

National Council of State Boards of Nursing (NCSBN) and Academic Progression

Frequently Asked Questions – March 2016

1. What is the role of NCSBN in regulatory oversight of RN to BSN programs?

NCSBN supports states in their role of pre-licensure nursing program approval and regulation, although, NCSBN has no direct role. Almost all boards (with the exception of NY, MS and UT) approve/regulate undergraduate pre-licensure nursing education programs. A smaller number regulate RN to BSN programs (HI, IA, ID, LA, NV, OR, SD, TN, VA, WA, WY, GU) as most states focus on entry-level and an RN to BSN program is not considered entry level.

It was noted that the NCLEX-RN tests minimal entry level competency and these nurses should be beyond minimal level competency. There are no other evidence-based methods of testing competency. Some states require practice hours as a continued competency requirement.

NCSBN does not break down pass rates by program type but it could be done.

2. How can we assure the NCLEX exam questions reflect current practice?

Currently, every three years NCSBN conducts a practice analysis and knowledge, skills, and abilities analysis. This process includes bringing 10-12 subject matter experts (SMEs) together for a series of discussions aimed at identifying the activities performed by entry-level nurses. Preparation work is done prior to convening the SMEs. The SMEs submit logs completed by entry-level nurses with less than 12 months of practice reflecting activities performed while providing care. They interview leaders of professional nursing organizations about the organization's position regarding entry-level nursing and any potential upcoming trends.

This group of SMEs, led by a nurse and statistician, formulate survey questions related to the identified activity statements. The survey is then sent to a representative sample of entry level nurses (approximately 12,000) who score each activity on how critical the activity is to their job and how frequently they do the activity.

Simultaneously, NCSBN conducts the knowledge, skills, and abilities study. During this study, a separate group of SMEs are convened to uncover the knowledge required to perform the existing activity statements. The knowledge statements developed by the group is developed into a survey. The survey is sent out to 6,350 nursing professionals (2,100 nurse educators; 2,100 nurse supervisors; and 2,150 newly licensed entry-level nurses). The survey recipients score the survey based on the importance of the knowledge statement in performing safe, effective entry-level nursing care.

Every NCLEX exam question must be linked to one of these validated knowledge/activity statements.

For example, the NCLEX exam questions have evolved over the past two 3-year cycles. About six years ago, the practice analysis showed a shift from acute care to

population/community based practice. Ensuring the NCLEX is responsive to changes in practice which is reflected in data collected during the practice analysis, scenarios on the NCLEX exam are representative of entry-level practice setting such as acute care, outpatient settings, population health, home care and other non-acute care settings. The current review has resulted in changes to the NCLEX exam that will appear in April. The new test plan will include a new NCLEX Integrated Process representing culture and spirituality processes.

3. How can nursing programs working on academic progression have access to the NCSBN workforce data?

The national data from the recent sample survey will be publicly available as long as the Forum on State Nursing Workforce Center is in agreement. (Permission for individual state data would be available from the state workforce centers.) The plan is to repeat the survey every two years. The data will be made available to researchers and others who send a short proposal to NCSBN with their data needs and rationale for requesting the data. It is the intention of NCSBN to honor as many of these requests as possible. NCSBN will also be working with the state boards to collect workforce data upon license renewal.

4. What is the role, if any, of NCSBN in regulatory oversight of out of state RN to BSN programs?

NCSBN has no formal position on oversight of these programs. Boards of nursing have an oversight role only if they regulate RN to BSN programs or if specific incidents or series of incidents prove to have an impact on public safety. Examples of regulatory red flags for a board of nursing to file a formal complaint are fraud (such as giving out false information about students completing the program) or reports of unsafe practices by faculty and/or students. In these cases, where the board does not regulate the program, the board would probably file complaints against the nurse that is the program director and/or individual faculty involved in the issue. The board could also notify the attorney general and accreditors to take action against the school.