



# Education Communiqué

Fall/Winter 2018

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The Education and Practice Department would like to express our warmest wishes for a happy holiday season.

## Save the Date...

### North Carolina Board of Nursing 16th Annual Education Summit

The 16th Annual Education Summit will be held April 1, 2019 at the Friday Center in Chapel Hill. Registration is required and will be available in January via our website at [www.ncbon.com](http://www.ncbon.com). This is a great opportunity for all nursing education program directors and faculty.

- **Keynote Speaker - Dr. Meg Zomordi** from the University of North Carolina at Chapel Hill School of Nursing
- **Tiffany Morris** from North Carolina A&T State University
- **Kathleen Privette** from the North Carolina Board of Nursing

The Education Summit provides an educational activity to nursing program directors and faculty. The content of this educational activity will enable the learner to acquire or improve knowledge and/or skills beyond basic understanding, as well as enhance professional development and performance of nurse educators.

#### Learning Outcomes:

1. Recognize current trends in patient safety and teamwork, nursing informatics and quality improvement, and substance use disorder in nursing.
2. Discuss teaching strategies and techniques for educating nursing students.

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## Education Program Director Orientation

The Education Program Director Orientation (EPDO) for new board approved program directors will be held on February 6, 2019. This educational offering will provide **new** program directors with information on the NCBON functions and will assist in maintaining compliance with North Carolina regulation relating to nursing education programs. Please contact us at [education@ncbon.com](mailto:education@ncbon.com) or (919) 782-3211, ext 238 for registration information.

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## Revised NCLEX Low Pass Rate Policy

At the October 2018 Board Meeting, the revised policy NCLEX Pass Rate Below the Standard, was approved by the Board. The revised policy will go in effect January 1, 2019. The programs currently on an existing condition (improvement plan, NDCO, or Warning Status) will be reviewed based on the revised policy.

### **Policy Statement/Standard/Procedure:**

The nursing program shall maintain a three-year average pass rate at or above 95 percent of the national three-year average pass rate for licensure level on first writing of the licensure examination for calendar years ending December 31.

NOTE: Programs on Initial Approval Status will be evaluated based upon the single-year pass rate in year 1 and the two-year average pass rate in year 2, until a three-year average is available.

1. The first year the NCLEX pass rate for a nursing education program is below the three-year average Standard, (or programs on Initial Approval Status, below the two-year average pass rate or the single-year pass rate), Board staff issue a notice specifying the time frame in which the program must submit a written improvement plan, which includes a comprehensive evaluation plan, for the next calendar year.
2. When the NCLEX pass rate for a nursing education program is below the required three-year average standard for two consecutive years, the program status is changed to Warning Status. Key points of the nursing education program's improvement plan are posted with the Warning Status. Board staff will conduct a focused review of the program. The Board ratifies this action via the Consent Agenda at the next regularly scheduled Board Meeting.
3. When a nursing education program on Warning Status demonstrates significant progress in meeting the NCLEX Standard, it is returned to or maintained on Full Approval Status. Significant progress is demonstrated by achievement of a current year pass rate that meets or exceeds 95 percent of the current year national pass rate.
4. When the NCLEX pass rate for a nursing education program is below the required three-year average standard for three consecutive years, the program is issued a published consent order by the Board.

## QSEN Resource

### QSEN-Based Clinical Evaluation Instruments Resource

Gerry Altmiller, EdD, APRN, ACNS-BC, Professor and Director of the QSEN Institute Regional Center at The College of New Jersey has graciously provided permission for open use of her Content Validated QSEN-Based Clinical Evaluation Instruments. The full article is published in the January of 2017 edition of the Nurse Educator Journal (Altmiller, 2017). The instruments are free for use and can be downloaded at <https://qsen.tcnj.edu/resources/>.

Altmiller, G. (2017, January). Content Validation of a Quality and Safety Education for Nurses–Based Clinical Evaluation Instrument. *Nurse Educator*, 42(1), 23-27. doi: 10.1097/NNE.0000000000000307

### Consensus on Nursing Education Regulatory Quality Indicators: A Delphi Study

Nancy Spector, PhD, RN, FAAN, Director, NCSBN Regulatory Innovations, presented the Delphi Study at the NCSBN Scientific Symposium in October. This is an ongoing study and the results will be integrated into the larger 5 Year Annual Report Study for evidence-based recommendations. Boards of Nursing are asking for legally defensible metrics to measure other than first-time NCLEX pass rates. Here are some of the highlights of the presentation. The article will be shared with programs once it is available.

#### Study Questions

##### 1. What are the characteristics of nursing programs that graduate safe and competent nurses?

- ◇ Evidence-based curriculum that emphasizes quality and safety standards for patient care
- ◇ Evidence-based curriculum that emphasizes critical thinking and clinical reasoning skills
- ◇ Faculty are able to role model professional behaviors
- ◇ Clinical experiences with actual patients that prepare students for the reality of clinical practice
- ◇ Program has a systematic process in place to address and remediate student practice errors
- ◇ Faculty teaching clinical courses demonstrate current clinical competence
- ◇ Consistent administrative leadership in the nursing program
- ◇ Collaboration between education and practice to enhance readiness for practice
- ◇ Ongoing systematic evaluation of the nursing program
- ◇ Institutional administrative support of the nursing program
- ◇ Consistently has a pattern of NCLEX pass rates that meet set standards
- ◇ Administrative support for ongoing faculty development
- ◇ Significant opportunities for a variety of clinical experiences with diverse populations
- ◇ Consistent full-time faculty, as opposed to reliance on adjunct faculty
- ◇ Quality simulation is used to augment clinical experiences
- ◇ Comprehensive student support services
- ◇ Program has national nursing accreditation
- ◇ Admission criteria that emphasize a background in the sciences

## 2. What are the red flags when a program is beginning to fall below standards?

- ✧ Lack of consistent and prepared clinical faculty
- ✧ Limited clinical experiences that do not prepare the students for practice
- ✧ Poor leadership in the nursing program
- ✧ Trend of NCLEX pass rates is inconsistent or decreasing
- ✧ Complaints to the nursing program or board of nursing from employers, students or faculty
- ✧ Pattern of faculty attrition
- ✧ Pattern of nursing program administrator attrition
- ✧ Unwillingness of healthcare institutions to host clinical experiences for the nursing program's students
- ✧ Pattern of student attrition
- ✧ Curriculum is based on "teaching to the NCLEX"
- ✧ Over-reliance on simulation to replace clinical experiences with actual patients

## 3. What are the outcome measures used to determine if a program is graduating safe and competent students?

- ✧ NCLEX pass rates of the nursing program
- ✧ Relationship the nursing program has with its clinical partners
- ✧ Employer satisfaction with the graduates' readiness for practice
- ✧ Graduate preparedness to practice for an interprofessional environment
- ✧ Graduates' satisfaction with the nursing program
- ✧ Graduation rates of students in the nursing program
- ✧ Consistency of graduate employment rates with regional data on nurse employment rates
- ✧ History of board of nursing discipline with the graduates of the nursing program

## Conclusions and Implications

### Strong agreement among faculty, clinical nurse leaders and regulators on:

1. **Quality, hands-on clinical experiences – is the most significant factor.**
2. Meaningful collaboration between practice and education is needed – early on in program planning.
3. Administrator consistency and leadership is essential.
4. A well-prepared, consistent faculty is essential.

## *Law and Rules Corner*

**Remember Clinical Experiences should all be faculty driven. Here are the rules pertaining to faculty supervision.**

### **21 NCAC 36 .0318 Faculty**

(d) Clinical preceptors shall have competencies, assessed by the nursing program, related to the area of assigned clinical teaching responsibilities and shall serve as role models to students. Clinical preceptors may be used to enhance faculty-directed clinical learning experiences after a student has received basic instruction for that specific learning experience. Clinical preceptors shall hold a current, unrestricted license to practice as a registered nurse in NC.

(k) Nurse faculty members shall be academically qualified and sufficient in number to implement the curriculum as required by the course objectives, the levels of the students, the nature of the learning environment, and to provide for teaching, supervision, and evaluation.

## ***Law and Rules Corner***

**Clinical preceptors should be selected by the program and faculty to mentor students.**

### ***21 NCAC 36 .0321 Curriculum***

(c) Clinical experience shall be comprised of sufficient hours to accomplish the curriculum, shall be supervised by qualified faculty pursuant to 21 NCAC 36 .0318, and shall ensure students' ability to practice at an entry level.

(d) All student clinical experiences, including those with preceptors, shall be directed by nursing faculty.

(p) External standardized examinations shall not be used as a determinant of a student's progression or graduation in a nursing education program preparing students for initial nurse licensure.

## ***Accreditation Documentation***

Any relevant accreditation communication must be submitted to the North Carolina Board of Nursing at the time it is communicated to or received from ACEN, CNEA or CCNE as required by the *North Carolina Administrative Code Rule 21 NCAC 36 .0303(a)(b)(1)*.



## **NCBON Holiday Schedule**

The Board will be closed on the following dates:

December 24-26  
January 1

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