct 2021-Mar 2022:</p> <ul style="list-style-type: none"> • Passers took more questions and more time • Non-Passers took a few more questions (total 121) and more time than CT counterparts • Only 31% of passers took minimum number of questions (down 20% from previous year) • 55% of those who failed took the maximum number of questions which is actually a positive finding as they were likely close to passing. 	
<p>3. Examine Admission Criteria and Point System.</p> <p><i>Goal:</i> A full review is needed to ensure that the present system is continuing to best meet the needs of the program and its students.</p>	<p>3. Findings Regarding Admission Criteria and Point System</p> <ul style="list-style-type: none"> • There has been no change to this policy or process. • A preliminary discussion raised important questions regarding the weights assigned within the point system. 	<p>3. Plan in Motion</p> <ul style="list-style-type: none"> • Nursing Leadership recognizes the need to assess the admissions criteria and point system on a more routine basis. • The admissions criteria and point system will be reviewed and discussed by nurse leaders and administration during the Spring 2023 semester. • Any changes will be implemented for the Fall 2023 semester.
<p>4. Examine Progression Policies</p> <p><i>Goals:</i> Review the policies on Minimum Grade and Course Repeats for efficacy, fairness, and impact. Also Assess scores on ATI Comprehensive Predictor</p>	<p>4. Findings Regarding Progression Policies</p> <p><i>Minimum Grade Requirement</i></p> <ul style="list-style-type: none"> • The practices in the definitions have been determined to be effective. 	<p>4. Plan in Motion</p> <p>The examination of Progression Policies resulted in the following action steps:</p>

<p>Definitions:</p> <p><i>Minimum Grade Requirement</i></p> <ul style="list-style-type: none"> • Currently a "C+" (77%) is minimum grade is required in nursing and science courses. • Further, a 'nursing' GPA of 2.3 is required to progress through program. • An exam benchmark GPA of 77% is also a requirement. <p><i>Repeat of Courses</i></p> <ul style="list-style-type: none"> • One nursing course may be repeated up to one time in the ADN Program. • If a student is unsuccessful more than once, they are dismissed from the program. <p><i>ATI Comprehensive Predictor</i></p> <ul style="list-style-type: none"> • Assess scores on ATI Comprehensive Predictor to determine what we can learn. 	<p><i>Repeat of Courses</i></p> <ul style="list-style-type: none"> • The practices in the definitions have been determined to be effective. <p><i>ATI Comprehensive Predictor</i></p> <ul style="list-style-type: none"> • Previous to this cohort, students had to pass the ATI Comprehensive Predictor with a score of 80% or higher. • If they did not meet this benchmark, they had to sit for the Virtual ATI/Green Light process. • To be clear, transcripts are NOT held by the University. Transcripts are released once the student has met the programmatic objectives. 	<p><i>Minimum Grade Requirement</i></p> <p>No changes to the Minimum Grade requirement at this time; this is an effective policy, operating as follows:</p> <ul style="list-style-type: none"> • Any student who achieves less than a 77% on an exam is automatically referred to the faculty member to meet with and given a tutoring prescription. This proactive approach will foster student success earlier rather than later. • While there are no changes, additional support is planned. <u>Effectively immediately, students must pass the ATI Predictor with a 95% or higher.</u> If unsuccessful in meeting this benchmark, they must sit for the Virtual ATI/Green Light process. <p><i>Repeat of Courses</i></p> <ul style="list-style-type: none"> • There are no plans to change this practice. <p><i>ATI Comprehensive Predictor</i></p> <ul style="list-style-type: none"> • Students will meet with the director and/or designated faculty to design a plan of study and preparation before advising students take the NCLEX again. The Comprehensive Predictor can be taken again to boost student confidence.
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<p>5. Departmental Review of Tests and Testing Process</p> <p><i>Goals:</i></p> <ul style="list-style-type: none"> • Examine level of questions on current nursing course tests and raise % questions to level of application and analysis as student progresses through program. • Assess whether test questions are mapped to class and course outcomes as well as to NCLEX Detailed Test Plan. • Assess the department test bank. • Assess the quality of current computerized testing. • Assess for grade inflation. • Examine use of updated software and faculty/staff training for statistical analysis of questions and tests 	<p>5. Findings Regarding Departmental Review of Tests and Testing Process</p> <ul style="list-style-type: none"> • All of the course coordinators and faculty have been tasked with reviewing exam questions to assure that the course outcomes are at a Bloom Taxonomy category of Application or higher (Application, Analyze, Evaluation and/or Creation). • The team is further tasked with reviewing exam questions to assure each question is linked to an NCLEX category. • The review of exam questions will be conducted on an ongoing basis. • The faculty created a department Test Bank to be used in each course. These questions are directly linked to the course outcomes and categorized according to the NCLEX Blueprint. Additionally, ATI, which has been adopted once again, is used as an additional driver for Next-Generation NCLEX styling and exemplars. • ExamSoft and NurseThink were being used for retrieval of this information. The products were not well-received by faculty and are difficult to use. We are migrating back to ATI summer 2022 and there will be reports created that will be mandatory to run each semester to assure that gaps are discovered with exam use. 	<p>5. Plan in Motion</p> <p>Department Review of Tests and Testing Process Moving Forward:</p> <ul style="list-style-type: none"> • Testing & Evaluation is a department priority for AY 2022-2023. • ATI reinstated • Faculty workgroups planned for 2022--2023 to work collaboratively on tests. • Faculty will continue to map their test questions to course and class student learning outcomes, as well as the NCLEX test plan, document level of question. • Examine each course and across curriculum for exam level totals • A Curriculum Committee will be tasked with examining assignments, and projects for leveling throughout the curriculum and consistency with grading. • Track percentages of application or higher-level questions. • Increase number of computer -generated test questions students are exposed to prior to taking NCLEX • Consider reinstating Exam Soft • Preparations for Next-Gen NCLEX underway
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<p>6. Curriculum</p> <p><i>Goals:</i> Review the following Curriculum Assessments for Improvements</p> <ul style="list-style-type: none"> • Capstone Course • Findings from Mountain Measurement • Clinical Placements • Assess Curriculum Mapping to NCLEX test map • Assess progress toward preparation of students for Next Gen NCLEX 	<p>6. Findings Regarding Curriculum Assessments:</p> <ul style="list-style-type: none"> • The final senior semester is a complex medical/surgical Adult II clinical rotation on intermediate care units and complex medical and surgical units at Yale New Haven, SFHMC, ECHN / MMH, and St. Mary's Waterbury. They include day, evening and weekend options. The staff are experienced faculty and have been with Goodwin University for a longer period of time. There are also several other assignments which support clinical learning. • See action column. • Over the course of the program, the students complete at a minimum 9 hours per week for 14 weeks of clinical - for each course; 675 hours total over the course of the program. • Student feedback is solicited every semester during an end of course survey and clinical is included in this survey. Our response rate is high; we also collect IOTA scores which have not demonstrated and issue with the clinical experience. • Reinstatement of ATI will introduce students to the Next Gen NCLEX style questions. 	<p>6. Plan in Motion</p> <p>Curriculum Revisions planned:</p> <ul style="list-style-type: none"> • Additional content will be woven throughout the curriculum re: aggregated findings from NCSBN reports, student evaluations.... • Revise curriculum based on data from Mountain Measurement aggregated data • Senior capstone course will be reviewed with intent to add more NCLEX preparation focus • Continue to offer more test-taking strategy workshops. • Formative evaluations activities will be added to each course. • NCLEX NGN style questions will be included in every class • A program wide curriculum review which was last fully conducted in 2018 has been reinstated. The deadline for review by faculty is August 31, 2022.
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<p>7. Assess Enrollment</p> <p><i>Goal:</i> Assess enrollment numbers in Nursing Courses.</p>	<p>7. Enrollment Findings</p> <p><u>Current numbers* for Fall 2022:</u> (Course/Enrollment Number)</p> <ul style="list-style-type: none"> • NUR 100-63 • NUR 110-63 - all students are registered • NUR 200-71 - we will check to make sure all the LPN's from the Bridge course are registered for NUR 200 • NUR 210-71 • NUR 220-55 <p>*Total numbers are 25-30 in day section and 30-40 in evening section</p>	<p>7. Plan in Motion</p> <ul style="list-style-type: none"> • Continue to monitor enrollments in course sections. • Consider placing caps at 30 students for sections of nursing courses.
<p>8. Review Supplemental Testing</p> <p><i>Goal:</i> Assess the recent change from ATI to new software called Nurse/Think.</p>	<p>8. Findings Regarding Testing</p> <ul style="list-style-type: none"> • Recent low pass rates on NCLEX provided evidence that this switch was not in the best interest of the program or graduates. • No NCLEX Predictor results were available to students or faculty. • Graduates took NCLEX before being adequately prepared. • NurseThink and ExamSoft were not well received by the ADN Faculty. • The rollout plan was ineffective. 	<p>8. Plan in Motion</p> <ul style="list-style-type: none"> • ATI was reinstated during the Summer 2022 and Fall 2022 semesters. • The faculty has been through an initial group education session, as well as an individual session with an ATI Integration Specialist. • ATI ADN curriculum includes in-class activities, quizzes and testing, per vendor recommendations. • The Comprehensive Predictor Exam has a benchmark of 95%. Failure to meet the benchmark will require students to take the GreenLight before the NCLEX. The latter cannot be mandated but will strongly be recommended to graduates.

<p>9. Consider Covid Pandemic Effects</p> <p><i>Goal: Assess effects the Covid Pandemic had on teaching and learning for the cohort who failed to meet passing standards for NCLEX.</i></p>	<p>9. Covid-Related Findings</p> <ul style="list-style-type: none"> • Faculty strived to reinstate the full clinical experiences that the students had prior to COVID restrictions. • Social distancing when on campus including the use of a mask for both instructors and students as well as limited seating in a physical classroom. • Many of the courses were moved to online via Zoom, synchronous format • Recordings were available to students if requested. • Testing was performed at home as no one was allowed on campus. • The University determined that online proctored tests were cost prohibitive. • Students were informed that all examinations and quizzes were closed-book. • Clinicals were primarily accomplished via SwiftRiver as facilities were not allowing students into the clinical sites. • Goodwin University did NOT require the COVID vaccination but left it up to respective departments to require if needed. Weekly Covid testing required by some hospitals. 	<p>9. Plan in Motion</p> <ul style="list-style-type: none"> • Since Fall of 2021, clinicals have resumed normal status. • Students are in-person, in the clinical site with 8 hours clinical and 1 hour of post conference. • We have been innovative in terms of clinical assuring that we meet the needs of all students; including the use of SwiftRiver in Pediatrics provided that there are limited clinical sites for pediatrics and added on a component of pediatric homecare paired with a SwiftRiver / Virtual assignment. We are trialing this for the summer semester and should have data about it coming into Fall 2022 / Spring 2023 semester. • Further, we are examining course grades and assignments closely to ensure academic integrity.
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<p>10. Assess Educational Environment</p> <p><i>Goals:</i></p> <ul style="list-style-type: none"> • Assess university structure • Assess departmental culture and change • Assess need for faculty development • Faculty Assignments <ul style="list-style-type: none"> ○ Identify areas of overload ○ Assess faculty expertise 	<p>10. Findings Regarding Educational Environment</p> <p>Between Spring, 2021 to Summer, 2021 the ADN program experienced significant changes:</p> <ul style="list-style-type: none"> • a new director was hired for the ADN program • changed LMS from Blackboard to Canvas • Adopted NurseThink and ExamSoft • Removed ATI from the curriculum as well as the GreenLight • Two faculty retired • Three faculty left for other positions • Nursing Tutor left position. (Finding qualified replacements and restructuring the tutoring program required time.) • The University created Three Schools <ul style="list-style-type: none"> ○ Each School has their own Dean • Continued to deal with COVID and intermittent campus and clinical closures. <p>Faculty Workloads:</p> <ul style="list-style-type: none"> • Each faculty member currently teaches two sections of their respective course (a day section and an evening section); as well as teach one clinical session. • Course assignments have been distributed according to each faculty's specific area of expertise. • Faculty can pick up more than one course or other duties as the program requires for overload credit and pay. 	<p>10. Plan in Motion</p> <ul style="list-style-type: none"> • Faculty have been hired to fill each position with significant pay raises. • The new faculty are enthusiastic and passionate about educating and are excited about the future. • Rollout a newly established plan with ATI and having all faculty on-boarded in an appropriate timeframe. • All of the faculty receive regular educational updates and continuing education activities provided to support them in their growth not only with ATI and Next-Generation-NCLEX, but also professional teaching and learning opportunities including Open Education Resources and Universal Design for Learning. • The school is actively searching for a Dean of the School of Health Professions and Nursing. Preferably this will be a nurse with nursing education experience. • Currently, guidance and oversight is provided through our Chief Nurse Administrator and the Vice President of Academic Affairs. There are weekly meetings between these individuals and the ADN Program Director. • Covid issues resolved so far for upcoming year.
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	<ul style="list-style-type: none"> ○ These activities range from accreditation projects to clinical or classroom needs. ● No ADN Faculty is overloaded with work according to accreditation standards or when comparing against other similar-sized programs. ● Each new faculty member is aligned with a mentor who helps to guide and facilitate various meetings with the different departments throughout the University. 	<ul style="list-style-type: none"> ● The tutor position has been replaced with several subject matter experts that also have faculty responsibilities – both clinical and didactic. Students can sign up with whichever faculty they desire. Having more than one tutor allows for increased flexibility so students can be accommodated.
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Additional Comments:

For students who did not pass the NCLEX during the Fall 2021, Spring 2022, and Summer 2022 semesters, we have implemented a plan as outlined below:

- Using the student's existing access to ATI, complete the following "My ATI" modules:
 - NCLEX Experience
 - Board Vitals (if available)
 - Nurse Logic
- Students will take a Comprehensive Practice Assessment and complete 6 hours of focused review, which the faculty will then track on ATI Analytics.
- The faculty will review the student's report and assign specific practice assessments and targeted medical surgical assessments based on their areas of weakness on the Comprehensive exam.
 - The student will then complete 4 hours of focused review for each assessment they take.
 - Further, if they have their report from Pearson from their NCLEX, the faculty will also review that to personalize the review.
- The faculty will set-up individual zoom meetings as needed/requested to go over student exam results and answer questions.
- Students will take another Comprehensive Practice and complete the focused review, with the goal that their scores will improve from their first attempt.
- Repeat as needed.



June 16, 2022

Helen M. Smith, RN, MSN
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RE: Goodwin Response to DPH Letter of June 2, 2022

Dear Ms. Smith,

Thank you for your recent communication in regard to the regulations for Connecticut state agencies, Section 20-90-47(b)(2)(A), regarding an acceptable level of a program's graduates' performance. As noted in your letter, the acceptable level is defined as "demonstrated mastery of nursing principles as evidenced by an average passing rate of at least 80% of students taking the licensing examination upon their first attempt after graduation, as reported from May 1 to April 30."

Recent National Council Licensure Examination (NCLEX) scores for **Goodwin University's Accelerated Bachelor of Nursing** (ABSN) program have not risen to the required benchmark. This letter seeks to apprise the Board of Examiners for Nursing (BOEN) and the Department of Public Health (DPH) of the **Corrective Plan of Action** for the ABSN program.

The plans to follow address the programmatic areas to be strengthened within the ABSN. The plans outline: (a) *what* has been identified as a program vulnerability, (b) *when* an intervention will take place, (c) *how* the vulnerability will be addressed, and (d) *why* this has been identified as an issue. Our goal is to present a holistic understanding for how we will ensure that the benchmark is met going forward.

Thank you for your kind attention to this matter and the opportunity to submit this information regarding our plan. We look forward to attending the July 6, 2022 BOEN meeting to further discuss the corrective initiatives and address any questions that may arise.

Sincerely,

A handwritten signature in black ink, appearing to read "Paula Dowd".

Paula Dowd, Ed.D.
Dean of the School of Nursing and Health Professions

Cc:

Dr. Sean Seepersad, Chief Academic Officer, Office of Higher Education
Dr. Michael Pardales, Vice President of Academic Affairs, Goodwin University

Accelerated Bachelor of Nursing (ABSN) program – Corrective Plan of Action

For the period of 5/1/2021 to 4/30/2022, Goodwin acknowledges that graduates of the ABSN program did not achieve the benchmark of an 80% pass rate. The following plan has been initiated:

WHAT Identified Program Vulnerability	WHEN Time when Intervention Will Take Place	HOW Targeted Intervention(s) to Address Program Vulnerability	WHY Narrative Explanation of Vulnerability and Intervention
<p>Insufficient ability for students and Goodwin leadership to determine student readiness for NCLEX.</p>	<p>The planning for this intervention began when Goodwin first realized there had been a drop below benchmark. Timing for the interventions at right will roll out as follows:</p> <p><u>Summer 2022 (immediately):</u> The soon-to-graduate ABSN cohort will have access to all predictive ability resources of ATI as well as <i>NurseThink</i>.</p> <p><u>Fall 2022:</u> The incoming ABSN cohort will use only ATI products. (The ABSN program admits students in the Fall semester only.)</p>	<p><u>Assessment Testing</u> Students will participate in assessment testing using ATI software to determine where they fall on the continuum of readiness to take the NCLEX. The ATI Comprehensive Predictor is a three-hour, 180 item, proctored test designed to assess student readiness to sit for the NCLEX exam.</p> <p><u>All ABSN students will take the ATI Comprehensive Predictor test between weeks 13 to 15 of their final semester.</u></p> <p>The Course Coordinator is now charged with monitoring student progress through the internal function of the ATI system. After reviewing student scores, the Course Coordinator will assign a grade as part of their course. All students will have a follow-up meeting to review and explore their readiness for the NCLEX.</p> <p><u>Redundant Resources</u> During the Summer 2022 semester, students will have access to both the ATI and <i>NurseThink</i> software systems. While this may not be 100% necessary, Goodwin has contractual access to both during this time and may as well avail the multiple options to students. The incoming cohort will work exclusively with ATI products.</p>	<p>Goodwin recently incorporated a new software program, <i>NurseThink</i>. The program is designed to support pre-licensure nurses with preparation for their clinical exam. The recent low pass rates evidenced since indicate that this switch was not in the best interest of the program. In fact, the preparation software used previously, <i>Assessment Technologies Institute</i> (ATI), provided students with a proprietary program to assess their readiness to pass the test. (The assessment tool is known as the, "ATI Comprehensive Predictor" test.)</p> <p>When using ATI, Goodwin always met benchmark. Although the switch to <i>NurseThink</i> was well-intentioned, it did not prove sufficient in terms of preparation. In the absence of this assessment, students had difficulty determining their state of preparedness to sit for the NCLEX. As a result, some took the test before they were sufficiently prepared, resulting in a pass rate below benchmark.</p> <p>Goodwin is actively switching back to ATI and discontinuing <i>NurseThink</i>.</p>

<p>A need to increase administrative understanding of each student's level of readiness.</p>	<p>Summer 2022 (immediately)</p>	<p><u>Implementation of Designated NCLEX Coaches</u> A member of the ABSN Team has been identified as "ATI Champion."</p> <p><u>Embedding ATI Technology Across the Curriculum</u> Moving forward, ATI will be introduced in NUR 100 and students will be continually exposed to the features throughout the program. (For the current ABSN students, ATI will appear in NUR 205, alongside NurseThink.)</p>	<p>An ATI Champion is well-versed in the software and trained to assist students in using the software to its optimal effect.</p> <p>Further, Goodwin is availing itself to the complimentary consultation services at ATI to help embed their products into the curriculum. The goal is to establish strength and familiarity in using the products from a very early point, therefore preparing students for the similar NCLEX environment.</p>
<p>A greater amount of faculty and support staff will benefit student success.</p>	<p>Summer 2022 (immediately)</p>	<p><u>Goodwin Support in the ABSN</u> The ABSN works to ensure that no vacancies exist in the program. The program is fully staffed.</p> <p><u>Additional Oversight</u> The Program Director, with administrative and technological assistance, as well as faculty support, will review student readiness for the NCLEX and intervene whenever a student is at risk of not passing the NCLEX on their first attempt.</p> <p><u>ATI Training</u> Faculty will be offered Professional Development in this area.</p>	<p>The ATI program will notify the Program Director any time a student is not meeting specific benchmarks. This service will continue throughout the entire nursing curriculum. Specifically, any time a student earns less than a 77% on an exam, the Program Director will be notified via email and the student will be consulted. A student in this situation will be guided toward tutoring in the areas of weakness.</p>
<p>A need to maximize the impact of learning in a post-Covid academic environment.</p>	<p>Summer 2022 (immediately)</p>	<p><u>Integrating the "Flipped Classroom"</u> Students are given pre-lecture assignments, case studies, and more to boost preparedness.</p> <p><u>Integrating Principles of Universal Design for Learning</u> The curriculum is thoughtfully prepared in accordance with this pedagogical framework to recognize all learners.</p>	<p>Due to the pandemic, it is incumbent upon higher education to reach students effectively in new ways. Goodwin addresses this via UDL principles, the "flipped classroom," and maximizing technology with virtual clinical simulations. Students interact with simulated patients, conduct medication passes, perform physical assessments and exams, formulate care plans, and more.</p>

<p>Students taking the NCLEX before they are truly ready. This most often occurs because they are unaware of where they fall on the continuum of readiness or because they are anxious to sit for the test regardless of where they stand.</p>	<p>Fall 2022, 30 days prior to completion of NUR 450 and the ABSN program overall.</p>	<p><u>Virtual Testing Post-Graduation and Pre-NCLEX</u></p> <p>All ABSN students will have access to the Virtual-ATI program designed to remediate any gaps in knowledge and assign them a “green light” when they are ready to take the NCLEX with a high probability of success. The software publisher describes the experience as follows:</p> <p>Virtual-ATI® is our online review option that pairs students directly with a virtual coach for their NCLEX® prep. During their 12-week study program, students are guided through everything they need to know to prepare and pass. Working at their own pace, students gain knowledge, support and feedback from their online coach.</p> <p>Students receive a “green light” from their coach when they’ve demonstrated readiness to pass the NCLEX. Even after the green light has been given, students are supplied with a detailed study program and remediation resources to guide them to test day.</p> <p>Here’s how it works:</p> <ul style="list-style-type: none"> • Each student is assigned a personal Virtual-ATI Coach, an experienced nurse educator who works with them one-on-one and provides feedback and encouragement along the way • Students are provided 12-week access to an online classroom that begins 30-days prior to graduation, is available 24/7 and includes more than 400 on-demand resources via the mobile-friendly online classroom • As students’ progress over the 12-week period, the review is individualized, so special focus is given to topic areas that need most attention • Students are provided content assessments with practice questions based on their individual needs • A post-review study plan with remediation resources is provided for students to use after the green light is given or 12-week period ends to guide them to test day • Students can purchase an additional 12-weeks of access for a discounted rate. With repurchase, progress reports will be shared with the student’s affiliated institution, unless requested otherwise. <p>The Virtual-ATI program also includes 6-months of access to “BoardVitals,” an adaptive quiz bank with over 3,500 NCLEX style questions. Students can create quizzes in specific content areas or all content areas.</p>
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State of Connecticut Office of Higher Education

August 15, 2022

Gary Evans, President & CEO
Stone Academy
745 Burnside Avenue
East Hartford, CT 06108

Dear Mr. Evans,

On July 29, 2022, our office conducted a site visit, including a review of student records pursuant to **Section 10a-22k-10(b) of Connecticut State Regulations for Approval of Postsecondary Schools** at East Hartford campus.

During our review the following violations were found:

Violation of Statute 10a-22e – Revision of conditions of authorization

Stone Academy failed to notify OHE sixty days prior to staff changes at the various campuses. This includes changes in the school director, and the campus directors for each of the branch campuses.

Stone Academy failed to notify OHE of the changes in the passing grade for the exit exam.

Violation of Regulation 10a-22k-4 – Evaluation procedures for initial or renewal of authorization

Schools are required to communicate in a clear and transparent manner to the public and to students. Stone Academy had a program change (a change in the passing grade for the exit exam) that was not communicated clearly to affected students. Our review of files did not reflect student acknowledgement regarding the change in VATI pass percentage. In addition, the addendum to the enrollment agreement was vague and did not specify what the changes were from the original enrollment agreement.

There appeared to be some misunderstanding on the part of students about whether the cost of uniforms is included in the fees.

Violation of Regulation 10a-22k-5 – Evaluation criteria for initial or renewal of authorization

Ned Lamont, Governor · Timothy D. Larson, Executive Director
450 Columbus Boulevard · Suite 707 · Hartford, CT 06103-1841
www.ohe.ct.gov

An Equal Opportunity Employer

At the time of the site visit, Stone Academy was unable to identify the campus director for the West Haven branch.

We interviewed students at the site visit and received reports that there is at least one instructor who seemed unqualified to teach either parts of or the entirety of the course students were teaching due to their lack of experience (clinical or otherwise) on that topic.

We received reports that there is improper attendance taking. Students were allowed to sign in and were not required to sign out. Once a student signed it, it appears that the students were recorded for the full hours for that day, even though a student may not have completed all of the hours.

Corrective Action:

- School must report any changes to OHE 60 days prior to the intended date of change.
- School must provide OHE with an organizational chart that includes the names, titles and locations of all administrative staff at Stone Academy. OHE will follow-up with instructions concerning staff roster notifications that need to be submitted for approval. In particular, the organization chart needs to identify the PN program director and campus directors.
- School must provide a plan that identifies different ways of communication to their students concerning significant program changes.
- School must provide a plan for remedying the attendance taking issue identified.
- School must provide a plan outlining increasing student awareness of the campus director at their location along with administrators that are expected to be in contact with students.
- School must provide a plan for the regular evaluation of instructors, in terms of qualifications for courses they teach and their teaching effectiveness. The plan should include goals and remedial actions should instructors fail to meet goals.

Additional concerns and recommendations.

OHE had the following additional concerns and recommendations:

Significant turnover of staff. There were a significant number of staff changes during a short window of time at the school. The school reported that some of the violations may be due to the fact that staff are inexperienced. OHE recommends that there is increased training for staff so that they understand what the requirements of their job duties, along with regular mentoring to ensure staff that properly fulfill their responsibilities.

Data systems. During the visit, the school made reference to an upgrade to their current student information system, Diamond-D. Before the upgrade, there were severe limitations to the software system, that required that additional data and reports be tracked via spreadsheets. While the upgrade does allow for more functionality, it is our understanding that there are still limitations in place. The current systems in place made it difficult for the school to keep up with the increased tracking and reporting requirements of the Covid-19 pandemic. Stone Academy may want to engage with the services of a consultant to review their current data systems, their

data needs, and see what would be the best, most cost-effective solution to their current data system, so they can ensure their ability to fulfill data reporting requirements.

Major programs changes for existing cohorts. Stone Academy had made a significant mid-program change, by increasing the passing grade for the exit exam. Tied with a lack of initial clear communication, it resulted in student complaints around the change in passing grade. We suggest that Stone Academy implement any major program changes with the start of a new cohort than to make those changes to existing cohorts.

New instructors. It was our understanding that mentoring for new instructors was voluntary and not required per their contracts. We recommend including mentoring as a required component for new instructors.

Student feedback. While Stone Academy does collect student evaluation of teaching, it is unclear how such information is utilized to improve teaching. Students interviewed during the site visit, in the LPN program, reported a particularly inept established instructor and it appeared that little was done after students provided feedback. Per our corrective action above, the school should incorporate the use of student evaluations in goal setting and remedial actions for the evaluation of instructor effectiveness.

Use of the ATI. Stone Academy appears to rely heavily on the ATI as a measure of student success on the NCLEX exam. However, given the school's NCLEX scores, it seems like this strategy is not effective. We recommend having a broader approach to assess student preparedness for the NCLEX.

New LPN program administrator. We were informed that Dr. Brian Pervis, approved by the Board of Examiners for Nursing, is the new LPN program administrator. It has also come to our attention via CT elicense, that Dr. Pervis currently has 2 pending charges related to his licenses. We would appreciate comments on how this pending charges related to his selection for the position and how it may affect his future employment.

Please submit an action plan on how the school will adequately meet the conditions stated above. Schools that have repeated violations may be subject to a revocation of authorization.

If you have any further questions regarding this letter, you may contact your OHE representative, Christine Martinez at 860-947-1823.

Sincerely,



Sean Seepersad, PhD
Chief Academic Officer

East Hartford Evening Division

Issue

Over the course of the 2020-21 and 2021-22 reporting years the East Hartford Campus' evening division reported sub-standard NCLEX-PN pass rates of 74% and 48%, respectively. The Academy, through reviewing internal and external data, determined that the primary driver of this regression related directly to a decrease in competency related to the subject areas of Coordinated Care, Physiological Adaptation, and Health Promotion and Maintenance as well as a deficiency in preparing students to answer questions as they will be posed in their credentialing exam.

Current Initiatives and Rationale

August 2021 – First in a series of faculty trainings on the use of curriculum related resources

Rationale:

The Academy identified that many faculty members lacked formal training in the utilization of ATI. ATI is a testing product utilized by the institution, and paired with the curriculum, to provide continual preparation in how to actuate the knowledge gained within their courses within the context and style of their future credentialing exam (Exhibit 1).

Additional trainings and communication around instructor best practices, curriculum management, and instructor-student relationship building have been provided to strengthen instructors' delivery of curriculum.

January 2022 – Initiated instructor/nurse led study groups for students entering Seminar II (final course)

Rationale:

Based on student progression, the Academy identified cohorts who experienced a delay between theory and clinical courses leading up to Seminar II. This provided a refresher on information that was taught in theory courses offered earlier in the students' academic career.

January 2022 – Amended Faculty Testing Policy to require integration of NCLEX-PN style questions

Rationale:

The nature and style of questions on the NCLEX-PN credentialing exam are unique to that testing format and require testers to access their knowledge in a specific manner. Through conversations with students and an analysis of the relation between GPA's to NCLEX-PN scores we have determined that students need more experience answering questions in the manner that they will appear on the NCLEX-PN. By incorporating questions of this style through the course of their study, students will be better able to leverage their knowledge and pass the examination on the first attempt.

February 2022 – Commenced ATI – Live Review for students**Rationale:**

The Academy recognized a confluence of issues regarding student preparation for the NCLEX-PN testing process, specifically the need to better educate students on the application of knowledge gained in the program with NCLEX-PN style questions. The Live Review process reinforced knowledge from our curriculum with NCLEX-PN test taking strategies (Exhibit 2).

April 2022 – Increased the number of staff/faculty meetings and implemented a bi-annual Town Hall meeting between faculty and the President’s Office

Rationale:

The organizational structure ensures faculty have connectivity to their immediate supervisor and/or the campus director. However, providing improved access to work colleagues and direct access to the president strengthens collaboration, improves communication, and results in an improved culture. Forums allow faculty to share concerns about policies, curriculum, and functionality. These changes are also measured by Stone Academy in an effort to promote faculty retention.

Measurement of Effects**Improvement of NCLEX-PN Pass Rates**

A deeper analysis of the data provided by the NCSBN for the 21/22 reporting year and Mountain Measurement for the most recently completed quarter revealed an upward trend in the NCLEX-PN pass rates of our graduates. In our cross reference of this data the Academy found that while the pass rate of first-time testers for the 21/22 reporting year stood at 42.86% the pass rate from April to June of 2022 stood at 72.7%. The next available data will be released in November of 2022 and our trend line indicates a continue appreciation of this rate in the quarter ending on September 30, 2022.

Increase in average Comprehensive Predictor Scores

The testing software utilized by the Academy indicates that a score of 74.7% on the comprehensive predictor exam represents a 95% probability of passing the NCLEX-PN within three weeks of graduation. This probability did not manifest itself within the past two reporting years, largely due to the delay in credential testing related to the pandemic. The scores students receive on their predictor exam continue to correlate with their propensity to be successful on the credentialing exam. In analyzing our students' progression, we found an increase in the average first time predictor exam scores over the past three examinations. Students averaged scores of 62.95 on 6/18/22, 66.83 on 7/8/22, and 77.28 on 7/28/22. Competency level data shows an increase in all subject areas over this period as well.

Students received support in their specific areas of weakness prior to their second time taking the comprehensive predictor examination which has resulted in a 12-14.19 percentage point increase between their first and second exams. The percentage of students passing their predictor exam on their first or second attempts were 58.3% for the 6/18/22 exam, 49% for the 7/8/22 exam, and 95.7% for the 7/29/22 exam.

NCSBN, NCLEX Program Report Data

According to the annual report produced by Mountain Measurement, Inc., the median (or typical) graduate from East Hartford saw a drastic decline year-over-year in all eight "Client Needs" categories from April 2021 to March 2022. The top three greatest declines were in: Coordinated Care (27 pts); Physiological Adaptation (23 pts); and Health Promotion and Maintenance (16 pts). The distribution of content on the NCLEX-PN exam corresponds to these categories, with Coordinated Care being weighted the heaviest at 16-24% of all questions.

Conversely, the most recent quarterly report produced by Mountain Measurement, Inc., shows a sharp incline in the median graduate results for seven out of eight "Client Needs" categories. Those include Safety and Infection Control (41 pts); Reduction of Risk Potential (28 pts); and Pharmacological Therapies (24 pts). Coordinated Care, which was identified as the heaviest weighted and one of the top three greatest declines in 2021, has increased 18 pts. This shows a positive change in our trendline as a result of targeted initiatives with students (Exhibit 3). Psychosocial Integrity was the only category not increasing. Therefore, we use this data to evaluate current programming and create an initiative to improve student outcomes in the areas that lag.

Future Initiatives**September 2022 – Strengthen the post-graduation NCLEX-PN preparation course****Rationale:**

Statistically, students who take the exam within 3-weeks of graduation have a higher probability of passing the NCLEX-PN. This may not be possible for all graduates. Access to free training for graduates will provide additional practice opportunities and a means to refresh a student's knowledge of material prior to taking the NCLEX-PN.

September 2022 - Provide faculty professional development in innovative approaches through various methods such as formal and informal workshops and sessions and casual "lunch and learns."

Rationale:

Effective teaching requires clinical competence. Faculty are encouraged to maintain clinical expertise through faculty practice, keep abreast of changes in the field through literature review, and attend professional meetings related to their practice area.

September 2022 - Redesign the new faculty orientation to include the school's policies and procedures, an overview of the curriculum with exposure to the supplemental curriculum resources, and orientation to teaching assignments, clinical facilities, and processes.

Rationale:

Comprehensive orientation programs are necessary to assist new faculty in acquiring teaching competencies, facilitate socialization to the teaching role, and support faculty members as they develop as fully participating faculty members.

September 2022 - Adjust faculty meeting times to better accommodate day/evening faculty, provide alternate virtual formats to increase attendance rates, and continue to mix all faculty and staff to create cross-functional teams while increasing collaborative approaches to problem solving.

Rationale:

Effective collaboration is vital in nursing education as it allows communication and teamwork. Having most of our faculty attend our meetings will improve our outcomes and help ensure our students and faculty meet and exceed academic measures.

October 2022 - The process for all NCLEX-PN and licensure applications for students will be completed on campus with the guidance of the site administrator during the last day of the ATI Live Review.

Rationale:

For students, registering to take nursing licensing board exams can be very overwhelming, stressful, and confusing. Therefore, this approach helps give the student clarity to the process and decreases their stress to avoid errors and processing delays.

October 2022 – Revise and implement the instructor evaluation process

Rationale:

The aggressive hiring initiatives from 2021 have resulted in an increase in new instructors. An updated 30-60-90 faculty evaluation will be used to strengthen an instructor's curriculum delivery methodology as well as confirm the instructor exhibits subject matter expertise. Furthermore, internal data reflect that instructors tend to turn-over within the first 6-months. Therefore, periodic "check-ins" with HR, beginning on the instructor's 20th day, will allow the corporate staff, as opposed to academic staff, to address issues that may lead to turn-over.

November 2022 – Establish a formalized, instructor specific on-boarding and professional development program that includes training tenured faculty to become ATI champions to support instructors/ students.

Rationale:

If the organization is going to thrive, it must pursue a concerted effort to support instructor growth through learning objectives. This effort must include professional development opportunities, continued support from all levels of staff, and an on-going updated manual to document resources.

Furthermore, ATI champions are essential to support instructors in using supplemental curriculum resources for the student population. ATI champions ensure the proper application of ATI as a supplement to Stone Academy's curriculum

CERTIFICATE OF PARTICIPATION

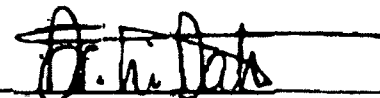
Christina H. [REDACTED]

In Recognition of Your Attendance

ATI Overview

Presented by Paul McNeil, ATI Client Executive

August 6, 2021



Dr. Linda Dahlin
Executive Vice President

CERTIFICATE OF PARTICIPATION

Christina H. [REDACTED]

In Recognition of Your Attendance
ATI Hands-on Navigation

Presented by Paul McNeil, ATI Client Executive

August 6, 2021



Dr. Linda Dahlin
Executive Vice President

CERTIFICATE OF PARTICIPATION

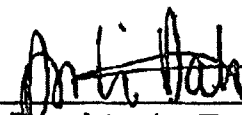
Christina H [REDACTED]

In Recognition of Your Attendance.

Culturally Responsive Teaching

Presented by Beth Ryan, Associate Professor, Columbia College

August 6, 2021



Dr. Linda Dahlin
Executive Vice President

Exhibit 2

Evening Live Review Scheduled/Pending/Processed - East Hartford

Project Numbe	Institution	Class Name	Graduation Date
18626	Stone Academy East Hartford	0222 Eve	2/28/2022
22627	Stone Academy East Hartford	0921/1019 Start	4/28/2022
18628	Stone Academy East Hartford	0522 /Start 0620Eve	9/4/2022
23960	Stone Academy East Hartford	0522/Start0620Eve	9/4/2022
21504	Stone Academy East Hartford	0922 Start 1020E	9/30/2022
21502	Stone Academy East Hartford	0922 Start 1020 Eve	10/1/2022
21505	Stone Academy East Hartford	1022/ Start 0621E	10/31/2022
21503	Stone Academy East Hartford	0922/1020E	11/19/2022
21507	Stone Academy East Hartford	1222 Start 0821 E	12/30/2022
24488	Stone Academy East Hartford	0223 Start 0621	2/28/2023
24487	Stone Academy East Hartford	0423 Start 0122	4/30/2023
22832	Stone Academy East Hartford	0823	8/31/2023
20496	Stone Academy East Hartford	0321 PT/Start0419	

NCLEX® PROGRAM REPORTS

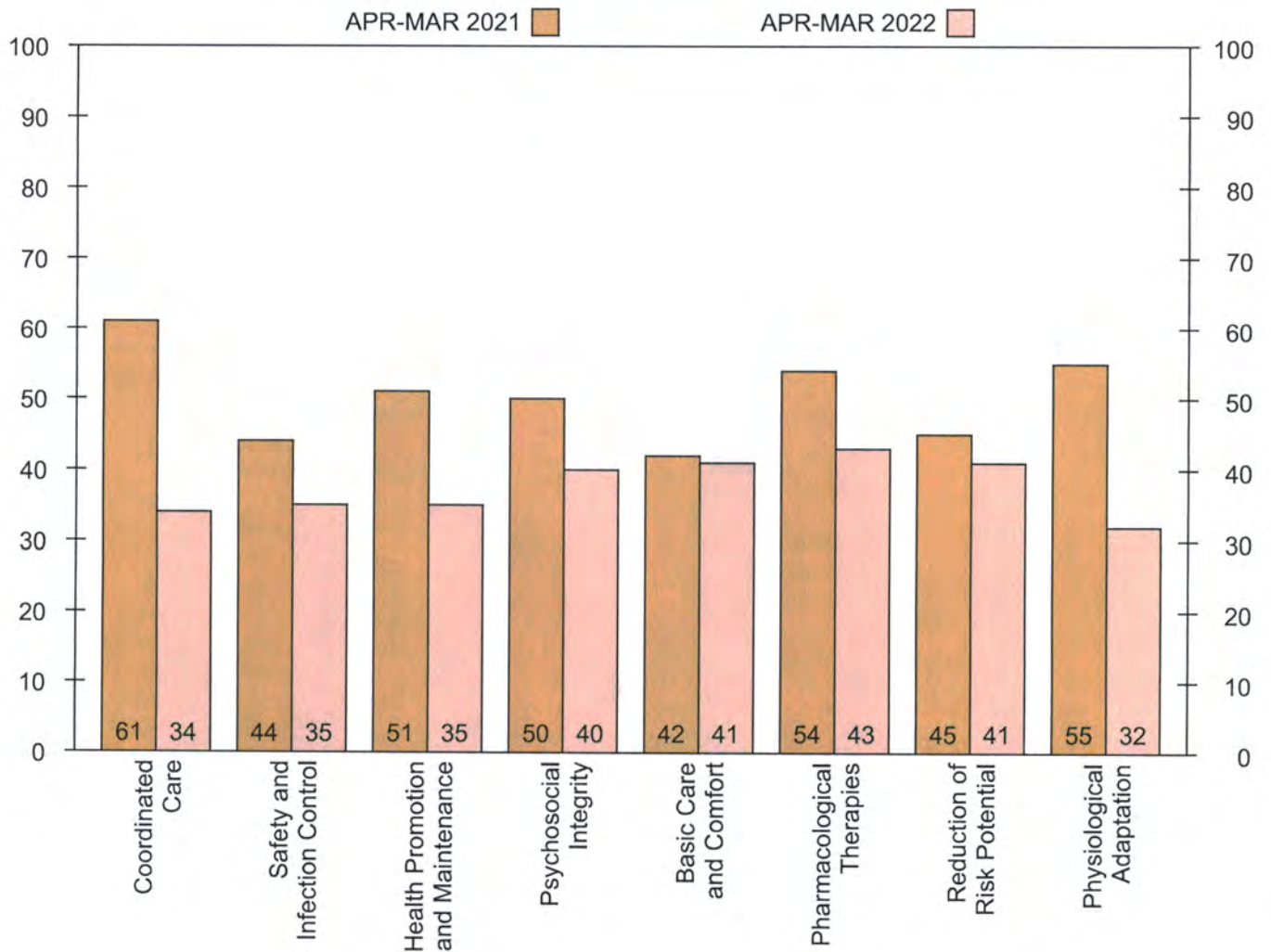
STONE ACADEMY - EAST HARTFORD - EVE

Report Period: APR 2021 - MAR 2022

TEST PLAN REPORT

CLIENT NEEDS

**Percentile Ranks of Your Graduates
Compared to Graduates from Your Jurisdiction**



Notes

The percentile ranks are based on the median performance of your graduates in each content area, compared with the performances of graduates from your jurisdiction. The median performance in a given content area falls in the middle of all your graduates' performances

(that is, half of your graduates perform above this level, and half perform below this level).

As noted in the explanation on the previous page, differences in percentile ranks should be interpreted with caution.

NCLEX® PROGRAM REPORTS

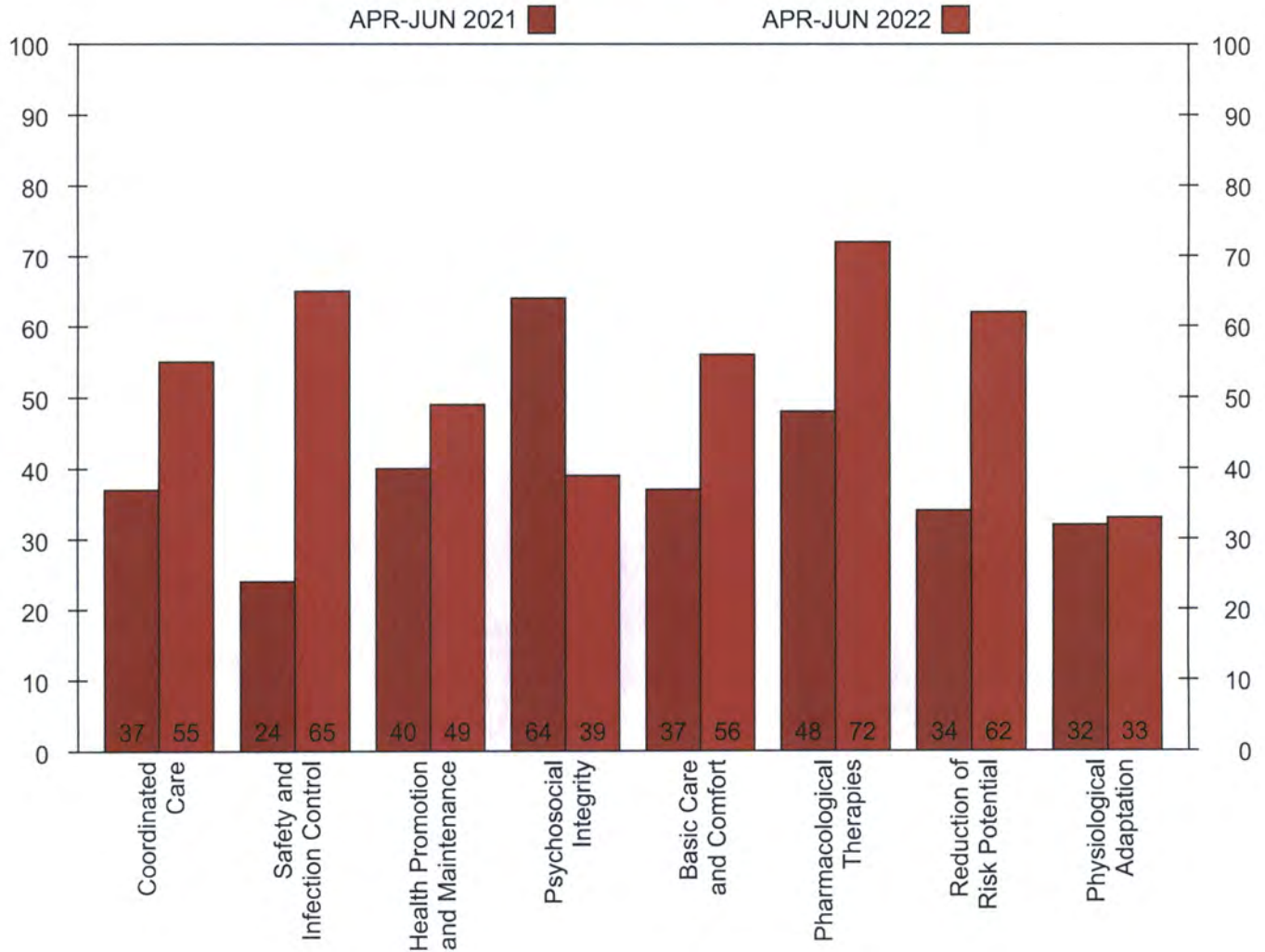
STONE ACADEMY - EAST HARTFORD - EVE

Report Period: APR 2022 - JUN 2022

TEST PLAN REPORT

CLIENT NEEDS

Percentile Ranks of Your Graduates Compared to Graduates from Your Jurisdiction



Notes

The percentile ranks are based on the median performance of your graduates in each content area, compared with the performances of graduates from your jurisdiction. The median performance in a given content area falls in the middle of all your graduates' performances

(that is, half of your graduates perform above this level, and half perform below this level).

As noted in the explanation on the previous page, differences in percentile ranks should be interpreted with caution.

Stone Academy Corrective Action Plan

2022

East Hartford - Evening Division

Corrective Action Plan Summary

2

- ▶ Definition of issue
- ▶ Current initiatives and rationale
- ▶ Measurement of effects
- ▶ Forward looking initiatives and rationale

Definition of Issue

3

Over the course of the 20/21 and 21/22 reporting years the East Hartford Campus' evening division reported sub-standard NCLEX-PN pass rates of 74% and 48% respectively. The Academy, through reviewing internal and external data, determined that the primary driver of this regression related directly to a decrease in competency related to the subject areas of physiological adaptation, health promotion and maintenance, and coordinated care as well as a deficiency in preparing students to answer questions as they will be posed in their credentialing exam.

Current Initiatives and Rationale

August 2021

Faculty Training Series: Use of curriculum resources

January 2022

ATI Live Review for students

Integration of NCLEX-PN style questions into courses

February 2022

Instructor led study groups

April 2022

Increased collaborative meetings between Faculty/Staff

Measurement of Effects

5

Increase in competency related to:

Physiological Adaptation – Health Promotion & Maintenance
Coordinated Care

Progression in average exit exam scores:

62.95% on 6/18/22 – 66.82% on 7/8/22 – 77.28% on 7/29/22

Improvement in NCLEX PN rates:

21-22 reporting year = 42.86% - '22 Q2 = 72.7% -

'22 Q3 = Avail in November

Future Initiatives

6

September 2022

- Post-graduation NCLEX-PN Preparation Course

- Formal Faculty workshops and informal “lunch and learns”

October 2022

- Administrator led completion of all NCLEX licensure applications on campus

- Revised instructor evaluation process

November 2022

- Faculty training to create ATI Champions and enhanced professional development

West Haven Evening Division

Issue

The West Haven Campus' evening division reported a decline in NCLEX-PN scores, dropping below the 80% pass rate requirement for both 2020-2021 and 2021-2022. NCLEX-PN pass rates were 73% and 47%, respectively. As such, the Academy staff reviewed internal and external data to understand root causes related to the decline. The data correlates to a decrease in subject matter competency in the subject areas of pharmacology, psychosocial integrity, and coordinated care. In addition, students acknowledged difficulties in testing due to the unfamiliarity with NCLEX-PN style questions.

Current Progress and Rationale

August 2021 – The implementation of faculty trainings around curriculum enhancement tools

Rationale:

Stone Academy identified that not all faculty members were using ATI and/or it was used inconsistently. Many lacked formal training in the utilization of ATI. ATI is a testing product that supplements the school's curriculum. The combination of the two increases a student's ability to successfully pass the NCLEX-PN exam (Exhibit 1).

In addition, instructors participate in new trainings around instructor best practices, curriculum management, and instructor-student relationship building. This works to strengthen instructors' delivery of curriculum in a systematic way.

January 2022 – Commenced ATI – Live Review for students

Rationale:

In surveying students, Stone Academy staff identified that students had limited experience with NCLEX-PN style questions. Offering Live Review reinforces knowledge from Stone Academy's curriculum combined with test taking strategies around the application of that knowledge (Exhibit 2).

January 2022 –Faculty Testing Policy was amended to require integration of NCLEX-PN style questions

Rationale:

The NCLEX-PN exam questions are formatted a specific way. It is imperative that institutions introduce and familiarize students with this specific style of questions. Using anecdotal data, it has become evident that the format of the test questions themselves can present a significant barrier to student success. Including test preparation, specifically NCLEX-PN test preparation, within the PN curriculum is paramount to setting them up to succeed on their first attempt.

February 2022 – Initiated instructor led study groups for students entering Seminar II (final course)

Rationale:

A delay in student progression during the pandemic lead to an elongated time between theory and clinical courses prior to taking Seminar II. This provided an opportunity to refresh information that was taught in theory course offered earlier in the students' academic career.

April 2022 – Increased the number of staff/faculty meetings and implemented a bi-annual Town Hall meeting between faculty and the President's Office

Rationale:

It is too easy for silos to be created in even the most open organization. Faculty typically have limited contact with anyone other than immediate supervisors, the campus director, and/or administrative assistants. By increasing access to other faculty and staff as well as direct access to the president strengthens collaboration, improves communication, and results in an improved culture. Hosting trainings, information sessions and town hall meetings will allow faculty to share concerns about policies, curriculum, and functionality. It is hopeful the increased communication will improve faculty retention.

Measurement of Effects

Improvement of NCLEX-PN Pass Rates

Data obtained from Mountain Measurement, Inc. for the period of April to June of 2022, indicated a first-time pass rate of 81.8%, which meets the annual standard set within the State's regulations. As this period includes two months from the current reporting year as well as one month from the prior year, we utilized graduate level testing data to identify the pass rate for students that took the exam in May and June of 2022. The pass rate in this period was 100%. While the sample size only represents 16.7% of the upcoming reporting year, it is indicative of the current success rate of our most recent graduates.

In separating out the April 2022 testers we were able to derive the pass rate for that month which registered at 66.7%. This number is 24.2 percentage points higher than the rate of the entire twelve-month period and represents 15% of the total testers within the prior reporting period. The April data combined with the rates for May and June show that there is a distinct increase in the NCLEX-PN pass rates which we believe directly relates to our aforementioned efforts.

The annual report produced by Mountain Measure, Inc. provides an analysis of the NCSBN, NCLEX-PN results for Stone Academy's West Haven campus. The report reveals a significant decline from 2020-21 to 2021-2022 in all categories of client needs. The top three greatest declines were in: Pharmacological (41 pts); Psychosocial Integrity (32 pts); Coordinated Care (30 pts). The NCLEX-PN exam's content distribution corresponds to these categories, with Coordinated Care (18-24%) and Pharmacological (10-16%) being two of the heaviest weighted categories.

As stated previously, Stone Academy instituted a number of initiatives to address the decline in scores. This has resulted in those same categories seeing a sharp incline, specifically in Pharmacological (39 pts); Psychosocial Integrity (56 pts); and Coordinate Care (26 pts). Additional and significant increases are seen in Reduction of Risk Potential (45 pts); Basic Care and Comfort (31 pts); and Health Promotion and Maintenance (28 pts).

The numerous initiatives put forth by Stone Academy over the past several months have resulted in a positive trend in student success (Exhibit 3).

Average Comprehensive Predictor Scores

In analyzing the relationship between comprehensive predictor exam scores and the likelihood of passing the NCLEX-PN we have found that there is a direct correlation of success in the former leading to success in the latter. Statistically, a passing grade of 74.7% or higher on the predictor exam reflects a 95% probability of passing the NCLEX-PN when the credentialing exam is taken within three weeks of passing the predictor. This did not play out due to factors related to the pandemic and the exam still remains a primary predictor of future pass rates. As such, we analyzed the cohorts that tested most recently and found an increasing trend in average comprehensive predictor exam scores. In order, these cohorts averaged 72.7% on 5/6/22; 76.5% on 6/22/22; and 78.3% on 8/4/22. Of these groups, the percent passing the predictor exam between their first and second attempts were 95%, 91%, 94%, respectively.

As the Academy's efforts commenced slightly earlier in West Haven than East Hartford, the positive trend lines begin earlier for this campus.

Future Initiatives

September 2022 - Redesign a formalized, instructor-specific onboarding program that includes faculty orientation to have the school's policies and procedures, an overview of the curriculum with exposure to the supplemental curriculum resources, and direction to teaching assignments, clinical facilities, and processes.

Rationale:

The organization must pursue a concerted effort to support instructor growth. This effort must include professional development opportunities, continued support from all levels of staff, and an ongoing updated manual to document resources.

September 2022 - Commence post-graduation NCLEX preparation course

Rationale:

Statistically, students who take the exam within 3-weeks of graduation have a higher probability of passing the NCLEX. However, this may not be possible for all graduates. Providing access to free training to graduates will provide additional practice opportunities and a means to refresh a student's knowledge of material before taking the NCLEX.

September 2022- Evaluate the use of the rideshare program to reduce barriers to attendance; strengthen partnerships with social service providers for direct intervention.

Rationale:

Students in today's academic environments represent a broad spectrum of diversity in learning needs and expectations. Therefore, educational institutions of higher learning face challenges in teaching students of various ages and backgrounds and diverse life experiences.

October 2022 - Revise and implement the instructor evaluation process

Rationale

The aggressive hiring initiatives from 2021 have increased new instructors. A 30-60-90 faculty evaluation will be used to strengthen an instructor's curriculum delivery methodology as well as ensure an instructor's subject matter expertise. The scholarship of teaching requires evidence of effective teaching and dissemination of the knowledge. Furthermore, internal data reflect that instructors tend to turn over within the first 6-months. Therefore, periodic "check-ins" with HR, beginning on the instructor's 20th day, will allow corporate staff to address issues that may lead to turnover instead of academic staff.

November 2022- Conduct professional development for PN academic faculty for test writing webinar through Elsevier entitled "Writing Effective Next Generation NCLEX® (NGN) Items."

Rationale:

Effective teaching requires clinical competence; Faculty are encouraged to maintain clinical expertise through faculty practice, keep abreast of changes in the field through literature review, and attend professional meetings related to their practice area.

CERTIFICATE OF PARTICIPATION

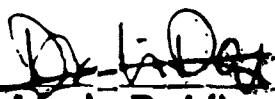
Jessica L [REDACTED]

In Recognition of Your Attendance

ATI Overview

Presented by Paul McNeil, ATI Client Executive

August 6, 2021



Dr. Linda Dahlin
Executive Vice President

CERTIFICATE OF PARTICIPATION

Jessica L [REDACTED]

In Recognition of Your Attendance

ATI Hands-on Navigation

Presented by Paul McNeil, ATI Client Executive

August 6, 2021



Dr. Linda Dahlia
Executive Vice President

CERTIFICATE OF PARTICIPATION

Jessica L [REDACTED]

In Recognition of Your Attendance

Culturally Responsive Teaching

Presented by Beth Ryan, Associate Professor, Columbia College

August 6, 2021



Dr. Linda Dahlin
Executive Vice President

Exhibit 2

Evening Live Review Scheduled/Pending/Processed - West Haven			
Project Number	Institution	Class Name	Graduation Date
18599	Stone Academy West Haven	0723/0821E	1/1/2022
20349	Stone Academy West Haven	0619 Eve 1219 Eve	2/2/2022
20847	Stone Academy West Haven	0322	3/1/2022
21830	Stone Academy West Haven	0723/0821E (0422 Eve)	4/8/2022
18602	Stone Academy West Haven	0723/0821E	5/6/2022
23048	Stone Academy West Haven	0722Eve / 0820 Start	6/30/2022
24497	Stone Academy West Haven	0922 / Start 0620Eve	9/30/2022
25281	Stone Academy West Haven	1122 Eve	11/30/2022
24496	Stone Academy West Haven	0923	9/28/2023
24495	Stone Academy West Haven	1123	11/30/2023
22793	Stone Academy West Haven	0324	3/15/2024

NCLEX® PROGRAM REPORTS

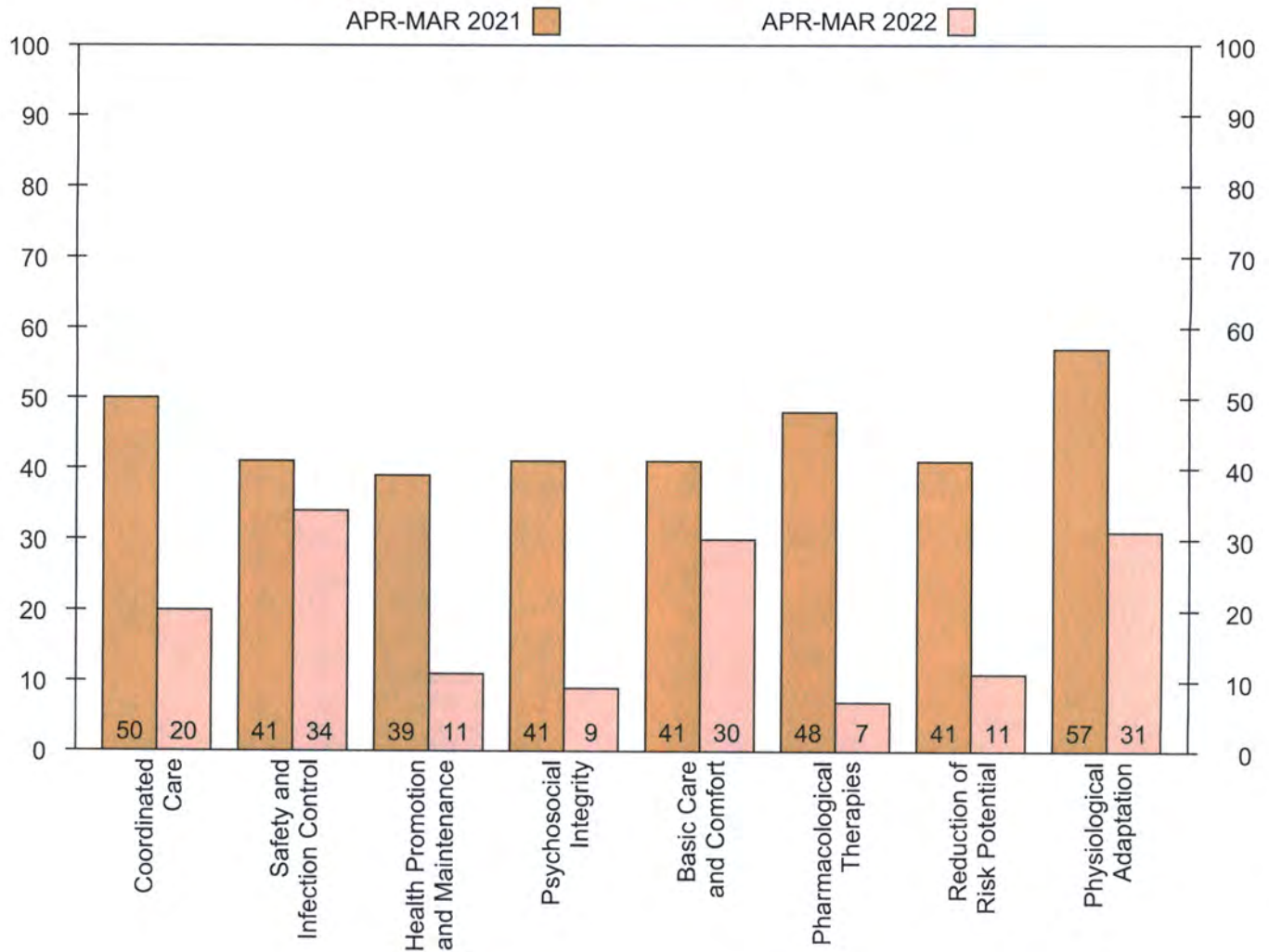
STONE ACADEMY - WEST HAVEN - EVENING

Report Period: APR 2021 - MAR 2022

TEST PLAN REPORT

CLIENT NEEDS

Percentile Ranks of Your Graduates Compared to Graduates from Your Jurisdiction



Notes

The percentile ranks are based on the median performance of your graduates in each content area, compared with the performances of graduates from your jurisdiction. The median performance in a given content area falls in the middle of all your graduates' performances

(that is, half of your graduates perform above this level, and half perform below this level).

As noted in the explanation on the previous page, differences in percentile ranks should be interpreted with caution.

NCLEX® PROGRAM REPORTS

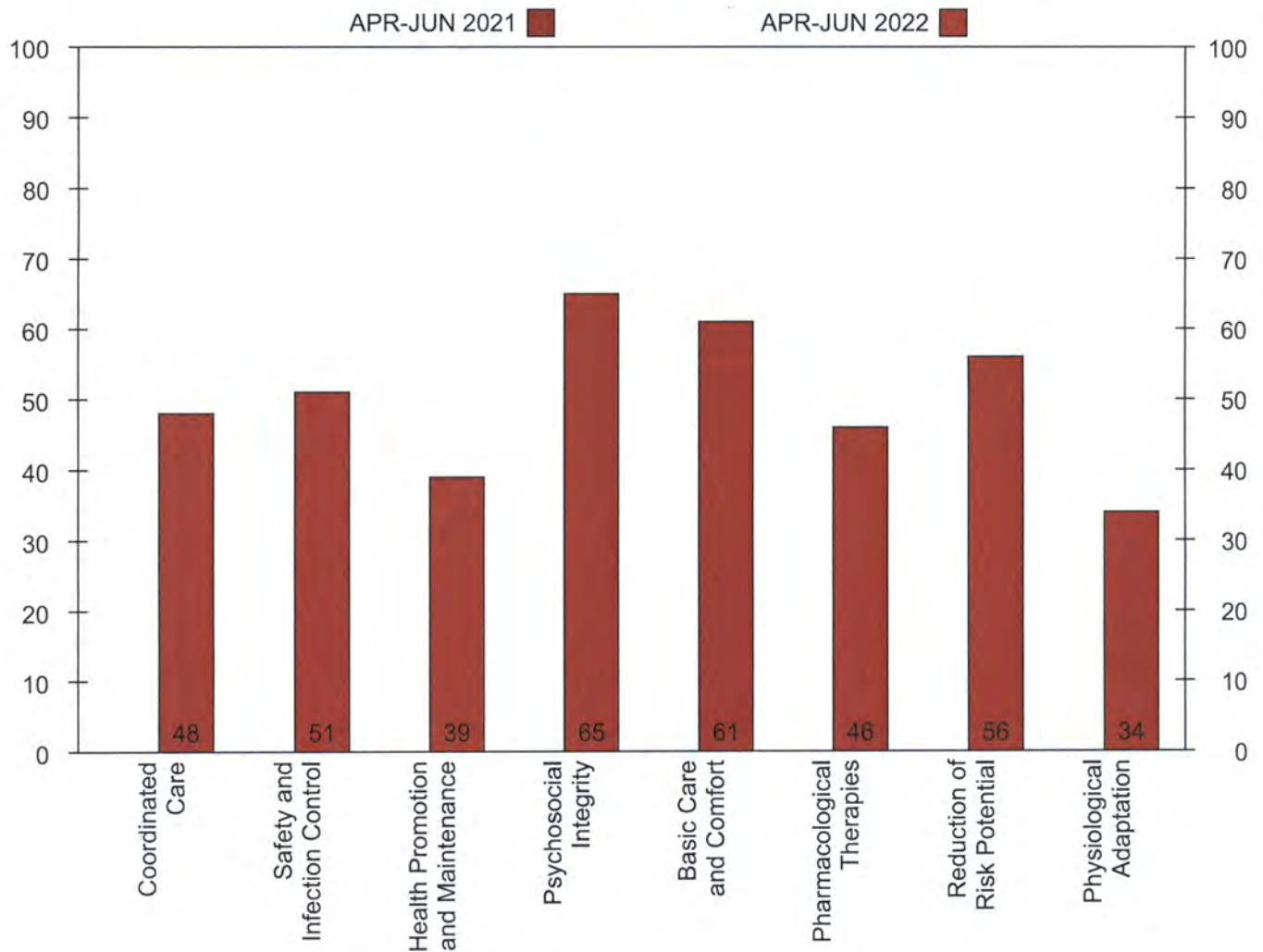
STONE ACADEMY - WEST HAVEN - EVENING

Report Period: APR 2022 - JUN 2022

TEST PLAN REPORT

CLIENT NEEDS

Percentile Ranks of Your Graduates Compared to Graduates from Your Jurisdiction



Notes

The percentile ranks are based on the median performance of your graduates in each content area, compared with the performances of graduates from your jurisdiction. The median performance in a given content area falls in the middle of all your graduates' performances.

(that is, half of your graduates perform above this level, and half perform below this level).

As noted in the explanation on the previous page, differences in percentile ranks should be interpreted with caution.

Stone Academy Corrective Action Plan

2022

West Haven - Evening Division

Corrective Action Plan Summary

- ▶ Definition of issue
- ▶ Current initiatives and rationale
- ▶ Measurement of effects
- ▶ Forward looking initiatives and rationale

Definition of Issue

The West Haven Campus' evening division reported a decline in NCLEX-PN scores, dropping below the 80% pass rate requirement for both 2020-2021 and 2021-2022. NCLEX-PN pass rates were 73% and 47%, respectively. As such, the Academy staff reviewed internal and external data to understand root causes related to the decline. The data correlates to a decrease in subject matter competency in the subject areas of pharmacology, psychosocial integrity, and coordinated care. In addition, students acknowledged difficulties in testing due to the unfamiliarity with NCLEX-PN style questions.

Current Initiatives and Rationale

August 2021

Increase training and utilization of ATI

January 2022

ATI Live Review for students

Integration of NCLEX-PN style questions into courses

February 2022

Instructor led study groups for students entering SEM 111

April 2022

Town Hall Style meetings between Faculty and President

Measurement of Effects

5

Increase in competency related to:

Pharmacology – Psychosocial Integrity – Coordinated Care

Progression in average exit exam scores:

72.7% on 5/6/22 – 76.5% on 6/22/22 – 78.3% on 8/4/22

Improvement in NCLEX PN rates:

'22 Q2 = 81.8% - '22 May - June = 100%

'22 Q3 = Avail in November

Future Initiatives

6

September 2022

- Implementation of redesigned faculty onboarding program
- Launch of post graduation preparation course

October 2022

- Utilization of a new faculty evaluation tool

November 2022

- Faculty training entitled "*Writing Effective Next Generation NCLEX Items.*"

PHONE CALLS/SCOPE OF PRACTICE QUESTIONS SUMMARY – MONTH: July 2022 (37 calls)

Answered with or without written documents

APRNs 10 calls:

- 6-Request information on collaborative practice agreements. *Refer to the Department website, Practitioner Licensing and APRN Collaborative Agreements.*
- Request a copy of the APRN scope of practice. *Refer to the Board of Examiners for Nursing (BOEN) website and the Connecticut (CT) Nurse Practice Act (NPA).*
- 2-Can an APRN certified in one practice area, practice in a “new” area with education, verification of competency and a collaborative agreement with a CT licensed physician in the “new” practice area? *Yes.*
- APRN licensed in CT asking if she can work in New Hampshire. *Refer caller to contact the New Hampshire Department of Health and/or Board of Nursing.*

RNs 15 calls:

- 4-Request a copy of the RN scope of practice. *Refer to the BOEN website and the CT NPA.*
- 2-Can an RN prescribe medications or order diagnostic tests? *No, refer to the CT NPA.*
- 3-RN requesting an update on license renewal application. *Refer to the Department’s licensing unit (provided e-mail address and phone number).*
- RN employed at a long-term care facility who was interviewed by a Department of Public Health, Facility Licensing & Investigations Section (FLIS) investigator/surveyor regarding an event, wants to know if she as a licensee is being investigated. *Discussed the Practitioner Licensing & Investigations Section (PLIS) process including that if she was being investigated, she would be contacted by a PLIS investigator.*
- RN Licensed in North Carolina asking if she needs a license to practice as a RN in CT? *Yes, refer to the CT NPA.*
- RN request information in Continuing Education requirements. *Refer to the Department of Public Health website, Practitioner Licensing, Registered Nurse then Continuing Education.*
- Can a RN perform a patient physical medical examination? *No, refer to the BOEN website and the Connecticut NPA.*
- RN licensed in CT asking if she can work in Massachusetts. *Refer caller to contact the Massachusetts Department of Health and/or Board of Nursing.*
- Former faculty of a RN Nursing Program in CT requesting information on a permanent faculty waiver. *Refer to the Nursing Education Programs and Licensure Requirements General (the Regulations) 20-90-51 (e).*

LPNs 6 calls:

- 3-Request a copy of the LPN scope of practice. *Refer to the BOEN website and the CT NPA.*

- 2-LPN requesting an update on license renewal application. *Refer to the Department's licensing unit (provided e-mail address and phone number).*
- Can an LPN be "supervised" by a physician? *No, according to the CT Nurse Practice Act, an LPN is directed by a RN and/or an APRN.*

ULAP no calls.

Schools no calls.

Guidelines/Other 6 calls:

- 2-In the process of setting up a Medical Spa requesting guidance. *Refer to the Medical Spa Statute, Connecticut General Statutes, Chapter 368ll, Section 19a-903 c.*
- 3- Request information on Certified Nursing Assistant programs in CT. *Refer to Department staff who works with the CNA programs in CT (provide e-mail address).*
- Nursing student complaint about program issues. *Refer to the school policy & procedure for grievances to submit a grievance (to the school), may want to participate in the Public Forum portion of a BOEN meeting, and may want to send a complaint to the Office of Higher Education.*

PHONE CALLS/SCOPE OF PRACTICE QUESTIONS

SUMMARY – MONTH: August 2022 (43 calls)

Answered with or without written documents

APRNs 16 calls:

- 6-Request information on collaborative practice agreements. *Refer to the Department website, Practitioner Licensing and APRN Collaborative Agreements.*
- 5-Request a copy of the APRN scope of practice. *Refer to the Board of Examiners for Nursing (BOEN) website and the Connecticut (CT) Nurse Practice Act (NPA).*
- 3-Can an APRN certified in one practice area, practice in a “new” area with education, verification of competency and a collaborative agreement with a CT licensed physician in the “new” practice area? *Yes.*
- 2-APRN requesting an update on license renewal application. *Refer to the Department’s licensing unit (provided e-mail address and phone number).*

RNs 10 calls:

- 4-Request a copy of the RN scope of practice. *Refer to the BOEN website and the CT NPA.*
- 3-RN requesting an update on license renewal application. *Refer to the Department’s licensing unit (provided e-mail address and phone number).*
- 3-Can a RN perform a patient physical medical examination? *No, refer to the BOEN website and the Connecticut NPA.*

LPNs 7 calls:

- 2-Request a copy of the LPN scope of practice. *Refer to the BOEN website and the CT NPA.*
- 2-LPN requesting an update on license renewal application. *Refer to the Department’s licensing unit (provided e-mail address and phone number).*
- Can an LPN be “supervised” by a physician? *No, according to the CT Nurse Practice Act, an LPN is directed by a RN and/or an APRN.*
- Can an LPN complete a patient assessment? *No, the LPN can contribute objective and subjective data in an accurate and timely manner (please refer to the BOEN website and the Declaratory Ruling titled “Licensed Practical Nurse” and the CT NPA).*
- Can an LPN work in a Medical Spa and complete cosmetic medical procedures? *No, refer to the Medical Spa Statute, Connecticut General Statutes, Chapter 368ll, Section 19a-903 c.*

ULAP 1 call:

- Request a copy of the scope of a Medical Assistant (MA). *As the Department does not license MA, the Department cannot provide a scope but may want to refer to the BOEN website and the Declaratory Ruling of Delegation to ULAP.*

Schools 4 calls:

- University of Rhode Island: Does the BOEN or Department have oversight of post-licensure nursing programs? *No.*
- University of Mobile, AL: Does the BOEN or Department have oversight of post-licensure nursing programs? *No.*
- Southern New Hampshire University: Does the BOEN or Department have oversight of post-licensure nursing programs? *No.*
- CCSU- request documentation to support that their Program is “approved” by the CT BOEN. *Provided that documentation.*

Guidelines/Other 5 calls:

- Caller requesting information on the process to obtain a license as a Home Health Care Agency. *Directed the caller to a Nurse Supervisor for Home Health Care in the Facility Licensing & Investigations Section (FLIS) of the Department.*
- Request information on Certified Nursing Assistant programs in CT. *Refer to Department staff who works with the CNA programs in CT (provide e-mail address).*
- In the process of setting up a Medical Spa requesting guidance. *Refer to the Medical Spa Statute, Connecticut General Statutes, Chapter 368ll, Section 19a-903 c.*
- Family member of student that graduated from a CT Nursing Program who failed the NCLEX two times asking if the Department could recommend a reputable tutor (for this student/candidate)? *The Department can not make any recommendations, although the student may want to reach out to the Nursing Program and/or the CT Nursing Association.*
- Nursing student complaint about program issues. *Refer to the school policy & procedure for grievances to submit a grievance (to the school), may want to participate in the Public Forum portion of a BOEN meeting, and may want to send a complaint to the Office of Higher Education.*

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In re: Sharon L. Owen, R.N.

Petition No. 2019-326

MOTION TO WITHDRAW STATEMENT OF CHARGES

The Department of Public Health ("the Department") moves the Board of Examiners for Nursing ("the Board") for an Order granting this Motion to Withdraw Statement of Charges.

As grounds for this Motion, the Department states as follows:

1. On August 28, 2022, Sharon L. Owen ("respondent") signed a Voluntary Surrender of License Affidavit. A copy of respondent's Affidavit is attached hereto marked as Attachment "A." The Department has accepted respondent's Affidavit.

2. Respondent has voluntarily given up her right to practice as a registered nurse in Connecticut with the Department's approval. For this reason, the Department believes that continued prosecution of this case is unnecessary, and that it is in the interests of administrative economy to terminate the proceedings in this matter at this time.

Dated this 30th day of August, 2022 at Hartford, Connecticut.

/s/ Linda L. Fazzina
Linda L. Fazzina, Staff Attorney
Office of Legal Compliance
Healthcare Quality and Safety Branch

ORDER

The Department of Public Health's Motion to Withdraw Statement of Charges having been duly considered by the Board of Examiners for Nursing, is hereby GRANTED/DENIED.

Dated this _____ day of _____, 2022 at _____, Connecticut.

Board of Examiners for Nursing

CERTIFICATION

I certify that on this 30th day of August, 2022, a copy of the foregoing was sent to respondent's counsel, Attorney Robert Kolesnik, Jr., via email (rskjr67@yahoo.com) and to the Department's Public Health Hearing Office (ppho.dph@ct.gov).

/s/ Linda L. Fazzina

Linda L. Fazzina, Staff Attorney
Office of Legal Compliance

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In re: Sharon L. Owen, R.N.

Petition No. 2019-326

STATEMENT OF CHARGES

Pursuant to the General Statutes of Connecticut, §§19a-10 and 19a-14, the Department of Public Health ("the Department") brings the following charges against Sharon L. Owen:

1. Sharon L. Owen of Woodbury, Connecticut ("respondent") is, and has been at all times referenced in this Statement of Charges, the holder of Connecticut registered nursing license number E51909.
2. During the course of approximately February 2018 through May 2019, respondent abused and/or utilized to excess alcohol.
3. Respondent's abuse and/or excess use of alcohol does, and/or may, affect her ability to practice as a registered nurse.
4. The above facts constitute grounds for disciplinary action pursuant to the General Statutes of Connecticut, §20-99(b), including but not limited to §20-99(b)(5).

THEREFORE, the Department prays that:

The Connecticut Board of Examiners for Nursing, as authorized by the General Statutes of Connecticut, §§20-99(b) and 19a-17, revoke or order other disciplinary action against the license of Sharon L. Owen as it deems appropriate and consistent with law.

Dated at Hartford, Connecticut this 20th day of May, 2022.



Christian D. Andresen, MPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

Re: Sharon L. Owen
License No.: E51909

Petition No. 2019-326

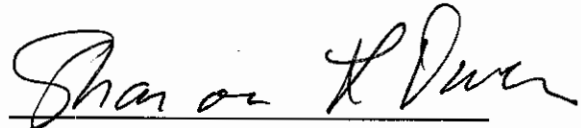
VOLUNTARY SURRENDER OF LICENSE AFFIDAVIT

Sharon L. Owen, being duly sworn, deposes and says:

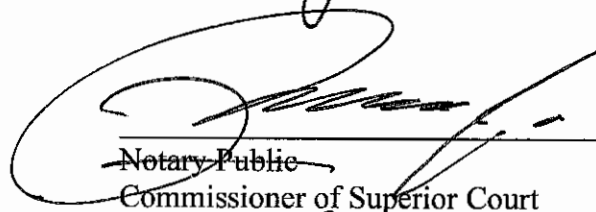
1. I am over the age of majority and agree to the obligations of an oath.
2. I make this affidavit on the basis of personal knowledge.
3. I am licensed by the Department of Public Health ("Department") to practice as a registered nurse. I presently hold license number E51909.
4. I hereby voluntarily surrender my license to practice as a registered nurse in the State of Connecticut as provided pursuant to Section 19a-17(d) of the Connecticut General Statutes.
5. I agree and acknowledge that if I seek a new license or to reinstate my license at any time in the future, the allegations contained in Petition Number 2019-326 shall be deemed true. I further agree and acknowledge that any such application must be made to the Department which shall have absolute discretion as to whether said license shall be issued or reinstated and, if so, whether said license shall be subject to conditions as provided pursuant to Section 19a-14(a)(6) of the Connecticut General Statutes.
6. I hereby waive any right to a hearing I may have regarding any request that my license be reinstated or that a new license be issued and also waive any right that I may have to appeal or otherwise challenge the disposition of any such request.
7. I agree and acknowledge that this affidavit and the case file in Petition Number 2019-326 are public documents, and I am executing this affidavit in settlement of the allegations contained in the above-referenced petition.
8. I agree and acknowledge that this surrender of my license is reportable to the National Practitioner Data Bank maintained by the United States Department of Health and Human Services and is public information.
9. I agree and acknowledge that, upon execution of this document by the Department, the Department will present this document to the Board of Examiners for Nursing ("the Board") and will move to withdraw the Statement of Charges in Petition No. 2019-326. I agree that

this document is not effective unless and until the Department has executed it, and the Board either grants the Department's Motion to Withdraw or the charges are dismissed.

10. I agree and acknowledge that I have consulted with my attorney prior to signing this affidavit.
11. I agree and acknowledge that the execution of this document has no bearing on any criminal liability without the written consent of the Director of the Medicaid Fraud Control Unit or the Bureau Chief of the Division of Criminal Justice's Statewide Prosecution Bureau.
12. I agree and acknowledge that the purpose of this agreement is to resolve the pending matter against my license and is not intended to affect any claim of civil liability that might be brought against me.
13. If applicable, I agree to comply with the provision of Section 19a-14-44 Regulations Connecticut State Agencies.


Sharon L. Owen

Subscribed and sworn to before me this 28th day of August 2022.


~~Notary Public~~
Commissioner of Superior Court
Robert S. Kolesnik, Jr.



Accepted: _____
Christian D. Andresen, MPH, CPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

8/29/2022
Date

SUMMARY SUSPENSION COVER SHEET

In Re: Natalie Primini, LPN

Petition Number: 2022-808

1. Natalie Primini of Meriden, Connecticut (“respondent”) graduated from Lincoln Technical Institute in 2008 and was licensed to practice nursing in 2009.
2. In August 2014, the Connecticut Board of Examiners for Nursing (“Board”) ordered a Memorandum of Decision in Petition Number 2013-69 revoking respondent’s nursing license based, in part, upon respondent administering acetaminophen to a patient instead of Percocet and failing to properly document medical records.
3. On or about February 2, 2022, the Board ordered a Memorandum of Decision in Petition Number 2020-884 (“Order”) reinstating respondent's nursing license.
4. The Order placed respondent’s license on probation for two (2) years and required her, in part, to: submit to weekly random urine screens; engage in therapy with a therapist approved by the Department; cause the submission of therapy reports to the Department; and cause the provider prescribing controlled substance(s) to submit monthly reports to the Department until such time as the controlled substance(s) are no longer prescribed.
5. Respondent violated the terms of the Order in one or more of the following ways:
 - a. From approximately February 2, 2022 through the present, respondent failed to submit to weekly random urine screens;
 - b. From approximately February 2, 2022 through the present, respondent failed to cause the submission of controlled substance reports to the Department;
 - c. From approximately March 2022 through May 2022, respondent failed to engage in therapy with a therapist approved by the Department; and/or,

- d. From approximately June 2022 through the present, respondent failed to engage in therapy and/or cause the submission of therapy reports to the Department.
6. For the foregoing reasons, the Department believes that respondent's ability to practice nursing represents a clear and immediate danger to the public health and safety.
7. The Department respectfully requests the Board to summarily suspend respondent's nursing license until a full hearing on the merits can be held.

CONFIDENTIALITY NOTICE: This document and all attachments may contain information that is confidential or privileged. Please do not disseminate, distribute or copy the contents or discuss with parties who are not directly involved in this petition. Thank you.

SUMMARY SUSPENSION COVER SHEET

In re: Samantha Angelini, R.N.

Petition No. 2022-759

1. Samantha Angelini, R.N. of Woodbury, Connecticut (hereinafter "respondent") was issued license number E54130 on September 3, 1991. She graduated from Capital Community College in 1991.
2. Other states of licensure: RI RN55258 (Expired)
3. Past discipline:
 - a. 2009-2009199 in which respondent diverted controlled substances for her own use, resolved with a Consent Order with a \$250 civil penalty
 - b. 2015-804 in which respondent abused multiple controlled substances, resolved with a Voluntary Surrender
 - c. 2021-758 in which respondent requested reinstatement, resulted in Reinstatement Consent Order ("RCO") that placed respondent's nursing license on probation for 4 years effective November 10, 2021 and required, in part, therapy, urine drug screens and support group meetings.
4. On or about November 25, 2021, respondent failed to engage in therapy as required by paragraph 5A and/or paragraph 5A(2) of the RCO.
5. On or about December 1, 2021, and/or January 4, 2022, respondent failed to secure the services of a screening monitor as required by paragraph 5B(1) and/or paragraph 5B(3) of the RCO.
6. Respondent failed to arrange for and/or submit to observed random urine screens on several occasions as required by paragraph 5B(1) and/or paragraph 5B(3) of the RCO.
7. In or about February 2022 respondent failed to submit quarterly attendance logs for "anonymous" or support group meetings as required by paragraph 5J of the RCO.
8. On or about May 23, 2022, May 27, 2022, and May 31, 2022. respondent's urine screen tested positive for ethanol in violation of paragraph 5B(5) and paragraph 5B(7)
9. Respondent's conduct as described above constitutes one or more violations of the terms of probation as set forth in the Consent Order, and constitute grounds for disciplinary action pursuant to the General Statutes of Connecticut, §19a-17, and/ or §20-99(b), including but not limited to §20-99(b)(2), §20-99(b)(5), and/or §20-99(b)(6)
10. In or about May 2022, respondent abused and/or utilized to excess alcohol. Respondent's abuse and/or excess use of alcohol does, and/or may, affect her practice as a nurse.
11. The above facts constitute grounds for disciplinary action pursuant to Connecticut General Statutes §20-99(b), including, but not limited to §20-99(b)(5).

12. For the foregoing reasons, the Department believes that respondent's continued practice as a nurse represents a clear and immediate danger to the public health and safety. The Department respectfully requests that this Board summarily suspend respondent's license until a full hearing on the merits can be held.

CONFIDENTIALITY NOTICE: This document and all attachments may contain information that is confidential or privileged. Please do not disseminate, distribute or copy the contents or discuss with parties who are not directly involved in this petition.

**STATE OF CONNECTICUT
BOARD OF EXAMINERS FOR NURSING**

Nicholas Lewonczyk, LPN
License No. 033506

Petition No. 2021-506

MEMORANDUM OF DECISION

Procedural Background

On December 20, 2021, the Department of Public Health ("Department") filed a Motion for Summary Suspension ("Motion") and Statement of Charges ("Charges") with the Board of Examiners for Nursing ("Board") against Nicholas Lewonczyk ("Respondent"). Board ("Bd.") Exhibit ("Ex.") 1, 2. The Charges allege violations of Chapter 378 of the Connecticut General Statutes ("Conn. Gen. Stat.") by Respondent which would subject Respondent's licensed practical nurse ("LPN") license to disciplinary action pursuant to Conn. Gen. Stat. §§ 19a-17 and 20-99(b).

On January 5, 2022, based on the allegations in the Charges and affidavits and reports attached to the Motion, the Board found that Respondent's continued nursing practice presented a clear and immediate danger to public health and safety. On that date, pursuant to Conn. Gen. Stat. §§ 4-182(c) and 19a-17(c), the Board ordered that Respondent's LPN license be summarily suspended, pending a final determination by the Board of the allegations contained in the Charges. Bd. Ex. 3.

On January 5, 2022, the Summary Suspension Order, Charges, and Notice of Hearing were sent by first class mail to 33 Raymond Street, Stratford, CT 06614 and by electronic mail ("e-mail") to lewonczyks@aol.com, Respondent's respective mailing and e-mail addresses of record on file with the Department.¹ Bd. Ex. 1-5. The Notice sent via first class mail was not returned to sender and the Notice sent via e-mail was not returned as undeliverable.² The Notice

¹ Conn. Gen. Stat. § 19a-89 states, "Whenever any person holding a license... issued by the Department of Public Health changes his office or residence address, he shall, within thirty days thereafter notify said department of his new office or residence address." In this case, Respondent did not provide the Department any notification of a change of address as required by § 19a-89. Therefore, Notice was sent to Respondent's last known e-mail address of record, and service of Notice to such address is deemed sufficient.

² On January 5, 2022 at 6:59 p.m., Respondent acknowledged receipt of the Summary Suspension Order, Charges, and Notice of Hearing by reply e-mail. Bd. Ex. 6.

informed that a remote hearing to be conducted via TEAMS had been scheduled for January 19, 2022.

On January 18, 2022, the link to the TEAMS video hearing was sent to Respondent by e-mail to lewonczyks@aol.com.³ Bd. Ex. 7.

On January 19, 2022, the hearing was held as scheduled via TEAMS video conference. Respondent failed to appear and was not represented by counsel. Attorney Craig Sullivan represented the Department. Transcript ("Tr.") pages (" pp.") 3-13.

Each member of the Board involved in this decision attests that he/she was present at the hearing, or has reviewed the record, and that this decision is based entirely on the record, the law, and the Board's specialized professional knowledge in evaluating the evidence. *Pet v. Department of Health Services*, 228 Conn. 651 (1994).

Allegations

Count One

1. In paragraph 1 of the Charges, the Department alleges that Respondent is of Stratford, Connecticut and has been at all times referenced in this Statement of Charges, the holder of Connecticut license number 033506.
2. In paragraph 2 of the Charges, the Department alleges that on or about April 21, 2021, the Board issued a memorandum of decision in Petition No. 2017-50 (hereinafter the "Original MOD"), which was to go into effect that same date. Therein the Board found that Respondent's emotional disorders and/or cannabis abuse and/or opioid dependence does, and/or may affect his practice and it placed Respondent's license on probation for four years.
3. In paragraph 3 of the Charges, the Department alleges that on or about May 3, 2021, the Department filed a Request for Reconsideration of Memorandum of Decision requesting a reconsideration of the disciplinary terms contained in the Original MOD. On May 19, 2021, upon the Department's motion, the Board voted to amend the Original MOD.
4. In paragraph 4 of the Charges, the Department alleges that on or about September 15, 2021, the Board issued an amended memorandum of decision in Petition No. 2017-50 (hereinafter the "Amended MOD"), which was to go into effect that same date. Therein, the Board found that Respondent's emotional disorders and/or cannabis abuse and/or opioid dependence does, and/or may affect his practice, but that Respondent could practice with reasonable skill and safety under the terms of the Amended MOD; it reinstated Respondent's license; it placed Respondent's license on probation for four

³ The e-mail sent to Respondent on January 18, 2022 at 2:10 p.m. by Jeffrey Kardys, Board Liaison, providing the link to the TEAMS hearing is hereby identified and entered into the record as Bd. Ex. 7.

years; and it initially restricted Respondent's use of the license allowing him to use it only for the purpose of taking a refresher program as further required under the Order.

5. In paragraph 5 of the Charges, the Department alleges that the other conditions imposed under the Amended MOD included, in part, a.) pre-approval of Respondent's employment by the Department; b.) employer reports monthly for years one, two and four, and quarterly for year three; c.) therapy and counseling for chemical dependency; d.) therapist reports monthly for years one and four, and quarterly for years two and three; e.) sponsorship and participation in AA/NA meetings at least ten times a month with written documentation of attendance; f.) observed random urine screens weekly for the first, second and fourth years of probation, and monthly during the third year of probation, with all such screens being negative for the presence of alcohol and drugs except prescribed drugs; g.) notice of, and reporting of, the prescription of controlled substances for greater than two weeks; h.) successful completion of a Board approved L.P.N. refresher course with a clinical component, and passing of the practical nursing licensing examination offered by the National Council of State Boards of Nursing Licensing Examination (hereinafter "NCLEX") within 12 months; i.) after passing the NCLEX, Respondent's license was to remain on probation for the remainder of the four-year probationary period under the other imposed conditions; and j.) any finding that Respondent violated the Order was to subject Respondent to sanctions under Conn. Gen. Stat. §§ 19a-17(a) and (c), including, but not limited to, the revocation of his license.
6. In paragraph 6 of the Charges, the Department alleges that from on or about September 15, 2021 to the present, the Department has not received any of the information or documentation that was required to be submitted under the Amended MOD, and the Department has received no information or documentation evidencing Respondent's compliance with any of the terms or conditions imposed under the Amended MOD.
7. In paragraph 7 of the Charges, the Department alleges that the above facts constitute grounds for disciplinary action pursuant to the General Statutes of Connecticut §§ 19a-17 and 20-99, including, but not necessarily limited to:
 - a. §19a-17(a),
 - b. §19a-17(c),
 - c. §20-99(b)(4), and
 - d. §20-99(b)(5).

Count Two

8. In paragraph 8 of the Charges, the Department alleges that paragraphs one through six of Count One are incorporated herein by reference as if set forth in full.
9. In paragraph 9 of the Charges, the Department alleges that from on or about April 21, 2021 to the present, Respondent has or had an emotional disorder and/or mental illness.
10. In paragraph 10 of the Charges, the Department alleges that the above facts constitute grounds for disciplinary action pursuant to Conn. Gen. Stat. §§ 19a-17 and 20-99, including, but not necessarily limited to:

- a. §19a-17(a),
- b. §19a-17(c), and
- c. §20-99(b)(4).

11. In paragraph 11 of the Charges, the Department alleges that for the foregoing reasons, the Department believes that Respondent's continued practice as a licensed practical nurse represents a clear and immediate danger to the public health and safety.

Findings of Fact

1. The Department provided Respondent with reasonable and adequate written notice of the January 19, 2022 hearing and the allegations contained in the Charges. Bd. Ex. 1, 4-7.
2. On January 19, 2022, the Board convened the scheduled hearing. Respondent did not appear at the hearing. Bd. Ex. 2, 7; Tr., pp. 3-13.
3. Respondent did not file an Answer to the Charges. Tr., pp. 5.
4. The factual allegations contained in paragraphs 1 through 6, 8 and 9 of the Charges are deemed admitted and true. Bd. Ex. 1; Tr., pp. 5, 6; § 19a-9-20 of the Regulations of Connecticut State Agencies (“the Regulations”).

Discussion and Conclusions of Law

The Department bears the burden of proof by a preponderance of the evidence in this matter. *Jones v. Connecticut Medical Examining Board*, 309 Conn. 727, 739-740 (2013).

The Department sustained its burden of proof with regard to all allegations contained in the Charges.

Conn. Gen. Stat. §20-99 provides, in pertinent part,:

- (a) The Board . . . shall have jurisdiction to hear all charges of conduct which fails to conform to the accepted standards of the nursing profession brought against persons licensed to practice nursing. After holding a hearing . . . said board, if it finds such person to be guilty, may revoke or suspend his or her license or take any of the actions set forth in section 19a-17. . . .
- (b) Conduct which fails to conform to the accepted standards of the nursing profession includes, but is not limited to, the following: . . . (4) emotional disorder or mental illness; (5) abuse or excessive use of drugs, including alcohol, narcotics or chemicals . . .

In accordance with § 19a-9-20 of the Regulations, a hearing shall proceed, “at the time and place specified in the notice of hearing, notwithstanding any failure of Respondent to file an answer within the time provided. If no answer has been timely filed, the allegations shall be

deemed admitted.” In this case, Respondent failed to file an Answer to the Charges and did not appear for the hearing to contest the allegations. Bd. Ex. 1; Tr., pp. 3-13. Therefore, the allegations are deemed admitted, and the record establishes that the Department sustained its burden of proof with respect to all of the allegations in the Charges. Bd. Ex. 1; Tr., pp. 5, 6. Department (“Dept.”) Ex.” 1-4; Dept. Ex. 5-8 (sealed).

Specifically, a preponderance of the evidence establishes that with respect to Count One of the Charges, Respondent resides in Stratford, Connecticut and holds Connecticut LPN license number 033506. Bd. Ex. 5. The evidence demonstrates that on April 21, 2021, the Board issued the Original MOD, finding that Respondent’s emotional disorders and/or cannabis abuse and/or opioid dependence does, and/or may affect his practice as a nurse. Respondent’s LPN license was placed on probation for four years. Dept. Ex. 1.

The Department further sustained its burden of proof by a preponderance of the evidence, and as deemed admitted, demonstrated that on September 15, 2021, the Board issued an Amended MOD that placed Respondent’s LPN license on probation and initially restricted his use of his LPN license for the purpose of taking a refresher program. The evidence demonstrated that the Amended MOD placed Respondent’s LPN license on probation for four years, requiring all of the following: the Department’s pre-approval of Respondent’s employment, , the monthly submission of employer reports for years one, two and four of the probationary period, and quarterly for year three of the probationary period, Respondent’s participation in therapy and counseling for chemical dependency, the monthly submission of therapist reports for years one and four of the probationary period and quarterly for years two and three of the probationary period,; evidence of Respondent’s sponsorship and participation in AA/NA meetings at least ten times a month, with written documentation of attendance, Respondent’s submission of observed random urine screens, weekly for the first, second and fourth years of probation and monthly during the third year of probation, with all such screens requiring a negative result for the presence of alcohol and drugs, except prescribed drugs, notice and reporting of controlled substances prescribed for Respondent for a period of time greater than two weeks, and evidence of Respondent’s successful completion of a Board approved LPN refresher course with a clinical component and passing of the practical nursing licensing examination offered by the National Council of State Boards of Nursing Licensing Examination (hereinafter "NCLEX") within 12 months. In addition to these requirements, , Respondent’s

license, after passing the NCLEX, was to remain on probation for the remainder of the four-year probationary period under the other imposed conditions and any finding that Respondent violated the Amended Order was to subject Respondent to sanctions pursuant to Conn. Gen. Stat. §§ 19a-17(a) and (c), including, but not limited to, the revocation of his license. Dept. Ex. 3.

The Department sustained its burden of proof by a preponderance of the evidence, and as deemed admitted, demonstrated that from on or about September 15, 2021 to the present, the Department had not received any of the information or documentation that was required to be submitted under the Amended MOD. Further, the Department demonstrated by a preponderance of the evidence that the Department had not received any information or documentation evidencing Respondent's compliance with any of the terms or conditions imposed under the Amended MOD. Dept. Ex. 4; Dept. Ex. 5-9 (sealed). As such, Respondent violated the terms of his probation. Respondent's noncompliance with the Amended MOD constitutes a violation of Conn. Gen. Stat. § 20-99(b)(4) and (5) and, pursuant to Conn. Gen. Stat. §§ 19a-17(a) and (c), subjects Respondent to disciplinary action.

With respect to Count Two of the Charges, the Department sustained its burden of proof by a preponderance of the evidence. And, and as deemed admitted, the Department demonstrated that on or about April 21, 2021 to the present, Respondent has or had an emotional disorder and/or mental illness and Respondent's continued practice as a licensed practical nurse presents a clear and immediate danger to public health and safety in violation of Conn. Gen. Stat. §20-99(b)(4). Dept. Ex. 1, 3; Dept. Ex. 7, 8 (sealed)

The Board concludes that Respondent's conduct, as alleged in the Charges, and as established by a preponderance of the evidence and as deemed admitted, constitutes grounds for disciplinary action pursuant to Conn. Gen Stat. §§ 20-99(a), 20-99(b)(4), 20-99(b)(5) and 19a-17. The Board further concludes based upon a preponderance of the evidence that Respondent cannot practice as a licensed practical nurse with reasonable skill and safety.

Order

Based on the record in this case, the above findings of fact and conclusions of law, the Board hereby orders, with respect to license number 033506, Nicholas Lewonczyk, LPN, as follows:

1. Respondent's license number 033506 to practice as a licensed practical nurse in the State of Connecticut is hereby **REVOKED**.
2. This Memorandum of Decision becomes effective upon signature.

The Board of Examiners for Nursing hereby informs Respondent, Nicholas Lewonczyk and the Department of this decision.

Dated at Waterbury, Connecticut this _____ day of _____, 2022.

BOARD OF EXAMINERS FOR NURSING

By _____
Patricia C. Bouffard, D.N.Sc., Chair

**STATE OF CONNECTICUT
BOARD OF EXAMINERS FOR NURSING**

Michael Presnick, RN
License No. 106486

Petition No. 2017-1071

MEMORANDUM OF DECISION

Procedural Background

On July 29, 2021, the Department of Public Health ("Department") filed a Statement of Charges ("Charges") with the Board of Examiners for Nursing ("Board"). Board ("Bd.") Exhibit ("Ex.") 1. The Charges allege violations of Chapter 378 of the Connecticut General Statutes ("Conn. Gen. Stat.") by Michael Presnick ("Respondent") which would subject Respondent's registered nurse ("RN") license number 106486 to disciplinary action pursuant to Conn. Gen. Stat. §§ 19a-17 and 20-99(b).

On September 16, 2021, Respondent was sent the Charges and the Notice of Hearing ("Notice"). The Notice informed that a hearing had been scheduled for December 15, 2021. Bd. Ex. 2.

The hearing was held on December 15, 2021 and January 19, 2022. Attorney Diane Wilan represented the Department. Attorney William Paetzold represented Respondent. Both parties were given the opportunity to present evidence and cross-examine witnesses.

During the December 15, 2021 hearing, Respondent answered the Charges orally on the record. Transcript ("Tr.") page ("p.") 12/15/2021, 6-7.

Each member of the Board involved in this decision attests that she/he was present at the hearing, or has reviewed the record, and that this decision is based entirely on the record, the law, and the Board's specialized professional knowledge in evaluating the evidence. *Pet v. Department of Health Services*, 228 Conn. 651 (1994).

Allegations

1. In paragraph 1 of the Charges, the Department alleges that Respondent of Cromwell, Connecticut was at all times referenced in this Statement of Charges, the holder of Connecticut registered nurse license number 106486. Said license number 106486 expired on June 30, 2018, and subsequently lapsed.

2. In paragraph 2 of the Charges, the Department alleges that at all relevant times, Respondent was employed as a Forensic Nurse at Whiting Forensic Hospital, located on the campus of Connecticut Valley Hospital in Middletown, Connecticut.
3. In paragraph 3 of the Charges, the Department alleges that at various times between approximately February 27, 2017 and March 22, 2017, Respondent failed to meet the standard of care in one or more of the following ways:
 - a. He physically abused and/or neglected Patient #1; and/or
 - b. He failed to intervene and/or report to his nursing supervisor when he observed staff members physically abusing and/or neglecting Patient #1 and/or failing to follow the plan of care for Patient #1; and/or
 - c. He failed to follow the plan of care for Patient #1 which required that he and another male staff member maintain constant observation of Patient #1.
4. In paragraph 4 of the Charges, the Department alleges that the above facts constitute grounds for disciplinary action pursuant to Conn. Gen. Stat. § 20-99(b), including, but not limited to, § 20-99(b)(2).

Findings of Fact

1. Respondent, of Cromwell, Connecticut is, and was at all times, as referenced in the Charges, the holder of Connecticut R.N. license number 106486. Respondent's R.N. license expired on June 30, 2018 and subsequently lapsed. Bd. Ex. 1; Tr. 12/15/2021, p. 6.
2. At all relevant times, Respondent was employed as a Forensic Nurse at Whiting Forensic Hospital, located on the campus of Connecticut Valley Hospital in Middletown, Connecticut. Bd. Ex. 1; Department ("Dept.") Ex. 1C, p. 162 (sealed); Tr. 12/15/2021, p. 6.
3. At various times between approximately February 27, 2017 and March 22, 2017, Respondent failed to meet the standard of care when he physically abused and/or neglected Patient #1. Tr. 1/19/22 Executive Session ("Exec. Sess."), pp. 7-8, 24-25, 30-34, 42; Tr. 12/15/21 Exec. Sess., pp. 8-9, 16; Dept. Ex. 1A, pp. 97, 107, 121 (sealed).
4. Respondent physically forced a diaper onto Patient #1 over his clothes while Patient #1 resisted and other staff members restrained Patient #1 by holding down his arms. Tr. 12/15/2021 Exec. Sess., pp. 8-9; Tr. 1/19/2022 Exec. Sess., p. 42.
5. Respondent forcibly attempted to put a substance on Patient #1, despite Patient #1 not wanting the treatment. Tr. 12/15/2021 Exec. Sess., p. 16; Tr. 1/19/2022 Exec. Sess., pp. 7-8.

6. Respondent left Patient #1 exposed for an extended period of time after Respondent and other staff forcibly removed Patient #1's bed sheets. At the time of the incident, Patient #1 did not have any clothing on from the waist down and Patient #1 was grabbing for the sheets. Tr. 1/19/2022 Exec. Sess., pp. 24-25, 30-32.
7. Respondent restrained Patient #1's arm while he sprayed Patient #1 in the face with an aerosol can. The incident was captured on video camera. In the video, Respondent subsequently left the room without assessing Patient #1 to determine if he had suffered any adverse effects from being sprayed in the face with the aerosol can.. Tr. 1/19/2022 Exec. Sess., pp. 33-34.
8. At various times between approximately February 27, 2017 and March 22, 2017, Respondent failed to meet the standard of care when he failed to intervene and/or report to his nursing supervisor when he observed staff members physically abusing and/or neglecting Patient #1 and/or failing to follow the plan of care for Patient #1. Tr. 12/15/2021, p. 7; Tr. 1/19/2022 Exec. Sess., pp. 12-13, 18-19, 35-36, 43-44; Dept. Ex. 2, p. 199 (sealed).
9. At various times between approximately February 27, 2017 and March 22, 2017, Respondent failed to meet the standard of care when he failed to follow the plan of care for Patient #1 which required that Respondent and another male staff member maintain constant observation of Patient #1. Tr. 12/15/2021, p. 7; Tr. 1/19/2022 Exec. Sess., pp. 12, 18, 26, 31, 34-35; Tr. 12/15/2021 Exec. Sess., pp. 6, 8.
10. On December 13, 2016, Respondent signed a form regarding the Department of Mental Health & Addiction Services' ("DMHAS") work rules. Respondent's signature acknowledged the standards of conduct expected of DMHAS employees. The form Respondent signed specifically indicated the requirement to immediately report any violation(s) of existing work rules, policies, procedures, or regulations to a supervisor. Dept. Ex. 1C., p. 165 (sealed).
11. The Respondent had access to, and was aware of, the Connecticut Valley Hospital Operating Procedure Manual referencing DMHAS' policies and procedures, including the policies and procedures regarding reporting violations, special observation, implementation of restraints, and the code of ethics. Dept. Ex. 1A, pp. 124-154 (sealed).
12. On September 12, 2017, Donna Ortelle, RN, MSN, an investigator in the Healthcare Quality and Safety Branch Facility Licensing and Investigations Section sent a Memorandum to Kathleen Boulware, Manager, Practitioners Licensing and Investigations Unit regarding an investigation of Respondent conducted by her unit. In her Memorandum, Ms. Ortelle wrote, "Based upon our investigation, the above referenced individual [Respondent] is being referred to you for action as deemed appropriate." Dept. Ex. 1A, p. 11 (sealed).

13. A DMHAS investigation report, dated November 16, 2017, concluded that Respondent's actions towards Patient #1 evidenced a pattern of physical abuse and neglect. Dept. Ex. 1D, p. 198 (sealed).
14. On November 29, 2017, Respondent was dismissed from State employment subsequent to an investigation which substantiated Respondent's violation of DMHAS rules. Respondent's violations included physical abuse, failure to report violations, and conduct that endangered the safety and welfare of persons or property. Dept. Ex. 1C, p. 173 (sealed).

Discussion and Conclusions of Law

The Department bears the burden of proof by a preponderance of the evidence in this matter. *Jones v. Connecticut Medical Examining Board*, 309 Conn. 727 (2013). The Department sustained its burden of proof with regard to all of the allegations contained in the Charges.

Conn. Gen. Stat. §20-99 provides, in pertinent part,:

- (a) The Board . . . shall have jurisdiction to hear all charges of conduct which fails to conform to the accepted standards of the nursing profession brought against persons licensed to practice nursing. After holding a hearing . . . said board, if it finds such person to be guilty, may revoke or suspend his or her license or take any of the actions set forth in section 19a-17. . . .
- (b) Conduct which fails to conform to the accepted standards of the nursing profession includes, but is not limited to, the following: . . . (2) illegal conduct, incompetence or negligence in carrying out usual nursing functions; . . .

Pursuant to Conn. Gen. Stat. §§ 20-99(b), the Board is authorized to discipline the license of a nurse who fails to conform to the accepted standards of practice of the nursing profession. Failure to conform to the accepted standards of practice of the nursing profession includes, but is not limited to, illegal conduct, incompetence, or negligence in carrying out usual nursing functions.

In this matter, Respondent admitted to all charges except for paragraph 3a. However, based on the evidence in the record, the Board found that the Department proved by a preponderance of the evidence that Respondent failed to meet the standard of care when he physically abused and/or neglected Patient #1. Finding of Fact ("FF") 3, 10, 11. Therefore, the Department met its burden of proof with respect to the allegations contained in the Charges.

With regard to paragraph 1 of the Charges, Respondent admits that he is, and has been, at all times referenced in the Charges, the holder of Connecticut RN license number 106486 and that said license expired on June 30, 2018 and subsequently lapsed. Tr. 12/15/2021, p. 6. As such, the Department sustained its burden of proof.

With regard to paragraph 2 of the Charges, Respondent admits that at all relevant times he was employed as a Forensic Nurse at Whiting Forensic Hospital located on the campus of Connecticut Valley Hospital in Middletown, Connecticut. As such, the Department sustained its burden of proof. Tr. 12/15/2021, p. 6; Dept. Ex. 1C, p. 162 (sealed).

With regard to paragraph 3a of the Charges, Respondent denies that at various times between approximately February 27, 2017 and March 22, 2017, he failed to meet the standard of care when he physically abused and/or neglected Patient #1. Tr. 12/15/2021, pp. 6-7. A preponderance of the evidence establishes otherwise. Specifically, Rose Marie Deschenes, Nurse Consultant, credibly testified that Respondent was identified on video engaging in the alleged conduct and that following an investigation, a determination was made that Respondent failed to meet the standard of care by physically abusing and/or neglecting Patient #1.

The video referred to by Ms. Deschenes was presented to the Board. The video showed various incidents involving the Respondent and Patient #1 that corroborated Ms. Deschene's testimony. In one incident, the video showed Respondent physically forcing a diaper onto Patient #1 over his clothes, despite Patient #1's resistance, while other staff members restrained Patient #1 by holding down his arms. Tr. 12/15/2021 Exec. Sess., pp. 8-9; Tr. 1/19/2022 Exec. Sess., p. 42. In another incident, the video showed Respondent forcibly attempting to put a substance on Patient #1, despite Patient #1's obvious aversion and resistance to the treatment. Tr. 12/15/2021 Exec. Sess., p. 16; Tr. 1/19/2022 Exec. Sess., pp. 7-8. Another incident on the video showed that Patient #1 was left exposed for an extended period of time after staff, including Respondent, forcibly removed Patient #1's bed sheets, despite the fact that Patient #1 did not have any clothing on from the waist down. During the time when Respondent and other staff forcibly were removing the bed sheets, Patient #1 was grabbing for the sheets as they were being taken away. Tr. 1/19/2022 Exec. Sess., pp. 24-25, 30-32. Lastly, the video showed an incident in which Respondent restrained the arm of Patient #1 while he simultaneously sprayed Patient #1 in the face with an aerosol can. On the video, Respondent subsequently left the room without assessing whether Patient #1 suffered any adverse effects from being sprayed in the face

with the aerosol can. Tr. 1/19/2022 Exec. Sess., pp. 33-34. In addition to Ms. Deschene's testimony and the video, the Department introduced a report of DMHAS' investigation which concluded that Respondent's actions towards Patient #1 evidenced a pattern of physical abuse and neglect. Dept. Ex. 1D, p. 198 (sealed). Respondent was ultimately terminated by DMHAS due to the outcome of the investigation. Dept. Ex. 1C, p. 173 (sealed).

Respondent contends that in the video with the diaper, Patient #1 requested to go to the cafeteria. Respondent stated that he encouraged Patient #1 to shower or change due to some potential leakage from his bowels. According to Respondent, Patient #1 was noncompliant with his requests so Respondent attempted to place the diaper over Patient #1's pants "as a barrier" while staff restrained Patient #1, despite Patient #1 resisting the placement of the diaper. Respondent admitted that the plan was not appropriate and that he, "should have put a stop to it." Tr. 1/19/2022 Exec. Sess., pp. 99-101. Respondent further testified that he did not intend to spray Patient #1 in the face with the aerosol can as shown in the video. He stated that he was trying to spray the dry areas on Patient #1's head, but admitted that in the video the spray appears to go in Patient's #1's face. Respondent admitted that his actions were not appropriate care. Tr. 1/19/2022 Exec. Sess., pp. 105-07. Lastly, the Respondent testified that he "ripped" the sheets off of Patient #1 to allegedly discourage him from masturbating. Respondent admitted that his actions were "not the right way to handle that or discourage that behavior." Tr. 1/19/2022 Exec. Sess., pp. 107-109. With respect to the allegation in paragraph 3a of the Charges, the Department sustained its burden of proof that Respondent physically abused and/or neglected Patient #1 in violation of Conn. Gen. Stat. § 20-99(b)(2).

With regard to paragraph 3b of the Charges, Respondent admits that at various times between approximately February 27, 2017 and March 22, 2017, Respondent failed to meet the standard of care by failing to intervene and/or report to his nursing supervisor when he observed staff members physically abusing and/or neglecting Patient #1 and/or failing to follow the plan of care for Patient #1. Tr. 12/15/2021, p. 7. In addition, the evidence substantiates this Charge. A document in Patient #1's records identifies Patient #1's preferences. In this document, it was noted that Patient #1 has an aversion to touching, particularly when he is already upset. Dept. Ex. 1A, p. 74 (sealed). On the videos introduced by the Department through Ms. Deschenes, Respondent is in the presence of staff, who on numerous occasions continuously touch and aggravate Patient #1, while Respondent fails to intervene or report their conduct. Tr. 1/19/2022

Exec. Sess., pp. 12-13, 18-19, 35-36, 43-44. Further, Respondent was aware of, and had access to, DMHAS policies mandating that such violations be reported to a supervisor. Dept. Ex. 1C., p. 165 (sealed); Dept. Ex. 1A, pp. 124-154 (sealed). Based on this evidence, the Department sustained its burden of proof that Respondent failed to intervene and/or report to his nursing supervisor when he observed staff members physically abusing and/or neglecting Patient #1 and/or failing to follow the plan of care for Patient #1 in violation of Conn. Gen. Stat. § 20-99(b)(2).

With regard to paragraph 3c of the Charges, Respondent admits that at various times between approximately February 27, 2017 and March 22, 2017, he failed to meet the standard of care by failing to follow the plan of care for Patient #1 which required that he and another male staff member maintain constant observation of Patient #1. Tr. 12/15/2021, p. 7. The video evidence, combined with Ms. Deschene's testimony, substantiates this Charge. The video shows numerous incidents in which there is only one staff member in Patient #1's room incidents in which staff members in Patient #1's room are inattentive or on their cell phones, as well as incidents in which Patient #1 is alone in his room. Tr. 12/15/2021 Exec. Sess., pp. 6, 8; Tr. 1/19/2022 Exec. Sess., pp. 12, 18, 26, 31, 34-35. As such, the Department sustained its burden of proof that Respondent failed to follow the plan of care for Patient #1 when he failed to maintain, along with another male staff member, constant observation of Patient #1 in violation of Conn. Gen. Stat. § 20-99(b)(2).

With regard to paragraphs 3b and 3c, Respondent testified in his defense that he failed to intervene or report other staff members' conduct because he was purportedly fearful for retaliation and because he felt that he lacked protection and that reporting such behavior would create a safety issue for him. Tr. 1/19/2022, pp. 23-25; Tr. 1/19/2022 Exec. Sess. pp. 103-04, 122. Respondent acknowledged that he was aware of violations of policies and rules, however, he claimed that you had to "pick your battles." Tr. 1/19/2022, p. 25; Tr. 1/19/2022 Exec. Sess., pp. 103, 131-32. On the other hand, Respondent admitted that he "knew what he was getting into." Tr. 1/19/2022, p. 22. Respondent described the staff at Whiting as an "elite group" that he "wanted to be a part of" (Tr. 1/19/2022, p. 12) and that his "thought process at the time" was "I wasn't going to be telling on my friends." Tr. 1/19/2022 Exec. Sess., p. 124.

Based on the foregoing, the Board finds that the Department established by a preponderance of the evidence that Respondent, while working as a RN at Whiting Forensic

Hospital on the campus of Connecticut Valley Hospital in Middletown, Connecticut, provided nursing care for Patient #1 that failed to comply with the standards of care, as alleged in the Charges and in violation of Conn. Gen. Stat. § 20-99(b)(2). The Board finds that nurses are entrusted with great responsibility and are expected to adhere to a reasonable standard of care. The Board finds that Respondent deviated from this standard of care and, at times, demonstrated egregious and unconscionable conduct towards a patient entrusted to his care. Although Respondent repeatedly explained that he failed to act because he purportedly feared retaliation from staff, and further claimed that you must “pick your battles,” the Board finds that Respondent certainly did not hesitate to pick a battle with the very person that he was obligated to protect. Respondent repeatedly demonstrated that he chose to perpetuate the abusive and negligent culture, instead of advocating for his patient or, at a minimum, adhering to the care plan established to keep Patient #1 from harm. Connecticut residents, particularly our most vulnerable citizens whose incapacities inhibit their ability to care and advocate for themselves, depend on our nurses to care for them. Respondent testified that he became a nurse to “help people” and “provide some humanity.” Tr. 1/19/2022 Exec. Sess., p. 128. Unfortunately, the evidence and testimony presented to the Board revealed that Respondent’s actions toward Patient #1 fell well below the mandated standard of care in the nursing profession and far short of Respondent’s stated purpose in becoming a nurse.

The Board concludes that Respondent’s conduct, as alleged in the Charges, and proven by a preponderance of the evidence, constitutes grounds for disciplinary action pursuant to Conn. Gen. Stat. §§ 20-99(a), 20-99(b)(2), and 19a-17¹. The Board further concludes that Respondent’s continued nursing practice presents a clear and immediate danger to public health and safety.

Order

Based on the record in this case, the above findings of fact, and conclusions of law, the Board hereby orders, with respect to license number 106486 held by Michael Presnick, RN, as follows:

1. Respondent’s license number 106486 to practice as a registered nurse in the State of Connecticut is hereby **REVOKED**.

¹ Pursuant to Conn. Gen. Stat. § 19a-17, the Board may impose disciplinary action, upon the finding of a good cause as set forth in the statute..

2. This Memorandum of Decision becomes effective upon signature.

The Board hereby informs Respondent, Michael Presnick, and the Department of this decision.

Dated at Waterbury, Connecticut this _____ day of _____ 2022.

BOARD OF EXAMINERS FOR NURSING

By _____
Patricia C. Bouffard, D.N.Sc., Chair

**STATE OF CONNECTICUT
BOARD OF EXAMINERS FOR NURSING**

In the Matter of Stone Academy West Haven Campus Day Program

**PROPOSED MEMORANDUM OF DECISION
AND RECOMMENDATION TO THE
COMMISSIONER OF THE DEPARTMENT OF PUBLIC HEALTH**

Procedural Background

On August 19, 2021, the State of Connecticut Board of Examiners for Nursing (“Board”) sent a Notice of Program Removal Hearing (“Notice”) to the Stone Academy, West Haven Campus, Licensed Practical Nurses Day Program (“Program”) as a result of its failure to correct the deficiency which caused the Program to be placed on conditional approval on June 19, 2019 and again on June 17, 2020. Specifically, the Program failed to attain an 80% pass rate of its students’ first attempt on the National Council Licensure Examination (“NCLEX”) after graduation during such periods of conditional approvals. The Notice informed the Program that its proposed removal is in accordance with Connecticut General Statute (“Conn. Gen. Stat.”) § 20-90 and Connecticut Agencies Regulations (“Conn. Agencies Regs.” or “Regulations”) § 20-90-47(g). The Notice also informed that a formal hearing had been scheduled for November 17, 2021 to remove the Program from the list of all Board-approved nursing programs and programs for training licensed practical nurses (“LPNs”) with the consent of the Commissioner of the Department of Public Health (“Department”). Board (“Bd.”) Exhibit (“Ex.”) 1.

On November 17, 2021, Attorney Aaron Bayer, counsel for the Program, filed a pre-hearing memorandum of law on behalf of the Program. Bd. Ex. 2.

The Board convened on November 17, 2021 and December 15, 2021 to hear the case. Attorney Aaron Bayer represented the Program on both hearing days. Helen Smith, Department Nurse Consultant, testified as the Board’s witness. Linda Dahlin, Executive Vice President, Stone Academy, testified on behalf of the Program.

The Program was provided the opportunity to present evidence, cross-exam witnesses, and provide argument on all issues.

When the November 17, 2021, hearing adjourned, the record was left open until December 1, 2021, to permit the Program to file supplemental information with the Board. Transcript (“Tr.”) 11/17/2021, pp. 68-70.

On December 1, 2021, the Board extended the deadline to file supplemental information to December 10, 2021 and scheduled the second day of hearing for December 15, 2021. Bd. Ex. 3.

On December 9, 2021, the Program filed its response to the Board’s request for supplemental information. Respondent (“Resp.”) Ex. O.

Following the close of the record on December 15, 2021, the Board convened for fact-finding.

This Proposed Memorandum of Decision is based entirely on the record and sets forth the Board’s proposed findings of fact, conclusions of law, and recommendation.

Findings of Fact

1. Stone Academy offers students a comprehensive 18-month Practical Nurse (“PN”) program at three different locations: East Hartford, West Haven, and Waterbury. Each location offers day and evening classes. Resp. Ex. N, p. 12.
2. In February 2018, the Board approved a comprehensive set of changes to Stone Academy’s Practical Nursing program. The changes included lengthening the program by over 100 hours, from 750 hours to 860 hours, and restructuring the curriculum and educational approach to preparing students to become LPNs. Bd. Ex. 2, p. 3; Tr. 11/17/2021, p. 34.
3. In October 2018, the Program began to implement its new Board-approved curriculum. Department (“Dept.”) Ex. 6.
4. In January 2019, the first cohort of the Program’s students began their studies in the newly-approved, 860-hour expanded curriculum. Bd. Ex. 2.
5. Pursuant to Conn. Agencies Regs. § 20-90-47(b)(2)(A), an acceptable level of a program’s graduates’ performance shall be defined as demonstrated mastery of nursing principles as evidenced by an average passing rate of at least 80% of students taking the licensing examination upon their first attempt after graduation.
6. On May 15, 2019, the Board determined that the West Haven campus’ evening program was in compliance with Conn. Agencies Regs. § 20-90-47(b)(2)(A). Dept. Ex. 3.

7. On May 15, 2019, the West Haven campus' evening program was removed from conditional status due to its successful NCLEX results that demonstrated that the program was in compliance with the requirement of Conn. Agencies Regs. § 20-90-47-(b)(2)(A). *Id.*
8. On May 15, 2019, the Board reviewed the NCLEX scores of the Program's graduates for the period of May 1, 2018 to April 30, 2019. Fifty-two of 73 graduates passed the NCLEX upon their first attempt after graduation, yielding a pass rate of 71.2%.. *Id.*
9. On May 15, 2019, the Board determined that the Program's NCLEX pass rate results for the period of May 1, 2018 to April 30, 2019 were not in compliance with Conn. Agencies Regs. § 20-90-47(b)(2)(A) due to the Program's failure to have at least 80% of its graduates pass the licensing examination upon their first attempt after graduation. *Id.*
10. On June 19, 2019, the Program attended a meeting with the Board to present information demonstrating its compliance with the Regulations and a written plan of correction. Dept. Ex. 10
11. On June 19, 2019, the Board determined that the Program had failed to demonstrate its compliance with the Regulations and placed the Program on conditional status due to its NCLEX test results. Dept. Ex. 10
12. On June 20, 2019, the Board approved the Program's plan of correction and extended its conditional status until the Board's June 2020 meeting. Dept. Ex. 11.
13. In 2019, the NCLEX pass rate for all of Stone Academy's programs was above 80%, except for the Program's pass rate which was 71.2%. Respondent ("Resp.") Ex. N, p. 12.
14. On May 4, 2020, the Department received Stone Academy's NCLEX test results for the period of May 1, 2019 to April 30, 2020. Dept. Ex. 14.
15. On May 15, 2020, the Program's NCLEX pass rate was 49%, resulting from 58 out of 119 students passing the licensing exam on their first attempt after graduation. The East Hartford campus' day program's pass rate was 72%, resulting from 63 out of 88 students passing the licensing exam on their first attempt after graduation. Dept. Ex. 14
16. In 2020, the NCLEX pass rate for all of Stone Academy's programs was above 80%, except for the pass rates of the East Hartford campus' day program and the Program. Resp. Ex. N, p. 12.
17. On May 20, 2020, the Board determined that the East Hartford campus' day program and the Program were not in compliance with Conn. Agencies Regs. § 20-90-47(b)(2)(A) which requires that at least 80% of a program's students pass the NCLEX on their first attempt after graduation. Dept. Ex. 14.

18. On June 17, 2020, the Board reviewed and approved Stone Academy's correction plan for the West Haven campus' evening program, the Program, and the East Hartford campus' day and evening programs. The East Hartford campus' day program remained on conditional approval until the Board's meeting in June 2021. The Board extended the Program's conditional approval status until the Board meeting in June 2021. Dept. Ex. 17.
19. On June 18, 2020, the Board also requested that the Program file an addendum to include information concerning each student's timeframe between his/her graduation date and his/her NCLEX test-taking date, as well as information concerning the Program's five simulation lessons. The Program had until July 20, 2020 to respond to the Board's requests. *Id.*
20. On July 20, 2020, the Program provided the Board with its addendum that included each student's timeframe between his/her graduation date and his/her NCLEX test-taking date, as well as information regarding the Program's five simulation lessons. Dept. Ex. 18.
21. On July 20, 2020, the Program's addendum indicated that 58 out of the 108 graduates did not pass the exam on the first attempt. Dept. Ex. 18.
22. On May 19, 2021, the Board reviewed Stone Academy's NCLEX results and report for the period of May 1, 2020 to April 30, 2021. Dept. Ex. 19, 23.
23. On May 20, 2021, the Board informed Stone Academy that its East Hartford campus' day and evening programs, the Program, and the West Haven campus' evening programs were not in compliance with Conn. Agencies Regs. § 20-90-47 (b)(2)(A) which requires that at least 80% of students pass the NCLEX upon their first attempt after graduation. Dept. Ex. 21.
24. On July 1, 2021, Stone Academy reported a pass rate of 50.48% for the Program's first-time test takers after graduation. Stone Academy further reported a pass rate of 72.73% for the West Haven evening division's first-time test takers following graduation. Dept. Ex. 23.
25. On July 1, 2021, Stone Academy reported that the pass rate for the Program's repeat test takers was 22.34% and the pass rate for the West Haven campus' evening division students was 33.33 percent. Dept. Ex. 23.
26. On July 21, 2021, Stone Academy submitted a plan of correction to address a NCLEX pass rate of less than 80% for the East Hartford campus' day and evening programs, the Program, and the West Haven campus' evening program. On the same date, the Board reviewed and unanimously approved Stone Academy's plan of correction for the East Hartford campus' day and evening programs, the Program, and the West Haven campus' evening program. Dept. Ex. 23; Resp. Ex. K; Bd. Ex. 2, pp. 1, 10.

27. Stone Academy's plan of correction was specifically designed to improve its graduates' NCLEX preparedness and to address the factors that may have contributed to its graduates' failure to pass the NCLEX on their first attempt after graduation during the reporting year(s) that the Program, the West Haven campus's evening program, and the East Hartford campus' day and evening programs were on conditional approval. Bd. Ex. 2, p. 10.
28. On July 22, 2021, the Board informed Stone Academy in writing that the West Haven campus' evening program and the East Hartford campus' day and evening groups shall remain on conditional approval until the Board's meeting in June 2022. Dept. Ex. 23.
29. On July 22, 2021, the Board informed the Program in writing that it was recommending its removal from the list of approved nursing programs and programs for training LPNs with the consent of the Commissioner of the Department. Bd. Ex. 2, p. 1; Dept. Ex. 23.
30. On August 19, 2021, the Department notified the Program of its Program Removal Hearing scheduled for November 17, 2021. The Board's action in seeking the Program's removal resulted from the Program's failure to correct the deficiency which caused the Program to be placed on conditional approval on June 19, 2019 and again on June 17, 2020. Specifically, the Program failed to attain an 80% NCLEX pass rate of its students' first NCLEX attempt after graduation during such periods of conditional approval. Bd. Ex. 1.
31. On November 17, 2021, the Board convened the hearing as scheduled. During the hearing, the Board learned that four of Stone Academy's six day and evening programs, including the Program, failed to attain at least an average NCLEX pass rate of 80% on their first attempt after graduation. Resp. Ex. N, p. 12.
32. The students who took the NCLEX exam during the May 2020 through April 2021 reporting year attended classes remotely as a result of the COVID-19 pandemic. The Connecticut's COVID-19 protocols adversely impacted the students' ability to balance their educational demands with their work and family obligations causing delays in their ability to take the NCLEX. Resp. Ex. N, p. 6.
33. During the 2021 NCLEX reporting year, the Program's graduates of the revised and Board-approved 2018 curriculum were the first group of graduates eligible to sit for the exam. Bd. Ex. 2, pp. 2-3; Resp. Ex. N, pp. 2, 5.
34. As a result of the COVID-19 pandemic, during the 2021 NCLEX reporting year, the Program's graduates experienced a delay in scheduling the NCLEX exam. In some cases, the delay extended to six months after graduation. Such scheduling delays adversely impacted the students' retention of the Program's revised and expanded coursework and clinical training in preparation for the exam. Resp. Ex. N, p. 7.
35. For the 2021 NCLEX reporting year, only 39 of the Program's 105 students who took the exam were graduates of the Program's revised and expanded curriculum that was

- approved in 2018. Of the 39 students who were graduates of the Program's revised and expanded curriculum, only 35 had commenced their studies in the new curriculum. Bd. Ex. 2, p. 3.
36. In 2019, 2020, and 2021, the Program's attrition rates, respectively were 11.2%, 16.3%, and 37.5 percent. Resp. Ex. O; Tr. 12/15/2021, p. 10.
 37. The Program has had frequent faculty turnover. With the exception of one site administrator who left the Program after approximately three years, the Program has had five different site administrators in five years. Resp. Ex. O; Tr. 12/15/2021, pp. 11- 13.
 38. On November 17, 2021, the Board voted to leave the record open for a second day of hearing which the Board scheduled for December 15, 2021. The Board took such action in order to review and examine data the Board requested from the Program. Specifically, the Board requested data regarding the 39 students who participated in the Program's enhanced curriculum and clinical component. The Board requested that said data be submitted to the Board by December 1, 2021. Tr. 11/17/2021, pp. 68-70.
 39. On December 1, 2021, the Board extended the deadline for submission of the requested data to December 10, 2021. The Board extended the deadline in order to permit the Program to file supplemental information with the Board, as requested. Bd. Ex. 3.
 40. On December 9, 2021, the Program filed the supplemental data requested by the Board. The Program also filed the NCLEX results for the May 1, 2020 to April 30, 2021 reporting period for the Board's review. The Program reported that of the 39 graduates in the Program's expanded curriculum and clinical component, 35 of those students had begun their studies under the new curriculum, while four had started in the previous clock hour curriculum and had re-enrolled in the new curriculum. Of the 35 students who had commenced their studies under the new curriculum, 25 passed the NCLEX on their first attempt after graduation, representing a pass rate of 71.4 % pass rate. Resp. Ex. O; Tr. 12/15/2021, pp. 8-9, 25.
 41. The Program's NCLEX results for the May 1, 2020 to April 30, 2021 time period reveal that the Program failed to attain an 80% NCLEX pass rate of its students on their first attempt after graduation during such period of conditional approval. Resp. Ex. O; Tr. 12/15/2021, p. 8.
 42. At the Board's request, and to account for the students' personal issues, such as test-taking anxiety, difficulties and/or delays in getting the NCLEX test scheduled, and various other issues, the Program also reported that there was a 94 % NCLEX pass rate for students on their second test taking attempt after graduation. Tr. 12/15/2021, pp. 8, 18, 22-23.
 43. The Program's supplemental data also included the attrition rates for the number of students who completed all program requirements but never graduated for the years 2019-2021. Additionally, the Program reported to the Board certain statistical data

concerning the 39 students who had participated in the Program's enhanced curriculum and clinical component. Resp. Ex. O.

44. On December 15, 2021, the second day of the hearing, the Board expressed concerns about the percentages of the Program's students who did not sit for NCLEX in the period of 2019 to 2021. Specifically, the Board found it concerning that in 2019, 20% of the Program's students did not sit for NCLEX. In 2020, 21% of the Program's students did not sit for NCLEX and in 2021, 24 % of the Program's students did not sit for the NCLEX. Tr. 12/15/2021, p. 7.
45. On December 15, 2021, the Board voted to extend the Program's conditional status for an additional year.

Conclusions of Law and Discussion

Pursuant to Conn. Agencies Regs. § 20-90-47(b)(2), full approval of a nursing education program requires that the program demonstrate a mastery of nursing principles and practice. The mastery of nursing principles is evidenced by an average passing rate of at least 80% of students taking the licensing examination, upon their first attempt after graduation, as reported for the period of May 1 to April 30. Conn. Agencies Regs. § 20-90-47(b)(2)(A). The mastery of nursing practice is evidenced by an evaluation of graduates' achievement of the educational outcomes. Conn. Agencies Regs. § 20-90-47(b)(2)(B).

The requirements for conditional approval and removal of a nursing education program are provided in Conn. Agencies Regs. §§ 20-90-47(c) and 20-90-47(g).

Conn. Agencies Regs. § 20-90-47(c) states, in pertinent part,:

(c) Conditional approval:

- (1) Conditional approval may be granted for one year to a program previously having initial or full approval if:
 - (A) *the graduates of the program fail to achieve the standards prescribed in subsection (B) of this section; . . .*
- (2) Special progress reports or onsite visits, or both, shall be required for programs with conditional approval, at the discretion of the board.
- (3) The outcome of the board's subsequent review of special progress reports or onsite visits or both may be:
 - (A) return of the program to full approval; or

- (B) placement of the program on an additional one year of conditional approval; or
- (C) recommendation of program removal from the list of approved nursing education programs.

(Emphasis added.)

Stone Academy offers students a comprehensive 18-month Practical Nurse (“PN”) program at three different locations: East Hartford, West Haven, and Waterbury. Each location offers day and evening classes. Findings of Fact (“FF”) 1.

In February 2018, the Board approved a comprehensive set of changes to Stone Academy’s Practical Nursing program. The changes included lengthening the program by over 100 hours, from 750 hours to 860 hours, and restructuring the curriculum and educational approach to preparing students to become LPNs. FF 2.

In October 2018, the Program began to implement its new Board-approved curriculum. FF 3.

In January 2019, the first cohort of the Program’s students began their studies in the newly-approved, 860-credit hour expanded curriculum. FF 4.

Pursuant to Conn. Agencies Regs. § 20-90-47(b)(2)(A), an acceptable level of a program’s graduates’ performance shall be defined as demonstrated mastery of nursing principles as evidenced by an average passing rate of at least 80% of students taking the licensing examination upon their first attempt after graduation. FF 5.

On May 15, 2019, the Board determined that the West Haven campus evening program was in compliance with Conn. Agencies Regs. § 20-90-47(b)(2)(A). FF 6. On that same date, the West Haven campus evening program was removed from conditional status due to its successful NCLEX results that demonstrated that the program was in compliance with the requirement of Conn. Agencies Regs. § 20-90-47 (b)(2)(A). FF 7.

On May 15, 2019, the Board reviewed the NCLEX scores of the Program’s graduates for the period of May 1, 2018 to April 30, 2019. Fifty-two of 73 graduates passed the NCLEX upon their first attempt after graduation, yielding a pass rate of 71.2%. FF 8. On May 15, 2019, the Board determined that the Program’s NCLEX pass rate results for the period of May 1, 2018 to April 30, 2019 were not in compliance with Conn. Agencies Regs. § 20-90-47(b)(2)(A) due to

the Program's failure to have at least 80% of its graduates pass the licensing examination upon their first attempt after graduation. FF 9.

On June 19, 2019, the Program attended a meeting with the Board to present information demonstrating its compliance with the Regulations and a written plan of correction. FF 10. On that same date, the Board determined that the Program had failed to demonstrate its compliance with the Regulations and placed the Program on conditional status due to its NCLEX test results. FF 11.

On June 20, 2019, the Board approved the Program's plan of correction and extended its conditional status until the Board's June 2020 meeting. FF 12.

On May 4, 2020, the Department received Stone Academy's NCLEX test results for the period of May 1, 2019 to April 30, 2020. FF 14.

On May 15, 2020, the Program's NCLEX pass rate was 49%, resulting from 58 out of 119 students passing the licensing exam on their first attempt after graduation. The East Hartford campus' day program's pass rate was 72%, resulting from 63 out of 88 students passing the licensing exam on their first attempt after graduation. FF 15.

In 2020, the NCLEX pass rate for all of Stone Academy's programs was above 80%, except for the pass rates of the East Hartford campus' day program and the Program. FF 16.

On May 20, 2020, the Board determined that the East Hartford campus' day program and the Program were not in compliance with Conn. Agencies Regs. § 20-90-47(b)(2)(A) which requires that at least 80% of a program's students pass the NCLEX on their first attempt after graduation. FF 17.

On June 17, 2020, the Board reviewed and approved Stone Academy's correction plan for the West Haven campus' evening program, the Program, and the East Hartford campus' day and evening programs. The East Hartford campus' day program remained on conditional approval until the Board's meeting in June 2021. The Board extended the Program's conditional approval status until the Board meeting in June 2021. FF 18.

The Program's Explanations for its Failure to Meet the Required Passing Rate

The Program cited two major factors that affected the Program's graduates' NCLEX test results. The Program argued that the effects of the changes in the Board-approved expanded curriculum in 2018 were not meaningfully reflected in the NCLEX results for the 2019–2021

time period. The Program also described in great detail how the COVID-19 pandemic impacted the graduates' studies and clinical training. Specifically, the Program's cited reasons for its failure to meet the required 80% passing rate included the following:

- (a.) Negative Impacts of Compliance with the March 2020 Government Shutdown of In-Person Learning, Training and Preparation The Program argued that the rapid, yet unavoidable transition from classroom setting to remote learning distracted the students' focus from the curriculum to mastering new technology and navigating the online environment. Many of the Program's students were forced to balance their educational studies and requirements with working on the pandemic's front lines, supporting their children's online education, and contracting COVID-19 themselves, and/or caring for loved ones who contracted COVID-19. Faculty faced similar technical, personal, professional, and health challenges and had to learn how to effectively present material in a new learning modality. Resp. Ex. N, p. 6.

- (b.) Difficulties/Delays in Scheduling the NCLEX. During the 2021 NCLEX reporting year, the COVID-19 pandemic caused students to encounter long delays in scheduling the NCLEX exam after graduation. The first opportunity for graduates of the new curriculum to sit for the NCLEX would have been, under normal circumstances, in May 2020. However, due to the COVID-19 protocols that were required to be in place for test-taking, students faced long delays in scheduling the NCLEX, in some cases the delay extended to six months after graduation. FF 32. Only 39 of the Program's 105 students who took the exam during the 2021 NCLEX reporting year were graduates of the new curriculum. FF 35. Such delays in scheduling and sitting for the exam were fundamentally inconsistent with the structure of the curriculum and the preparation of students to take the NCLEX exam. The new curriculum is designed to have the students' NCLEX preparation peak at the end of the Program, coinciding with their graduation from the Program. In addition, the Program provided preparation courses and seminars to maximize the students' ability to succeed on the NCLEX exam upon graduation. Knowledge gained from these courses and seminars wanes if there is a substantial delay between graduation and

taking the exam. The Program reasoned that this situation contributed to the NCLEX results for the 2021 testing year. Resp. Ex. N, pp. 8-9.

- (c.) Extraordinary and Difficult Test-Taking Conditions. During the 2021 NCLEX reporting year, students experienced extraordinary and difficult conditions when taking the NCLEX. Some students suffered from anxiety as a result of coping with all of the effects of the pandemic over the previous year. Some students were anxious about the risks of getting COVID-19 while sitting in an indoor testing facility for hours. In addition, students were required to wear masks while they took the exam, which many of them found to be uncomfortable and difficult. Resp. Ex. N, p. 9.
- (d.) Program's Effectiveness Not Accurately Reflected in the 2021 NCLEX Reporting Year Results. The Program argued that the results from the tests taken during the 2021 reporting year are not a sound basis for evaluating the effectiveness of the Program. There was a total of 105 graduates who sat for the exam during the 2021 reporting year. Resp. Ex. N, p. 5. Thirty-nine of the 105 students were graduates from the Program's expanded curriculum and clinical component. Of those 39 students, 35 had commenced their studies under the new curriculum, while four had started in the previous clock hour curriculum and had reenrolled in the new curriculum transitioned. Of the 35 students who had commenced their studies under the new curriculum, 25 passed the NCLEX on their first attempt after graduation, representing a 71.4 % pass rate for students who began their studies under the new curriculum. FF 40. Based on the positive NCLEX test results of the Waterbury campus' day program's graduates,¹ the Program is confident that the Program's 2022 reporting year results will comply with Conn. Agencies Regs. § 20-90-47(b)(2)(A)

¹ The Program's expectations for future graduates are supported by the NCLEX results for the Waterbury programs. The programs at the Waterbury campus were the only programs that implemented the credit hour curriculum at the outset in October 2018. Accordingly, these students did not transition from the older curriculum to the revised curriculum which the Board approved in 2018. The first graduates of the Waterbury campus' day program who studied under the new curriculum took the NCLEX exam during the pre-pandemic 2020 reporting year, and 100 % of those graduates passed the exam on their first attempt. In addition, 82.85% of the graduates from the Waterbury campus' day program and 81.82% of the graduates from the Waterbury campus' evening program passed the NCLEX during the 2021 reporting year. Resp. Ex. N, p. 6.

that requires an average passing rate of 80% of a program's graduates taking the NCLEX on their first attempt after graduation.

- (e.) Future Positive Impact of July 2021 Comprehensive Correction Plan. The Program contends that the Program has not been able to fully implement the action plan that it submitted to the Board at its July 2021 meeting. The Program further asserts that there has not been a meaningful opportunity for the action plan to have a positive effect on the graduates' NCLEX scores and for the Board to evaluate the corrective plan's effectiveness. Resp. Ex. N, p. 10.

The Program's Corrective Action Plans

As a result of its failure to meet the required NCLEX passing rate (FF 24), Stone Academy was directed to submit a corrective action plan to the Board. On July 21, 2021, Stone Academy submitted a plan of correction to address a NCLEX pass rate of less than 80% for the East Hartford campus' day and evening programs, the Program, and the West Haven campus' evening program. On that same date, the Board reviewed and unanimously approved Stone Academy's plan of correction for the East Hartford campus' day and evening programs, the Program, and the West Haven campus' evening program. FF 26. Stone Academy's plan of correction was specifically designed to improve NCLEX preparedness and to address the factors that may have contributed to its graduates' failure to pass the NCLEX on their first attempt after graduation during the reporting year(s) that the Program, the West Haven campus' evening program, and the East Hartford campus' day and evening programs were on conditional approval. FF 27.

Once fully implemented, Stone Academy's corrective action plan should result in significant improvement in the Program's NCLE results. Some of the changes listed in the corrective action plan include the following:

- A new graduation policy that commenced for students who graduated in November 2020 requires students to pass the Assessment Technology Institute ("ATI") exit exam with a score of 95% probability of passing the NCLEX.
- Students who fail to achieve a score of 95% on the ATI exit exam after two attempts will be eligible for a one-time remediation program, under certain conditions.

- During remediation, a student may request, or be offered, to audit any nursing theory class at no charge. This change will assist in improving the NCLEX pass rate by providing additional remediation for students who, based on their ATI exam results, have a less than 95% chance of passing the NCLEX.
- As of May 2021, the grade point value of ATI testing and remediation was doubled to encourage students to increase their engagement with ATI to enhance their mastery of the content and application of nursing concepts which, in turn, better prepares students for NCLEX testing.
- After completion of the Seminar II course, which provides a thorough review and preparation for the ATI exit exam and NCLEX, students are encouraged to sit for NCLEX within three weeks of passing the ATI exit exam.
- A seasoned, full-time faculty member hosts a weekly NCLEX preparatory class that reviews nursing concepts, NCLEX test taking strategies, test anxiety management, and ATI remediation techniques.
- Proctored ATI exams are taken on a regular basis in all core nursing courses. After students have taken their first proctored ATI exam in their first semester, a course faculty member interprets the results and provides them with an analysis of their NCLEX passing rate as determined by their ATI exam results. Subsequently, students are given a plan to prepare them for passing the NCLEX that includes use of the ATI focused review, assigning priority to their weakest areas of study, and breaking down content into more manageable, understandable concepts.

The Board's Actions Regarding the Program's Failure to Meet the Required Passing Rate

The Board is presented with two issues. First, the Board must determine whether there is sufficient evidence to establish that the Program did not meet the educational outcome requirements mandated by Conn. Agencies Regs. § 20-90-47(b) given that its graduates failed to demonstrate a mastery of nursing principles and practices. Secondly, if the Board determines that there is sufficient evidence to establish that the Program did not meet the educational outcome requirements mandated by Conn. Agencies Regs. § 20-90-47(b), the Board must

determine if the Program should be removed from the list of approved programs in accordance with Conn. Agencies Regs. § 20-90-47(g).

Conn. Agencies Regs. § 20-90-47(g) states in pertinent part:

The board, after a hearing, may remove a program from the list of approved programs, and the program must suspend the enrollment of students, when:

- (1) The program has been on conditional approval for at least two years and has failed to correct the identified deficiencies which caused them to be placed on conditional approval;
- (2) The board provides written notice of such hearing to the administrator of the program setting forth the particular reasons for the proposed action and fixing a date, not less than thirty days from the date of such written notice, at which time representatives of the program shall have an opportunity for a prompt and fair hearing;
- (3) Upon completion of the hearing the board shall make a recommendation to the commissioner regarding what action should be taken regarding the program; and
- (4) The commissioner approves the recommended action.

In this particular case, the Program was on conditional approval for at least two years. The Program was first placed on conditional approval for one year on May 15, 2019. The Board placed the Program on conditional approval because the Program's NCLEX results for the May 1, 2018 to April 30, 2019 reporting period were not in compliance with Conn. Agencies Regs. § 20-90-47(b)(2)(A) due to the Program's failure to attain an average of at least 80% passing rate of its graduates taking the licensing examination upon their first attempt after graduation.

On June 19, 2019, the Board approved the Program's plan of correction and extended its conditional status until the Board's June 2020 meeting. FF 13.

The Program's conditional approval was extended for an additional year as a result of the Program's NCLEX pass rate for the reporting period of May 1, 2019 to April 30, 2020. In that reporting period, 58 out of 119 students passed the NCLEX on their first attempt after graduation, resulting in a pass rate of 49%. The record establishes that in 2020, the NCLEX pass rate for all of Stone Academy's programs was above 80%, with the exceptions of the East

Hartford campus' day program and the Program. FF 16. Therefore, the Board determined that the East Hartford campus' day program and the Program were not in compliance with Conn. Agencies Regs. § 20-90-47(b)(2)(A) that requires an average passing rate of 80% of a program's graduates taking the NCLEX on their first attempt after graduation. FF 17. Despite the conditional approval status, the Program failed to demonstrate a mastery of nursing principles and attain an 80% pass rate on the licensing examination for its first-time test takers after graduation for at least two consecutive graduating classes in violation of Conn. Agencies Regs. § 20-90-47(b)(2)(A).

On May 19, 2021, the Board reviewed the NCLEX results and report for the May 1, 2020 to April 30, 2021 reporting period. On May 20, 2021, the Board informed Stone Academy that the East Hartford campus' day and evening programs, the Program, and the West Haven campus' evening program were not in compliance with Conn. Agencies Regs. § 20-90-47 (b)(2)(A) which required an average passing rate of at least 80% of students taking the exam upon their first attempt after graduation.

On July 1, 2021, Stone Academy reported a breakdown of the results for first-time test takers. Stone Academy reported that 50.48% of the Program's students passed the NCLEX on their first attempt after graduation and 72.73% of the West Haven campus' evening program's students passed the NCLEX on their first attempt after graduation. FF 24. On July 21, 2021, Stone Academy submitted a plan of correction to address a NCLEX pass rate of less than 80% for the East Hartford campus' day and evening programs, the Program, and the West Haven campus' evening program. On that same date, the Board reviewed and unanimously approved Stone Academy's plan of correction for the East Hartford campus' day and evening programs, the Program, and the West Haven campus' evening program. FF 26.

On July 22, 2021, the Board informed Stone Academy in writing that the West Haven campus' evening program and the East Hartford campus' day and evening programs shall remain on conditional approval until the Board's meeting in June 2022. FF 28. In addition, the Board recommended the Program's removal from the list of approved nursing programs and programs for training LPNs with the consent of the Commissioner of the Department. FF 29. As such, the Board voted to issue a Notice of Program Removal Hearing and begin proceedings to recommend that the Program be removed from the list of approved nursing education programs pursuant to Conn. Agencies Regs. § 20-90-47(c)(3)(C) and § 20-90-47(g)(2).

On August 19, 2021, the Department notified the Program of its Program Removal Hearing scheduled for November 17, 2021. The Board's actions in seeking the Program's removal resulted from the Program's failure to correct the deficiency which caused the Program to be placed on conditional approval on June 19, 2019 and again on June 17, 2020. Specifically, the Program failed to attain an 80% NCLEX pass rate of its students on their first NCLEX attempt after graduation during such periods of conditional approval. FF 30.

On November 17, 2021, the Board held the first of two days of hearings. During the hearing, the Board learned that four of Stone Academy's six day and evening programs, including the Program, failed to attain at least an average NCLEX pass rate of 80% on their first attempt after graduation. FF 31.

At the hearing, Linda Dahlin testified regarding the adverse effects of the COVID-19 pandemic on Stone Academy's students and the personal and professional challenges the students encountered during the 2021 reporting year. As previously discussed above, in the 2021 NCLEX reporting year, only 39 of the Program's 105 students who took the exam were graduates of the new curriculum (FF 35), and the students who were delayed by up to six months in taking the NCLEX did not do very well on the exam. Tr. 11/17/2021, p. 25. Moreover, a number of items in the Program's plan of correction, such as additional training, programming, test taking preparation, and an extended remediation policy, were not fully implemented due to the COVID-19 pandemic. Tr. 11/17/2021, pp. 26-27, 29-30.

The record establishes that prior to the 2021 reporting year, the NCLEX scores did not decline for any of the school's campuses until 2019. In that NCLEX reporting year, the Program's NCLEX scores fell to 71%. Res. Ex. N, p. 12. Ms. Dahlin testified that another year of conditional approval would enable the Program to comply with Conn. Agencies Regs. § 20-90-47(b)(2)(A). To illustrate the potential success another year of conditional approval could provide for the Program, Ms. Dahlin testified that the Waterbury students' NCLEX scores are a good predictor of the scores the Program's students could achieve after the Program's correction plan is fully implemented. Overall, Linda Dahlin's testimony reiterated the reasons the Board should consider when deciding whether to extend the Program's conditional status for an additional year. Tr. 11/17/2021, pp. 25-27, 29-30.

On November 17, 2021, the Board voted to leave the record open for a second day of hearing which the Board scheduled for December 15, 2021. The Board took such action in order

to review and exam data the Board had requested from the Program. Specifically, the Board requested data regarding the 39 students who participated in the Program's enhanced curriculum and clinical component. FF 38.

On December 9, 2021, the Program filed the supplemental data requested by the Board. In addition, the Program filed the NCLEX results for the May 1, 2020 to April 30, 2021 NCLEX reporting period for the Board's review. The Program reported that of the 39 graduates in the Program's expanded curriculum and clinical component, 35 of those students had commenced their studies under the new curriculum, while four had started their studies in the previous clock hour curriculum and had re-enrolled in the new curriculum. Of the 35 students who had commenced their studies under the new curriculum, 25 passed the NCLEX on their first attempt after graduation, representing a 71.4 % pass rate. FF 40.

It is undisputed that the Program's NCLEX results for the May 1, 2020 to April 30, 2021 reporting period demonstrate that the Program failed to attain an 80% NCLEX pass rate of its students on their first test taking attempt after graduation during such period of conditional approval. FF 41.

Given the extraordinary circumstances of the 2021 reporting year, the Board's July 2021 approval of the Program's plan of correction which formally addressed the Program's prior deficiencies, the lack of a significant and meaningful amount of time to implement the Program's plan of correction, the Program's expanded curriculum, and the Program's extensive remediation plan to ensure future students' success in demonstrating a mastery of nursing principles as evidenced by attaining an 80% NCLEX pass rate, the Board voted to extend the Program's conditional status for an additional year. FF 45.

Order

Based upon the foregoing facts and conclusions of law, and pursuant to Conn. Agencies Regs. § 20-90-47(b)(2)(A), the Board hereby recommends to the Commissioner of the Department of Public Health that the conditional approval for Stone Academy, West Haven Campus Licensed Practical Nurses Day Program be extended for an additional year under the conditions specified below:

- The Program shall submit end of semester reports to the Board which shall include updates of any exam scores and student and faculty attrition rates for each semester;
- The Program shall submit status reports of current faculty positions and data and information regarding why students leave the Program prior to graduation;
- The Program shall submit reports regarding any and all curriculum modifications and the results of such modifications, tuition schedules, and the results of Assessment Technology Institute comprehensive predictor exam; and
- The Program shall submit any additional reports the Board may request as a result of receipt of the information listed above submitted to the Board by the Program.

Dated at Waterbury, Connecticut this _____ day of _____ 2022.

BOARD OF EXAMINERS FOR NURSING

By _____
Patricia C. Bouffard, D.N.Sc., Chair



STONE ACADEMY

January 31, 2022

Department of Public Health
Attn: Helen Smith, RN
410 Capitol Ave,
Hartford, CT 06134

To Whom It May Concern:

Over the course of the past year, the impact from the pandemic has been realized in a nursing shortage in the State of Connecticut. The concern is evidenced by Governor Lamont's Executive Orders that specifically target aiding the exhausted healthcare workforce. It is further demonstrated by statements from hospital associations and individual healthcare employers. As a result, the healthcare system is creating a paradigm shift that seeks to increase capacity with the intention of improving the delivery of services. In order to provide appropriate patient care, the State of Connecticut will need to address the nursing deficit expeditiously.

During the past six months, Practical Nursing and positions for Practical Nurses have evolved from being largely limited to long-term care facilities and homecare services to a substantial number of opportunities in urgent care facilities and hospitals. Griffin, Waterbury, Hartford, and St. Francis Hospitals have begun hiring Practical Nurses to complement their workforce. Long-term care and other facilities have also increased staffing of Practical Nurses to meet demand over the past 18 months. It is evident by hiring practices that these facilities understand the value of the Practical Nursing designation to address statewide gaps in nursing.

The current Practical Nursing programs in Connecticut has an average training timeframe of sixteen months (1.3 years). Based on known turn-over rates in nursing and the continued strain on the healthcare workforce caused by the pandemic, Connecticut's institutions of higher learning and career training schools must step forward to creatively resolve the staffing deficiency. As such, Stone Academy will present to the Board of Examiners for Nursing a pilot program for an intensive Practical Nursing Program that has been developed with insights from Connecticut hospitals.

Once proven successful, we believe this pilot program will create an effective model to be replicated at other campuses. This is a calculated evolution in our academic offerings and is necessary to relieve systemic issues of fatigue and attrition within the healthcare industry. To properly initiate this pilot, the institution will relinquish its West Haven Day Program to devote resources to the new program.

However, Stone Academy will provide continued instruction to students actively within the existing day program. Administrative staff will ensure to meet obligations of affected students. In accordance with 20-90-47(h) of the *Nursing Education Programs and Licensure Requirements*, Stone Academy shall provide a written plan and timetable for program termination.

Sincerely,


Gary A. Evans
Chief Executive Officer

cc: Board of Examiners for Nursing, PO Box 340308 MS #13PHO



STONE ACADEMY

January 31, 2022

Board of Examiners for Nursing
410 Capitol Avenue, MS #13PHO
P. O. Box 340308
Hartford, CT 06134-0308

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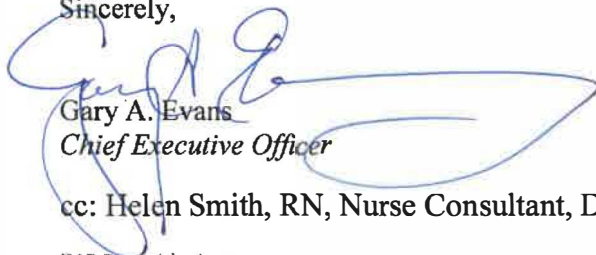
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However, Stone Academy will provide continued instruction to students actively within the existing day program. Administrative staff will ensure to meet obligations of affected students. In accordance with 20-90-47(h) of the *Nursing Education Programs and Licensure Requirements*, Stone Academy shall provide a written plan and timetable for program termination.

Sincerely,



Gary A. Evans
Chief Executive Officer

cc: Helen Smith, RN, Nurse Consultant, Dept. Public Health

745 Burnside Avenue
East Hartford, CT 06108

860-569-0618 (phone)
860-569-0783 (fax)

MODIFICATION OF REINSTATEMENT CONSENT ORDER COVER SHEET

In re: Dawne Catuccio, R.N.

Petition No. 2022-169

1. Dawne Catuccio of Waterville, Connecticut (hereinafter "respondent") was issued license number E45986 to practice as a Registered Nurse on September 12, 1983.
2. Respondent graduated from Mary's Hospital School of Nursing Institute in Waterbury, CT
3. Respondent disciplinary history:
 - a. 2002-2002622: respondent abused Ultram, entered Consent Order
 - b. 2008-2008442: respondent diverted Diludid, entered into Consent Order
 - c. 2011-833: respondent tested positive for cocaine, Voluntary Surrender
 - d. 2021-344: respondent requested reinstatement, Reinstatement Consent Order
4. Respondent entered into a Reinstatement Consent Order in Petition No. 2021-344 effective September 1, 2021. The Reinstatement Consent Order provided for probation for two years and required that respondent not obtain or use controlled substances unless prescribed, and that all urine screens be negative for the presence of drugs and alcohol.
5. On or about November 23, 2021, respondent's urine screen tested positive for codeine, which constitutes a violation of the terms of probation, and subjects respondent's license to revocation or other disciplinary action authorized by Connecticut General Statutes, §§19a-17 and 20-99(b)
6. On or about November 23, 2021, respondent abused and/or utilized to excess codeine which does, and/or may, affect her practice as a nurse and constitutes grounds for disciplinary action pursuant to the General Statutes of Connecticut, §20-99(b)(5).
7. The Reinstatement Consent Order also provided that in the event respondent violates a term of the Reinstatement Consent Order, she agrees to refrain from practicing as a registered nurse upon request by the Department for a period not to exceed forty-five days.
8. Respondent practiced as a nurse within the above specified forty-five (45) day period despite the Department's request she refrain, which is a violation of the terms set forth in the Reinstatement Consent Order, and subjects respondent's license to revocation or other disciplinary action authorized by Connecticut General Statutes, §§19a-17 and 20-99(b)
9. The proposed Modification of Reinstatement Consent Order modifies the original term of probation from 24 months to 30 months.
10. The Department and respondent respectfully request that the Board accept the proposed Modification of Reinstatement Consent Order.

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In re: Mary-Elizabeth Taylor, RN

Petition Number: 2018-1355

CONSENT ORDER COVER SHEET

1. Mary-Elizabeth Taylor ("respondent") of Niantic, Connecticut graduated from University of Connecticut School of Nursing and received her registered nursing license in 2011.

She has no prior discipline.

2. The Department alleges, and respondent denies, the following:

On or about July 24, 2018, while practicing nursing at Day Kimball Hospital, respondent was impaired; abused or used alcohol to excess; and/or unable to practice nursing safely and competently.

From approximately March 3, 2018 through September 4, 2018, respondent abused or used to excess alcohol ("alcohol abuse").

From approximately 2018 to the present, respondent has or had one or more emotional disorders and/or mental illnesses ("illnesses").

Respondent's illnesses and/or alcohol abuse does, and/or may, affect her practice of nursing.

3. This petition was discussed during a Prehearing Review on July 20, 2022. The attached proposed Consent Order incorporates the suggestions made during the Prehearing Review and includes one year probation with the following terms and conditions:

- twice monthly urine screens;
- quarterly therapy reports;
- monthly employer reports; and
- no solo practice or home care.

4. The Department and respondent, through her attorney, respectfully request the Board to accept the proposed Consent Order.

CONFIDENTIALITY NOTICE: The documents attached may contain information that is confidential or privileged. Please do not disseminate, distribute or copy the contents or discuss with parties who are not directly involved in this petition. Thank you.

CONSENT ORDER COVER SHEET

In re: Deirdre L. Hripak, R.N.

Petition No. 2020-1080

1. Deirdre L. Hripak of Beacon Falls, Connecticut ("respondent") graduated from Mattatuck Community College in 1991. She was issued license number E54170 to practice as a registered nurse on September 3, 1991.
2. Respondent has no prior disciplinary history with the Department.
3. During approximately 2017, while working as a registered nurse at Yale New Haven Hospital in New Haven, Connecticut and at MidState Medical Center in Meriden, Connecticut, respondent: (a) diverted injectable hydromorphone; and/or (b) failed to completely, properly and/or accurately document medical or hospital records. During approximately 2017, respondent abused or utilized to excess hydromorphone and in or about February or March 2020, respondent abused or utilized to excess lorazepam. From approximately 2017 to the present, respondent has and/or had one or more emotional disorders or mental illnesses (collectively "illnesses"). Respondent's illnesses and/or abuse and/or excess use of hydromorphone and/or lorazepam does, and/or may, affect her nursing practice.
4. The proposed Consent Order provides for a three-year probationary period that includes:
 - random alcohol/drug screens once a week for the first and third years of probation and twice monthly for the second year;
 - therapy and employer reports monthly for the first and third years of probation and quarterly for the second year;
 - support group meetings at least eight to ten times per month; and
 - no home care, pool nursing or self-employment.

The proposed Consent Order does not include a narcotic key restriction.

5. Respondent has continued to submit to random urine drug screening which have been negative.
6. The Department and respondent respectfully request that the Board accept the proposed Consent Order.

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CONSENT ORDER COVER SHEET

In re: Amanda L. Reiter, L.P.N.

Petition No. 2020-67

1. Amanda L. Reiter of Wallingford, Connecticut ("respondent") graduated from Lincoln Technical Institute in 2009 and was issued licensed practical nurse license number 034489 on August 14, 2009.
2. Respondent has no prior disciplinary history with the Department.
3. On or about June 19, 2019 while practicing nursing in a homecare setting for a ventilator-dependent pediatric patient, respondent failed to meet the standard of care in that she: (a) failed to ensure the patient's safety and/or prevent injuries in that respondent failed to monitor and/or maintain a safe bath water temperature when bathing the patient; (b) failed to accurately inform her nursing supervisor and/or another licensed health care provider of the patient's change and/or changes in condition; (c) failed to appropriately respond when the patient sustained a burn injury; and/or (d) failed to completely, properly and/or accurately document medical records.
4. The proposed Consent Order provides for a reprimand and a one-year probationary period that includes:
 - Coursework, pre-approved by the Department, in critical thinking skills and in the recognition and treatment of burn injuries;
 - Quarterly employer reports; and
 - No home care, pool nursing or self-employment; except that respondent will be permitted to continue working for Elara Caring, a home health care agency, solely in the capacity of providing behavioral health nursing services to home healthcare patients.
5. The Department and respondent respectfully request that the Board accept the proposed Consent Order.

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CONSENT ORDER COVER SHEET

In re: Allison Sewell, R.N.

Petition No.: 2020-53

1. Allison Sewell, of Mansfield Center, Connecticut (hereinafter "respondent") was issued license number 134500 to practice as a registered nurse in 2016.
2. Respondent graduated from Goodwin College in 2016.
3. Respondent has no disciplinary history.
4. The Department alleges:
 - a. In or about November 2019, respondent was disciplined by her employer for significant tardiness and absenteeism.
 - b. Respondent enrolled in a medication assisted treatment program, but relapsed on alcohol, cocaine and fentanyl.
 - c. In February 2020, respondent signed an Interim Consent Order.
 - d. Respondent's abuse and/or excess use of controlled substances and/or alcohol does and/or may, affect her ability to practice as a registered nurse.
 - e. The above-described facts constitute grounds for disciplinary action pursuant to the General Statutes of Connecticut, §20-99(b), including but not limited to §20-99(b)(2) and/or §20-99(b)(5).
5. The proposed Consent Order provides for a 4-year probation with:
 - a. Therapy and employer reports monthly for the 1st and 4th year and quarterly for the 2nd and 3rd year
 - b. Urine screens, once per week for the 1st and 4th year and twice monthly for 2nd and third year.
 - c. Support group meetings, 8-10 per month
 - d. No solo practice
 - e. 1 year restriction for narcotic access
6. The Department and respondent respectfully request that the Board accept the proposed Consent Order.

CONSENT ORDER COVER SHEET

In re: Heidi A. Smith, R.N.

Petition No. 2021-427

1. Heidi A. Smith of Manchester, Connecticut ("respondent") graduated from New Jersey City University in 2017. She was issued license number 148008 to practice as a registered nurse on February 1, 2018.
2. Respondent has no prior disciplinary history with the Department.
3. During approximately 2019, while working as a registered nurse at Hartford Hospital in Hartford, Connecticut, respondent diverted controlled substances, including Hydromorphone, Fentanyl and/or Morphine ("controlled substances") for her personal consumption. On or about October 2, 2019, while working as an emergency medical technician for Vernon Ambulance and responding to a medical call, respondent diverted Hydrocodone-Acetaminophen tablets from a patient's home for respondent's personal consumption. During approximately 2019, including without limitation during October 2019, respondent abused or utilized to excess controlled substances, Hydrocodone-Acetaminophen and/or Oxycodone. On or about April 23, 2020, respondent abused and/or used alcohol to excess during which time she was involved in a motor vehicle collision. In or about March 2021, respondent acted inappropriately and/or unprofessionally when she obtained a medical marijuana card for herself in that she, without limitation, failed to disclose to the certifying health care provider, her substance abuse history and/or that she would not be using the medical marijuana for her own medical condition. On or about May 26, 2021, respondent abused and/or utilized to excess Tramadol. Respondent's abuse and/or excess use of controlled substances, Hydrocodone-Acetaminophen, Oxycodone, Tramadol and/or alcohol does and/or may affect her practice of nursing.
4. The proposed Consent Order provides for a reprimand and a three-year probationary period that includes:
 - random alcohol/drug screens once a week for the first and third years of probation and twice monthly for the second year;
 - therapy and employer reports monthly for the first and third years of probation and quarterly for the second year;
 - narcotic key restriction;
 - support group meetings at least eight to ten times per month; and
 - no home care, pool nursing or self-employment.
5. The Department and respondent respectfully request that the Board of Examiners for Nursing accept the proposed Consent Order.

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STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH

In re: Olesja Whelan, R.N.

Petition No. 2020-336

STATEMENT OF CHARGES

Pursuant to the General Statutes of Connecticut, §§19a-10 and 19a-14, the Department of Public Health (hereinafter "the Department") brings the following charges against Olesja Whelan:

1. Olesja Whelan of Stamford, Connecticut (hereinafter "respondent") is, and has been at all times referenced in this Statement of Charges, the holder of Connecticut registered nurse license number 112029.
2. At all relevant times, respondent was employed as a nurse at a facility in New York.
3. On or about November 27, 2019, respondent appeared at work in an impaired state.
4. In or before November 2019, respondent abused or utilized to excess alcohol.
5. Respondent's abuse or excess use of alcohol does, and/or may, affect her practice as a nurse.
6. The above facts constitute grounds for disciplinary action pursuant to the General Statutes of Connecticut, §20-99, including but not limited to §20-99(b)(2) and/or 20-99(b)(5).

THEREFORE, the Department prays that:

The Connecticut Board of Examiners for Nursing, as authorized by the General Statutes of Connecticut, §§20-99(b) and 19a-17, revoke or order other disciplinary action against the license of Olesja Whelan as it deems appropriate and consistent with law.

Dated at Hartford, Connecticut this 10th day of August, 2021.



Christian D. Andresen, MPH, Section Chief
Practitioner Licensing & Investigations Section
Healthcare Quality and Safety Branch

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In re: Arlene E. Clarke, L.P.N.

Petition No. 2022-580

STATEMENT OF CHARGES

Pursuant to Connecticut General Statutes §§19a-10 and 19a-14, the Department of Public Health ("the Department") brings the following charges against Arlene E. Clarke:

1. Arlene E. Clarke of West Hartford, Connecticut ("respondent") is, and has been at all times referenced in this Statement of Charges, the holder of Connecticut licensed practical nurse license number 026749.
2. On or about May 26, 2022, the Ohio Board of Nursing entered into a Consent Agreement with respondent in Case #20-004136 ("Ohio Consent Agreement") suspending respondent's Ohio nursing license indefinitely, with such suspension being stayed subject to certain probationary terms and restrictions for a minimum period of two (2) years. The Ohio Consent Agreement was based in part upon respondent's substance use disorder and/or her indictment for theft and Medicaid fraud in The Court of Common Pleas of Franklin County, Ohio, Case No. 20CR-3336.
3. In approximately 2019 and/or 2020, respondent abused, or utilized to excess, drugs and/or alcohol. Said abuse or excess use of drugs and/or alcohol does and/or may affect her nursing practice.
4. From on or about December 24, 2018 to on or about November 8, 2019, respondent fraudulently billed, or caused to be billed, for nursing services she did not provide for a recipient of the Ohio Medicaid Program.
5. Respondent failed to report to the Department, as required by Connecticut General Statutes §19a-12e(e), the disciplinary action taken by the Ohio Board of Nursing under the Ohio Consent Agreement.
6. On or about January 22, 2022, respondent falsely answered "No" when asked on her nursing license renewal application whether any disciplinary actions were pending since her last renewal.
7. The above facts constitute grounds for disciplinary action pursuant to Connecticut General Statutes §§19a-17(f), 19a-12e(e) and/or 20-99, including, but not limited to §20-99(b)(2), §20-99(b)(5) and/or §20-99(b)(6).

THEREFORE, the Department prays that:

The Connecticut Board of Examiners for Nursing, as authorized by Connecticut General Statutes §§20-99(b) and 19a-17, revoke or order other disciplinary action against the license of Arlene E. Clarke as it deems appropriate and consistent with law.

Dated at Hartford, Connecticut this 27th day of July, 2022.



Christian D. Andresen, MPH, CPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

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**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In re: Danielle D. Works, LPN

Petition No. 2021-519

STATEMENT OF CHARGES

Pursuant to Connecticut General Statutes, §§19a-10 and 19a-14, the Department of Public Health ("the Department") brings the following charges against Danielle D. Works:

1. Danielle D. Works of Stafford Springs, Connecticut ("respondent") is, and has been at all times referenced in this Statement of Charges, the holder of Connecticut licensed practical nurse license number 040340.
2. On or about July 17, 2019, the Board of Examiners for Nursing ("the Board") ordered a Consent Order in Petition Number 2018-1100 ("the Order") that placed respondent's nursing license on probation for a period of four (4) years. Such disciplinary action was based, in part, upon allegations that respondent, while practicing nursing in Massachusetts, diverted Roxanol, Dilaudid and/or Oxycodone ("controlled substances"); failed to completely, properly and/or accurately document medical or hospital records; and abused or utilized to excess controlled substances.
3. The Order specifically provided, in part, that respondent: engage in therapy and counseling with a licensed therapist, approved by the Department; cause her therapist to provide written reports to the Department monthly during the first and fourth years of her probation and quarterly for the remainder of her probation; submit to observed, random chain of custody urine screens for alcohol and drugs, at a testing facility approved by the Department; submit to at least one such urine screen weekly during the first and fourth years of her probation, and monthly for the remainder of her probation, and have laboratory reports of random alcohol and drug screens submitted directly to the Department; attend support group meetings on an average of eight (8) to ten (10) times monthly and provide quarterly reports of attendance to the Department; and cause her nursing supervisor to provide written reports to the Department monthly during the first and fourth years of her probation, and quarterly for the remainder of her probation.
4. From approximately on or about May 28, 2021 to the present, respondent failed to:
 - (a) engage in therapy and counseling;
 - (b) cause her therapist to provide written report(s) to the Department;

- (c) submit to observed, random chain of custody urine screens for alcohol and drugs;
 - (d) cause laboratory reports of urine screens for alcohol and drugs to be submitted directly to the Department;
 - (e) attend support group meetings and/or provide reports of attendance to the Department; and/or
 - (f) cause her nursing supervisor to provide written report(s) to the Department.
5. Respondent's conduct as described above constitutes violations of the terms of probation as set forth in the Order, and subjects respondent's license to revocation or other disciplinary action authorized by Connecticut General Statutes, §§19a-17 and 20-99(b).

THEREFORE, the Department prays that:

The Connecticut Board of Examiners for Nursing, as authorized by Connecticut General Statutes §§20-99(b) and 19a-17, revoke or order other disciplinary action against the license of Danielle D. Works as it deems appropriate and consistent with law.

Dated at Hartford, Connecticut this 13th day of May, 2022.



Christian D. Andresen, MPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In re: Candace Staines, RN

Petition No. 2022-470

STATEMENT OF CHARGES

Pursuant to Connecticut General Statutes §§19a-10 and 19a-14, the Department of Public Health ("Department") brings the following charges against Candace Staines:

1. Candace Staines of Summit, New Jersey ("respondent") is, and has been at all times referenced in this Statement of Charges, the holder of Connecticut registered nurse license number 180371.
2. On or about December 27, 2021, the New Jersey State Board of Nursing ("New Jersey Board") suspended respondent's New Jersey license to practice nursing based, in part, on respondent's failure to comply with the New Jersey Board's designated intervention program, the Recovery and Monitoring Program.
3. On or about September 24, 2019, respondent abused or used to excess codeine.
4. On or about October 30, 2019, respondent abused or used to excess alcohol.
5. On or about February 14, 2020, respondent abused or used to excess Ativan.
6. Respondent's abuse of codeine, alcohol, and/or Ativan and/or failure to comply with the New Jersey Board's designated intervention program, does, and/or may, affect her practice of nursing.
7. Respondent failed to notify the Department of the New Jersey disciplinary action within thirty (30) days of its effective date as required by Connecticut General Statutes §19a-12e(e).
8. The above-described facts constitute grounds for disciplinary action pursuant to Connecticut General Statutes §§19a-17(f), 19a-12e(e), 20-99(b), including but not limited to 20-99(b)(2) and/or §20-99(b)(5).

THEREFORE, the Department prays:

The Connecticut Board of Examiners for Nursing, as authorized by Connecticut General Statutes §§20-99(b) and 19a-17, revoke, or order other disciplinary action against respondent's nursing license as it deems appropriate and consistent with law.

Dated at Hartford, Connecticut this 13th day of June, 2022.



Christian D. Andresen, MPH, CPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

PREHEARING REVIEW COVER SHEET

In re: Lisa M. Alexander, R.N.

Petition No. 2020-697

1. Lisa M. Alexander of Cheshire, Connecticut (hereinafter "respondent") graduated from Southern Connecticut State University in 1988 and was issued registered nurse license number E51594 in September 1988.
2. Respondent was issued advanced practice registered nurse license number 002144 in September 1999 which she surrendered, effective September 9, 2020, in connection with allegations in Petition No. 2020-523 that she, in part, prescribed controlled substances to one or more individuals without a patient-provider relationship and/or without medical justification.
3. The Department's Practitioner Licensing and Investigations Section opened this petition after receiving a referral from the Department of Consumer Protection Drug Control Division.
4. Respondent provided care to patient #1 at various times from approximately October 2016 through June 2017. From approximately 2017 until in or about March 2020, respondent violated the accepted standards of the nursing profession in that she, without limitation, engaged in an inappropriate personal relationship with patient #1; violated professional boundaries with patient #1; and/or engaged in unprofessional conduct.
5. On or about October 30, 2020, respondent plead guilty to one count of unlawful distribution and dispensing controlled substances by a practitioner in United States v. Lisa M. Alexander, United States District Court of Connecticut, Criminal No. 3:20-cr-00211-JCH.
6. The Department and respondent respectfully request that the Board review the attached documents and provide a recommendation regarding this petition.

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STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH

In re: Melissa L. Wilson, R.N.

Petition No. 2020-685

PREHEARING REVIEW COVER SHEET

1. Melissa L. Wilson of East Granby, Connecticut (“respondent”) graduated from Goodwin College and was licensed to practice nursing in 2005.
Her license was previously disciplined in 2009.
2. The Department alleges:
On multiple occasions in 2019, respondent abused or used to excess alcohol, marijuana and/or amphetamines;
In 2019 to the present, respondent has or had one or more emotional disorders and/or mental illnesses (“illnesses”); and
Respondent’s illnesses and/or abuse or excessive use of alcohol marijuana and/or amphetamines, and/or may, affect her practice of nursing.
3. The Department and respondent, through her attorney, respectfully request the Board to review the attached documents and provide a recommendation regarding this petition.

CONFIDENTIALITY NOTICE: The confidentiality of the attached documents is required under Federal and State law. All recipients must maintain strict confidentiality. All forms of disclosure, whether oral, written, or electronic, are strictly prohibited.