

New at the NCBON



2014 Board of Nursing Election

Coming soon to the NCBON website: 2014 Slate of Candidates

Don't forget to vote: July 1 – August 15

By following the link to Continuing Education on the home page of our website, you can earn 2.0 CH by reading the article, *North Carolina Nurses Vote 2014!*, which will also be in the Summer 2014 *Bulletin*.

Dates to Remember

New Program Directors Orientation, Wednesday, September 10, 2014

Next Board Meeting, Friday, September 26, 2014.

Education Annual Report available from Oct. 1-Oct. 31, 2014.

Education Summit, Monday, April 13, 2015 at the Friday Center in Chapel Hill

Directors of Nursing Education Programs Orientation

This orientation session will be held on Wednesday, September 10th at the Board office. It will be open to **new** directors only.

Don't Forget!

The 2014 1st quarter NCLEX Program Performance for individuals that you access through your Program Director Gateway is now available. Be sure to copy this information before July 15th. At that time (or shortly thereafter), the 2nd quarter information will be posted and the 1st quarter information will be gone and irretrievable. Second Quarter NCLEX Pass Rates will be posted on our website mid-July.

You are only using one password now to access Program Verification, individual NCLEX pass rates, and the Annual Report due during the month of October. If you have questions, contact Linda Blain at lindab@ncbon.com.

Faculty Vitae: Change in NCBON Process

Nursing Education Program Directors will no longer receive a letter of approval from the NCBON following submission of the faculty vitae for new full-time or part-time faculty members. NCBON Education staff will send a letter or email of acknowledgement that the faculty vitae has been submitted within 20 business days from the time of employment as required in 21NCAC 36.0323(f)(4). Submission of the completed faculty vitae form within the specified timeframe for each newly hired faculty member remains a requirement for compliance with NCBON Rules for all programs leading to initial licensure.

May Board Meeting Updates

Ratified Full Approval Status

- Caldwell Community College and Technical Institute, Hudson – ADN
- Cape Fear Community College, Wilmington – PNE
- NCA&T State University, Greensboro – BSN
- Pitt Community College, Greenville – ADN

Ratified Approval of the Following Expansion in Enrollment

- Wake Technical Community College, Raleigh – ADN – Increase of 20 students for a total of 320 beginning Fall 2014

FYI – Program Closures

- Presbyterian School of Nursing at Queens University of Charlotte, Charlotte – ADN – Closed program effective May 1, 2014. This decision was made by the school.
- Southwestern Community College, Sylva – PN – closed program effective April 2014. This decision was made by the school.

Initial Approval for new program

- South University, High Point – BSN

Initial to Full Approval

- Gardner-Webb University, Boiling Springs – BSN
- Methodist University, Fayetteville – BSN
- Wingate University, Wingate – BSN

Be Aware!

Students may be able to purchase nursing test banks online. There are no specific NCBON rules governing test construction: however, to avoid a breach in test security faculty may want to develop their own questions or only use test banks as a framework to develop unique tests.

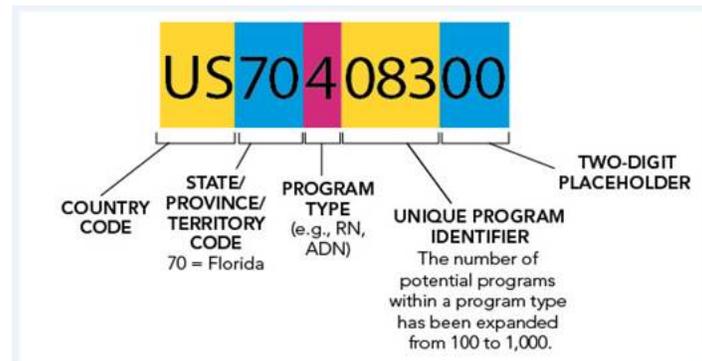
New Nursing Programs

Colleges submitting an application to the NCBON to establish a new nursing program in North Carolina will no longer be required to mail “Impact Statements” to area nursing programs. Instead, the colleges will mail the program director of each program within a 50 mile radius a letter describing their intent to open a new program, the type of program, maximum number of students, and a list of clinical agencies they will be utilizing as clinical resources.

NCSBN Educational Program Code Enhancement

Each nursing program approved by a board of nursing is identified by a unique code assigned by The National Council of State Boards of Nursing (NCSBN). National Council has recently changed the length and format of the education program codes in order to accommodate new and expanding nursing programs. Program codes now consist of 10 digits instead of 5, allowing the number of available program codes to significantly increase.

For example, the new program code looks like this: **US70408300**. A breakdown of the new program code is as follows:



US – Country code (only countries using the NCLEX for licensure/registration will be assigned a country code)

70 – State/Province/Territory Code (Florida)

4 – Program Type (e.g., RN, ADN)

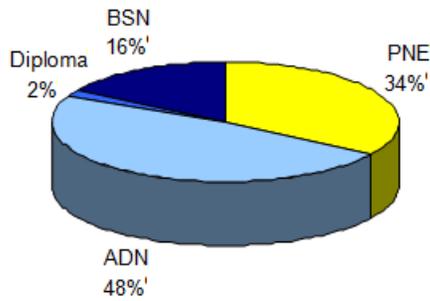
083 – Unique program identifier (note that the number of potential programs within a program type has been expanded from 100 to 1000)

00 – A 2-digit placeholder has been added to the end of the program code. Until the information to be sought for this placeholder has been determined, the last two digits of each program code will be '00.'

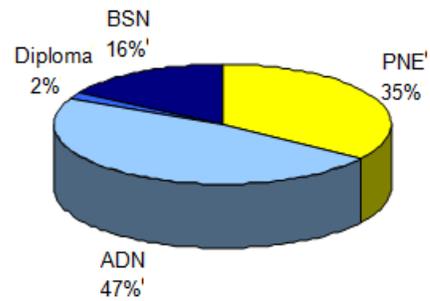
This change was implemented April 1, 2014. Program directors should provide the program code for all graduates or instruct them where to locate the correct code in the Candidate Bulletin at www.ncsbn.com.

Education Program Data
(presented by Kathy Chastain at May 2014 Board Meeting)

2009-Nursing-Education-Programs

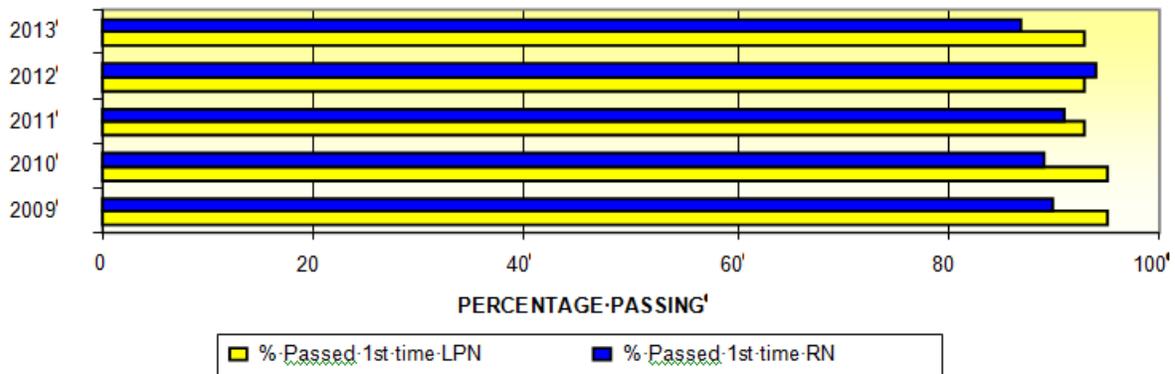


2013-Nursing-Education-Programs



NCLEX

% Pass Rates for NC Educated 1st-Time Testers



Year	NC grads-% Passed 1st time LPN	% Passed 1st time RN
2009	95	90
2010	95	89
2011	93	91
2012	93	94
2013	93	87

2013 Single Year National NCLEX Pass Rates

2013 current one year pass rate for 1st time test takers was:

83% for NCLEX-RN (95% for NC is 79%)

85% for NCLEX-PN (95% for NC is 81%)

FROM NCSBN

UPDATE ON NCLEX ID POLICY

Following approval from the NCSBN Board of Directors, along with the NCLEX Examination Committee, we will be implementing a new ID policy for candidate admission to Pearson VUE test centers beginning June 16, 2014.

In researching government issued IDs in the U.S. and in determining methods for improving the admissions process for candidates at the test centers, we saw an opportunity to expand on the types of identification acceptable for admission to the exam. By implementing this new policy, we will be reducing the confusion around identification at the test centers while maintaining the same high level of security standards.

Acceptable Forms Of Identification

The **only** acceptable forms of identification for test centers within the U.S. are:

- Passport books and cards
- Driver's license
- Provincial/Territorial or state identification card
- Permanent residence card
- Military identification card

The only identifications acceptable for test centers outside of the U.S. are:

- Passport books and cards

Temporary identification (examples include limited term IDs and any ID reading "temp" or "temporary") is only acceptable if it meets the required elements stated below.

All forms of identification listed above must be valid (non-expired) government-issued identification containing the following information:

- Name (in Roman characters)
- Photograph
- Signature

NCBON Position Statement on the Use of Standardized External Exams for Progression/Graduation

The NCBON does not support the use of any external examination that is used as a gatekeeper for progression or graduation. Schools can include performance on an external exam as part of a final course grade; however, the score should not count as an all-or-none scale for meeting or failing to meet a specific predetermined criterion. If an external exam is utilized in grading, the external exam should count no more than 10% of the grade and the assignment of points is on a sliding scale based on performance on the examination. This position statement is located on the NCBON website at ncbon.com under Education and Resources for Program Directors.

From the Literature

Recent literature indicates that most commercially available standardized predictive tests provide individual student scores that are linked to a probability of *passing* the NCLEX-RN. Research has shown that while predictive tests often work well in identifying high-performing students who are likely to pass the NCLEX, they are much less precise in identifying the likelihood of failure (Spurlock, 2006; Spurlock and Hunt, 2008). This distinction in describing the *accuracy* of a test is especially important when policies that prevent progression or graduation are in place. But as Spurlock has indicated (2006), little or no guidance is available to faculty who wish to set cut, or decision, scores for their progression or graduation policies.

Reference:

The Fair Testing Imperative in Nursing Education
A Living Document from the National League for Nursing
NLN Board of Governors
February 2012
www.nln.org/aboutnlm/livingdocuments/pdf/nlvision_4.pdf

Among the negative consequences of high-stakes testing are the narrowing of curriculum, the exclusion of nontested subject areas, the adaptation of teaching style to testing format, excessive test preparation, a disproportionate and negative impact on disadvantaged students, misleading measure of overall student achievement, test anxiety, increased pressure on teachers, lower teacher morale, and the manipulation of student retention and reclassification policies to increase test scores (Blazer, 2011).

Reference:

Blazer, C. (2011). *Unintended Consequences of High-Stakes Testing*.
Retrieved from: <http://www.eric.ed.gov/?id=ED536512>

REMEMBER: the Education Communiqué is archived on the Education page of the website

Suggestions/Comments/Topics for future newsletters

Send to charris@ncbon.com