

**Consideration of Summary of Self-Study Reports for
Professional Nursing Education Programs
For the 2016 NCLEX-RN® Examination Pass Rates**

Background:

Rule 215.4(c)(2)(B) requires nursing programs to submit a Self-Study Report (SSR) when their NCLEX® examination pass rate is below the benchmark of 80%. Ten professional nursing programs were required to develop a SSR based upon the 2016 NCLEX-RN® examination pass rates. One of the 10 programs did not submit their SSR, so the information in this report is based upon the collective programs' self-analyses. The implementation of corrective strategies has usually resulted in programs adjusting their curricula for more rigor; revising their admission, readmission, and progression criteria; and providing more effective faculty development and faculty mentoring programs.

The NCLEX® examination pass rate is not the only indicator of the quality of the educational preparation in the nursing program but usually provides a "red flag" that improvements need to be made. The passing rate of first-time candidates provides the best measure of the effectiveness of the program of study in preparing graduates for entry-level practice. Many graduates succeed on second or third attempts on the NCLEX® and become licensed nurses, but other factors (such as further study and review courses) contribute to the pass rate of repeaters, not just the education provided in the program.

The majority of programs improve their pass rates through successful implementation of corrective measures. The SSR represents a focused self-evaluation by the director and nursing faculty, and most programs testify that it is a valuable insight into their total program.

The 10 programs that developed SSRs for the 2016 NCLEX-RN® examination pass rates included:

- 8 ADN programs in public community colleges, and
- 1 BSN program in a public university.
- 1 outstanding SSR was from an ADN program in a career school.

Six of the 10 programs are accredited by a national nursing accreditation agency.

Board Staff have identified major trends of problem areas that have been common to the SSRs reviewed during the past four years:

- low admission and readmission criteria;
- need for faculty development;
- lack of remediation for at-risk students;
- shortage of qualified faculty;

- need for curriculum revision; and
- ineffective clinical evaluation tools.

Other factors that have surfaced that impact the success of nursing programs are:

- pressure from the institution to increase student enrollments;
- lack of director authority to lead the program;
- challenges faced by faculty to change teaching strategies;
- differences in student learning styles; and
- rapid turnover of directors and faculty.

Findings from these nine SSRs are similar to ones in previous years, so this report will focus on currently reported major issues and suggestions for handling them.

Suggestions for Handling Current Issues Identified in the SSRs from Professional Nursing Education Programs Related to the Pass Rates for 2016:

- 1. In order for at-risk students to be successful in the program, effective remediation must be provided.** Many programs have a mission to help disadvantaged students to receive an education and prepare for the job market. Two possibilities for fulfilling the mission are: (1) recognizing at-risk students early, and (2) providing services to help them succeed such as remediation, tutoring, childcare, financial aid, and one-on-one support.
- 2. If standardized examinations are used to evaluate student progress, clearly-written policies must be available to ensure they are used to guide curriculum revisions and remediation services.** The use of standardized examinations as a high-stakes examination for progression and graduation is discouraged by the vendors and by regulation. However, reported data may suggest areas in the curriculum needing strengthening.
- 3. Ongoing faculty development should be a regular part of every nursing education program.** Since a majority of nursing faculty have no graduate coursework in curriculum development or teaching, providing continuing education by the program is vital for their growth in the teaching role as well as for their currency in nursing education practices. Many programs identify a need for test writing and item analysis skills among the nursing faculty. New faculty also benefit greatly from a planned orientation to their teaching role in the nursing program and the assignment of a mentor has been instrumental in retaining faculty.
- 4. The nursing curriculum should undergo continual evaluation to ensure its currency and effectiveness.** The SSRs listed curriculum weaknesses in the following specific areas of Instruction: cultural sensitivity; clinical reasoning; communication; and pharmacology. In addition, adjusting to the state-mandated 60-credit curriculum for all ADN programs and the added challenges in moving to the concept-based curriculum for some ADN programs have been stressful.

5. **Testing practices and policies need to be evaluated to ensure test security, fairness, and consistent grading criteria among faculty.** Programs recognized the importance of test blueprinting that includes reviewing the NCLEX Test Plan. Faculty should determine that the test items evaluate student knowledge based on course objectives. This is especially true when using test pools or standardized examinations. One program stated that they are required to follow the college mandated pass rate and grading standards for progression that is lower than the norm in the nursing program, which creates a problem.

6. **Clinical Evaluation Tools should also undergo frequent evaluation for their usefulness and for accurate documentation of student performance in clinical.** The clinical evaluation tool provides constructive feedback to students as well as documentation of students' progression through the program. Programs reported that faculty and clinical partners stated that students lack clinical skills. A properly designed clinical evaluation tool that is user-friendly may help guide faculty and students in providing opportunities for students to gain competencies during their clinical practice. One director reported that clinical evaluation tools were not used consistently by all faculty and revision of the tool and the process are needed.

Publication by Former Program Director:

Dr. Richard Pullen, former Program Director for the ADN Program at Amarillo College, published an article in the June *Nursing 2017* describing his experiences when the program was required to write a SSR. One of this main points is that curriculum rigor is crucial. He wrote, "Curriculum rigor is defined as one that is sufficiently challenging to promote critical thinking and clinical reasoning for graduates to pass NCLEX the first time they take the exam."

This report is for information only. No action is required.