

Welcome To Spring 2023 PA-AC NRP Collaborative Meeting

Friday April 28, 2023

8:30am-12:00pm

Welcome From Your Chair

Tiffany L. Conlin, MSN, RN, CMSRN, NPD-BC

AGENDA

0815-0830	Informal Networking	
0830-0840	Welcome & State of the Union	Tiffany Conlin
0840-0940	Taking Clinical Judgement from the Classroom to the Clinical Unit	Janice Nash
0940-1010	Academia Best Practices- What is Done to Prepare the Graduate	Brianna Blackburn
1010-1020	Break	
1020-1050	Corporate Best Practices- Creative strategies to support this milestone	Lindsey Ford
1050-1105	Using Your Vizient Data	Meg Ingram
1105-1150	Next Gen and Its Impact	Jason Schwartz
1150-1200	Closing	Amy Ricords

Taking Clinical Judgement from the Classroom to the Clinical Unit

Janice Nash, DNP, RN
Professor

Learning Outcomes

- Increase knowledge about teaching strategies focused on decision making and clinical judgement
- Consider strategies to foster success among graduate nurses

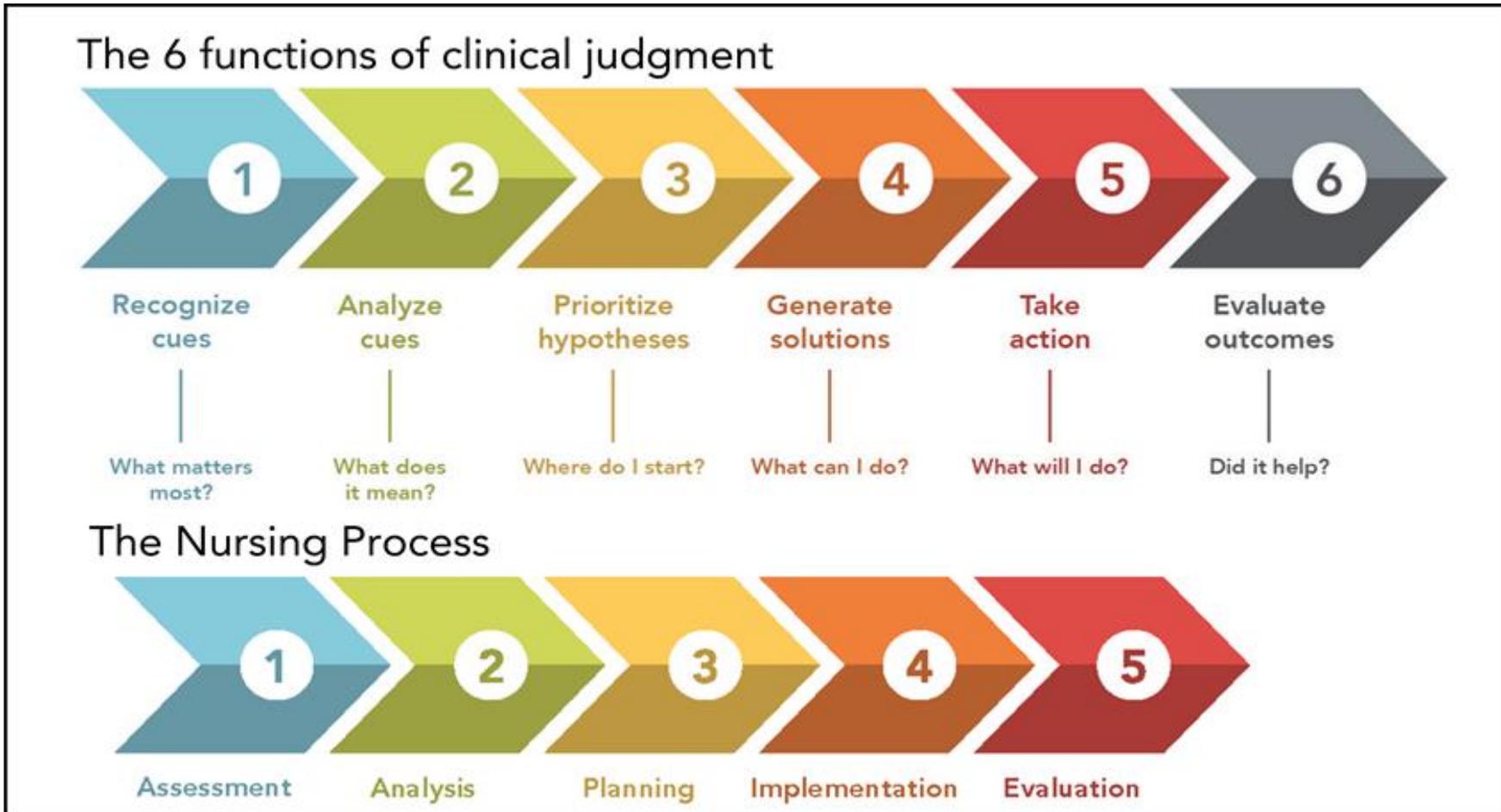
Challenges faced by Graduate Nurses

- Disrupted education
- Family dynamics and income
- Mental health
- Disparity gaps
- Changes in teaching and learning environment
- Coping, communication and resiliency skills
- Not practice ready
- NGN NCLEX

Changes in Nursing Education

- Learning and teaching styles
- Collaboration with peers
- EMR systems
- Simulation
- NGN style exam questions
- Concept maps

NCSBON Clinical Judgement Measure Model



Educating Practice Ready Graduate Nurses

- Decision making
- Communication
- Prioritization and delegation
- Organization and time management
- Self care
- Resiliency

Transition to Practice- Residency Activities

- Mentor-Check in-Encourage questions
- Social network support
- Mid-shift debrief
- Present clinical cases
- Apply clinical judgement model
- Priorities and delegation plan
- Identify potential complications and early indications
- Difficult conversations

Starting New Job and Taking NCLEX

- Continue with study plan
- Ongoing practice questions
- Practice exams
- NCSBON resources
- Test preparation resources
- Schedule test date

References

- American Association of Colleges of Nursing. The Essentials: Core Competencies for Professional Nursing Education (2021).
- Betts, J., Muntean, W., Doyoung, K., Shu-chuan, Next Generation NCLEX: Test Design. Next Generation NCLEX Newsletter Winter 2022.
- Baumgaertner, E. (2023). Students Lost One-Third of a School Year to Pandemic, Study Finds. New York Times.
- Heinze, J. (2021, February 25). *Anxiety, Depression Reached Record Levels among College Students Last Fall*. School of Public Health University of Michigan.
- Mutean, W. (2012). Nursing Clinical Decision Making. A literature Review.
- National Council State Board of Nursing (2018). Strategic Practice Analysis.
- Next Generation NCLEX-Big Changes and How to Prepare. Registered NurseRN.com
- NGN Talks: The Clinical Judgement Model and Action Model (2019). National Council State Board of Nursing.
- Sherill, K. (2019). Clinical Judgement and Next Generation NCLEX-A Positive for Nursing Education!. *Teaching and Learning in Nursing*.

Preparing the Nurse Graduate for the NCLEX-RN



The Academic Perspective

Brianna N. Blackburn, MSN, RN, CMSRN, NPD-BC, CNE

Instructor of Nursing, The Pennsylvania State University

PA-NRC Steering Council Academic Partner



PennState

Ross and Carol Nese
College of Nursing

Objectives

At the end of this presentation the learner will be able to...

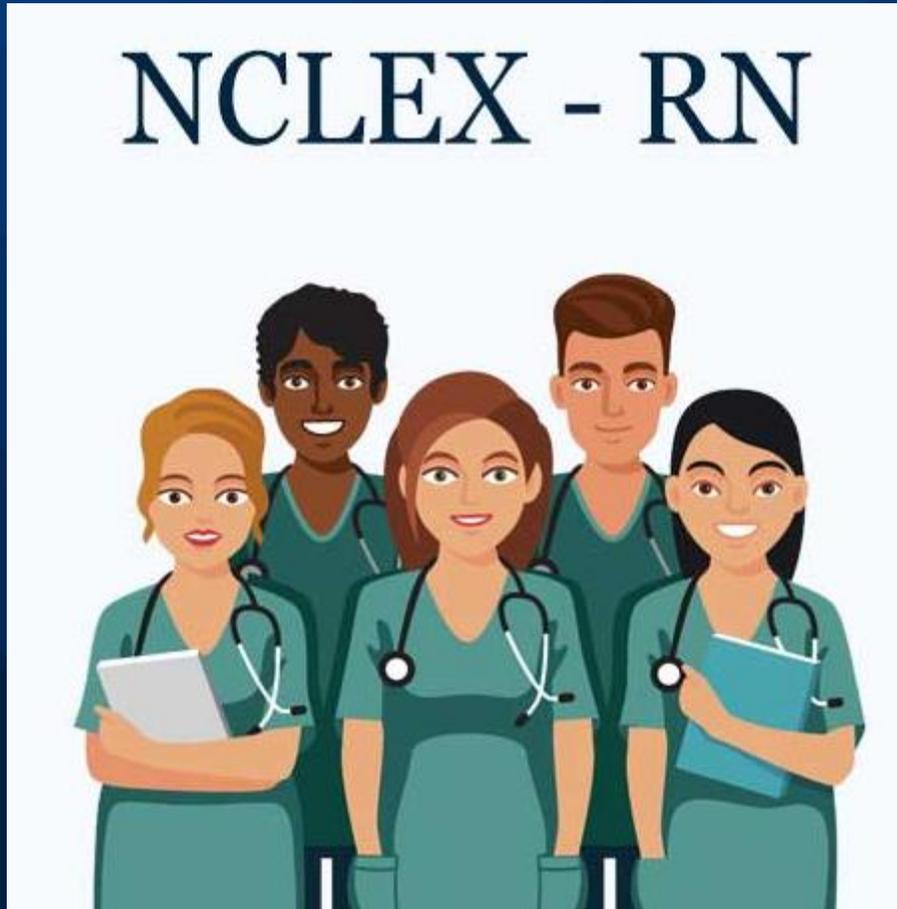
Describe current trends and challenges of NCLEX preparation & testing

Identify evidence based academic practices for NCLEX success

Discuss opportunities for collaboration with academic partners to support NCLEX success



Nursing Licensure

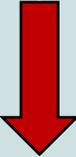


- **Academic Institutions**
 - NCLEX pass rates are a publicly reported metric impacting:
 - Recruitment efforts
 - Accreditation
 - Funding
- **Healthcare Organizations**
 - NCLEX outcomes impact:
 - Applicant pool
 - Hiring & onboarding timelines



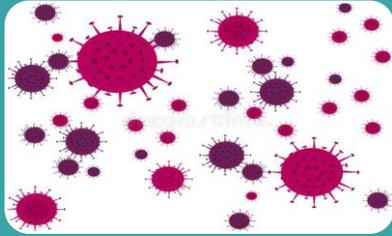
Degree	2021 First Time Pass Rates	2022 First Time Pass Rates
Diploma	79.5%	78.3%
Associate Degree in Nursing	78.8%	77.9%
Baccalaureate Degree in Nursing <i>(includes traditional and accelerated/2nd degree programs)</i>	86.0%	82.32%



Degree	2021 First Time Pass Rates	2022 First Time Pass Rates	2023+
Diploma	79.5%	 78.3%	?
Associate Degree in Nursing	78.8%	 77.9%	?
Baccalaureate Degree in Nursing <i>(includes traditional and accelerated/2nd degree programs)</i>	86.0%	 82.32%	?



Why & What's Next?



COVID-19

- Remote Learning
- Increases in leave of absences, illness, financial concerns



Shortages & Delays

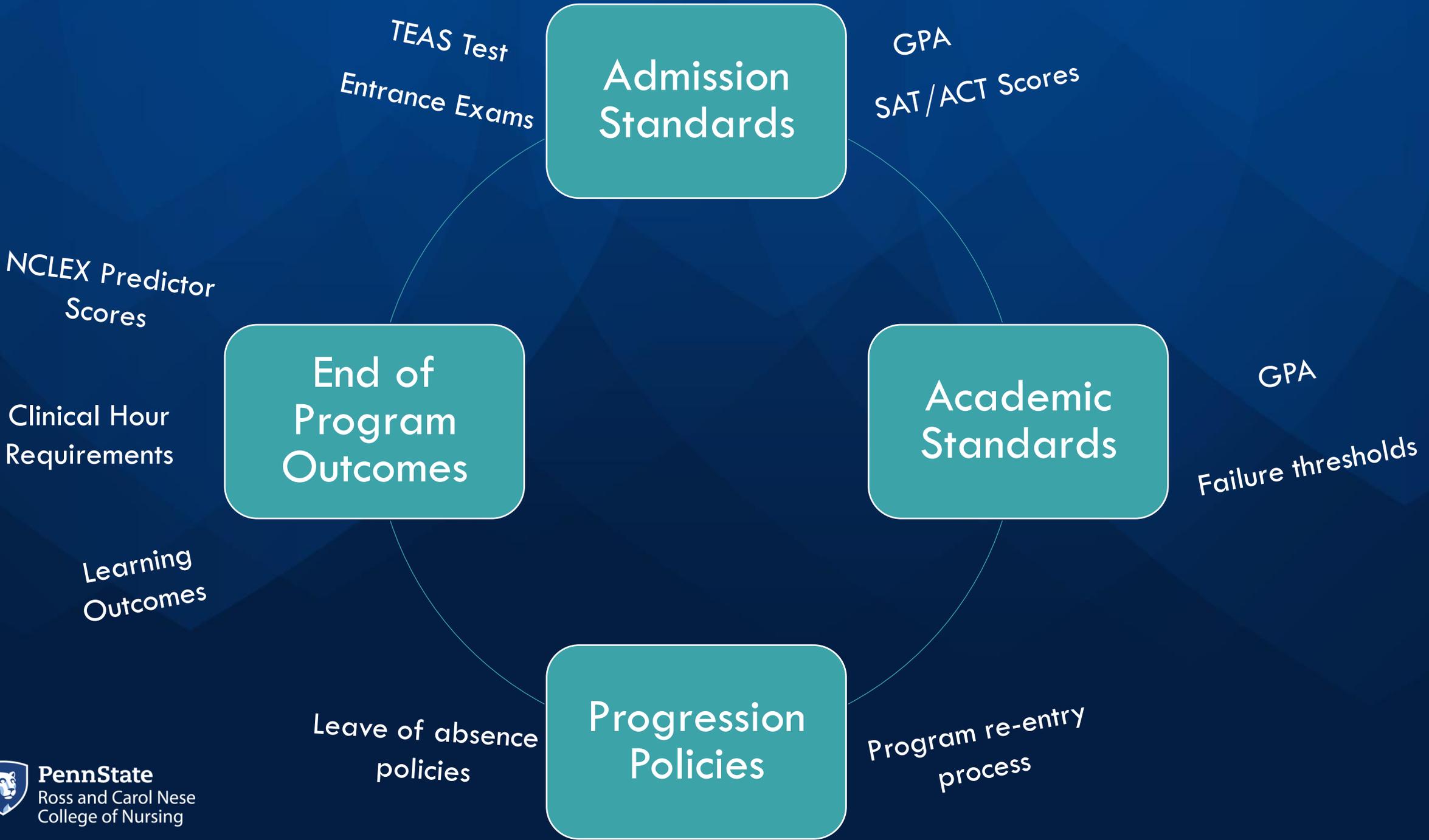
- Lack of qualified faculty/staff
- Testing timelines



New Challenges

- Next Generation NCLEX 2023
- Upholding current pass standards

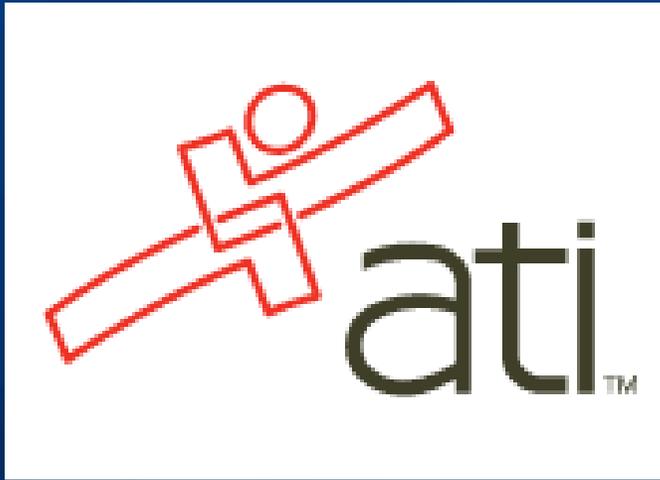




Common Interventions & Resources

- Tutoring/Academic Success Coaching
- Academic & Faculty Advisors
- Peer Mentoring
- Writing Centers & Library Access
- Disability Services/Accommodations
- International Student Support Services
- Living Learning Communities
- Faculty & TA Office Hours
- Study Groups
- Open Lab Hours
- Simulation
- Academic Progression Tracking
- NCLEX Style Testing
- NCLEX Prep Classes & Live Reviews
- Integrative NCLEX Programs





Services & Resources

- Practice Questions & Sample Tests
- Self-Paced Review Courses
- Content Assessments
- Customized Study Plans
- Tutoring/Coaching Services
- Predictor Exams
- E-Books
- Flashcards
- Study Guides
- Videos
- Mobile Apps
- Success “Guarantee”

Most platforms remain available to the student after graduation

The Missing Link



- Student focus is elsewhere
- NCLEX prep fatigue
- Students are unaware of their continued access to NCLEX prep resources
- Students are unaware of how to access these resources after graduation

That's where we come in 😊



PennState
Ross and Carol Nese
College of Nursing

Opportunity



- ✓ Identify the top 3 nursing schools represented in your Nurse Residency Program
- ✓ Reach out to your point of contact at those institutions & ask the “who, what, when, & how” questions (*next slide*)
- ✓ Inquire about support services at your organization
- ✓ Disseminate info to new hires



Questions to Ask Academic Partners

Who

- “Who is in charge of your program’s NCLEX prep resources?” (committee representative, faculty, etc.)

What

- “What NCLEX support services are available to students *after* graduation?”

When

- “When are these services available to your graduates and for how long are they accessible?”

How

- “How can these resources be accessed by graduates?”



References

- Morton, A. M. (2008). Improving NCLEX Scores With Structured Learning Assistance. *Nurse Educator*, 33 (5), 89S-91S. doi: 10.1097/01.NCN.0000336451.55036.03.
- *Nclex Pass rates*. NCSBN. (2022). Retrieved April 16, 2023, from <https://www.ncsbn.org/exams/exam-statistics-and-publications/nclex-pass-rates.page>
- Robinson, E., & Niemer, L. (2010). A peer mentor tutor program for academic success in nursing. *Nursing Education Perspectives*, 31(5), 286-289.
- *Top 5 NCLEX Review Courses (With Cost)*. (n.d.). Nurse.org. <https://nurse.org/articles/top-nclex-review-courses/>



Break

9:55am – 10:05am

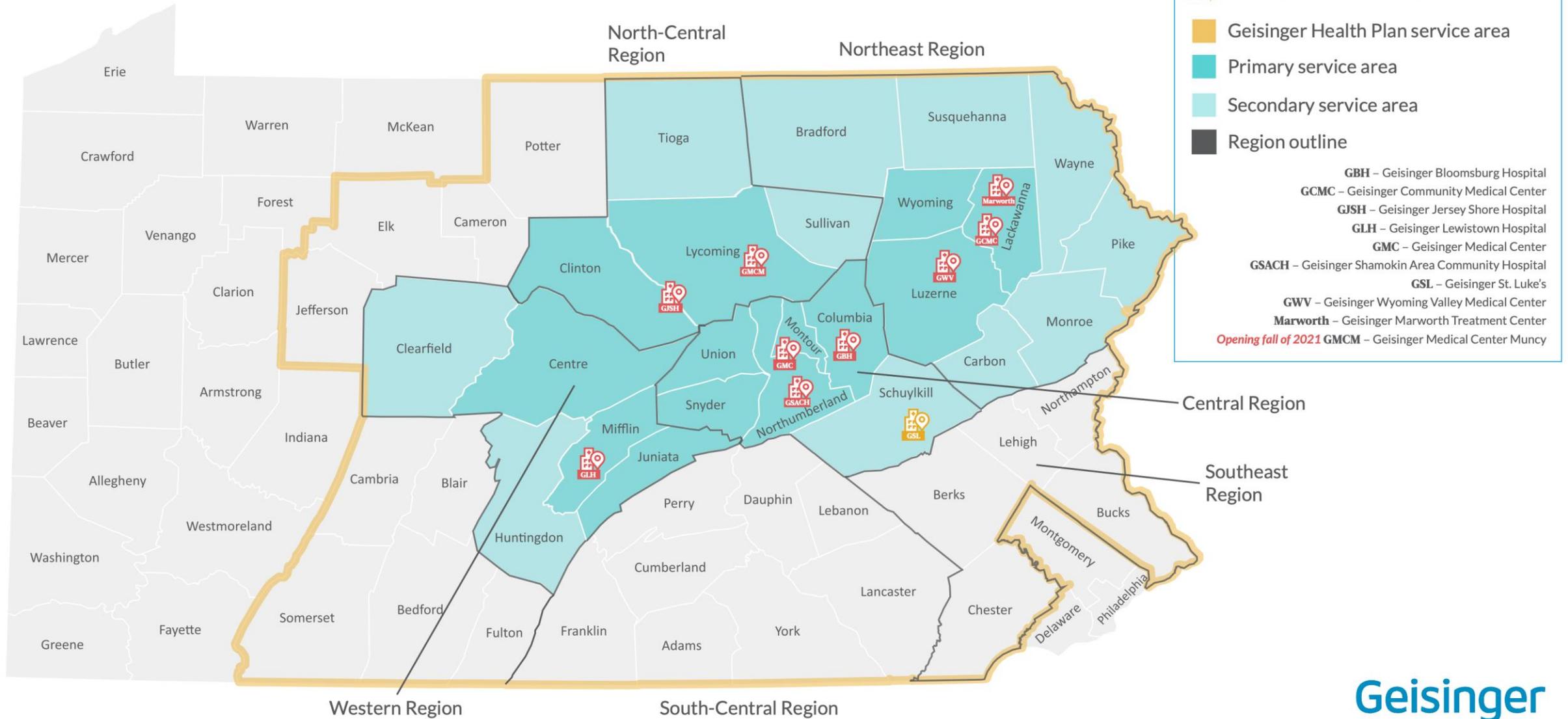


Corporate Best Practices- Creative Strategies to Support this Milestone

Geisinger

Lindsey Ford DNP, RN, NPD-BC
Director of Nursing Education & Magnet
System Nurse Residency Director

Geisinger service area



Making better health easy





Pandemic Impact

Lack of clinicals

Lack of experiences

Lack of hands on

Increased failure rates of NCLEX

Strategies for Success

Support for Successful NCLEX Passing



Workforce Development Director Reach Out



NCLEX program in addition to their university resources



Workforce Development Director Check-In

Check-Ins/Support

Nurse Manager

Nurse Educator

Nurse Residency Coordinator

Nurse Residency Mentor

Workforce Development Director

Well-being Resources

- Center of Well-being resources
- Employee Assistance Program
- Cabana Virtual Reality Support
- M-Path Peer Support Program

What is Peer Support?

Peer support is a growing movement in mental health recovery

Training **everyday people** – not just mental health professionals – to provide support

If you're struggling, you can connect with a peer who gets it – because **they've been there**

Enhancing Clinical Skills

-Individualizing orientation needs, extending time if needed



-Added skills review/equipment in orientation



-Incorporating simulation/skills in each NRP session



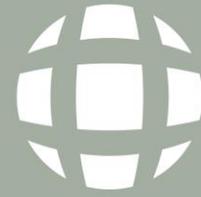
-Roving skill in-services scheduled each month

“Success is not final; failure is not fatal: it is the courage to continue that counts.” —*Winston Churchill*





Questions?



NCSBN

Leading Regulatory Excellence

Next Generation NCLEX: We Have Liftoff!

Jason A. Schwartz, MS
Director of Outreach, NCSBN



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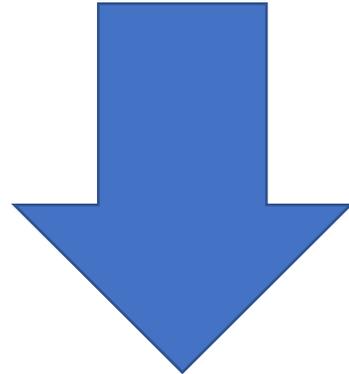
Overview

- Why did the NCLEX change?
- Biggest change – Clinical Judgment Case Study
- Everything else
- NCSBN resources
- Q&A

Why did the NCLEX change?

NGN origin story

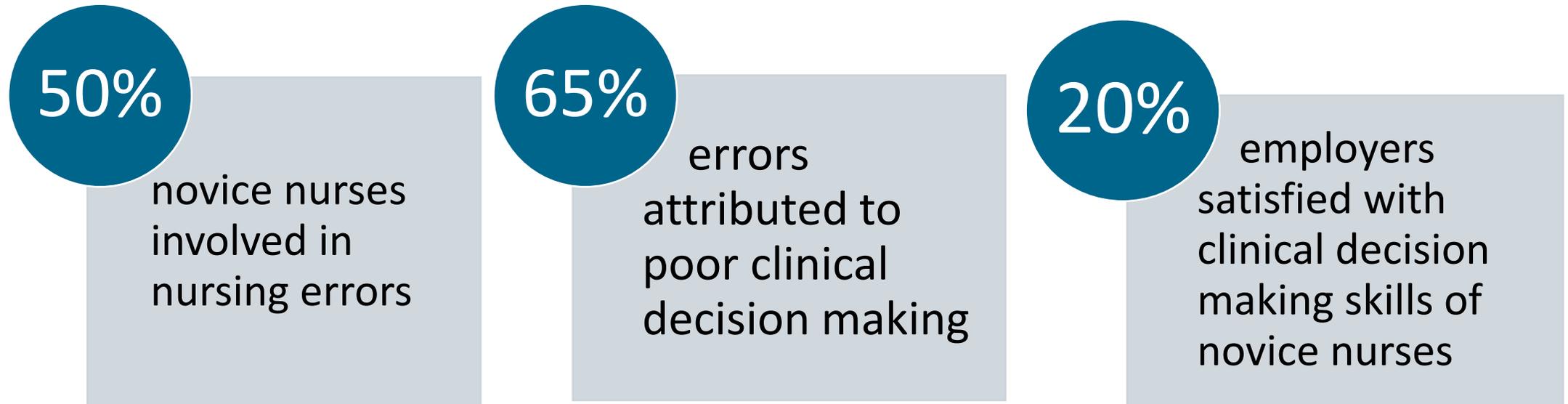
- **2012 NCLEX Examination Committee--**
“Is the NCLEX measuring the right things?”



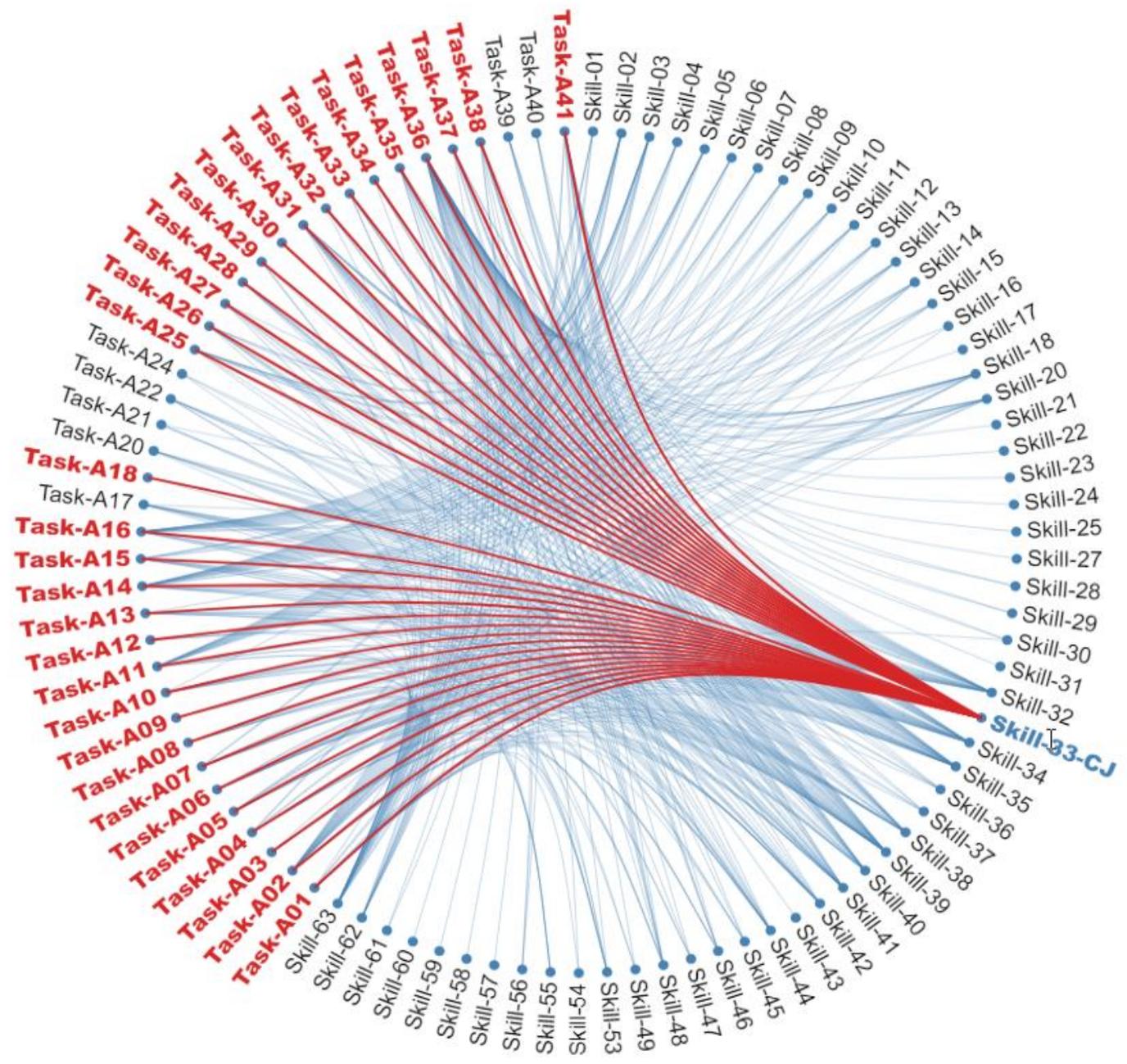
- Literature review
- Strategic Practice Analysis

Literature Review Findings

- Education regarding critical thinking, clinical decision making, and clinical judgment has already become a standard part of nursing curricula



- Clinical judgment, even at the entry-level, is critical to patient safety and public protection



Conclusions

1

Clinical judgment is an important and necessary skill, even at the entry-level

2

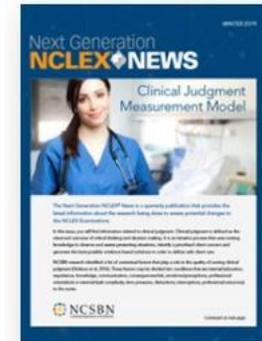
The current NCLEX addresses clinical judgment indirectly but is limited by the item types available

3

Providing a more direct, evidence-based measure of clinical judgment requires both additional research and the use of new item types



Measuring Clinical Judgment

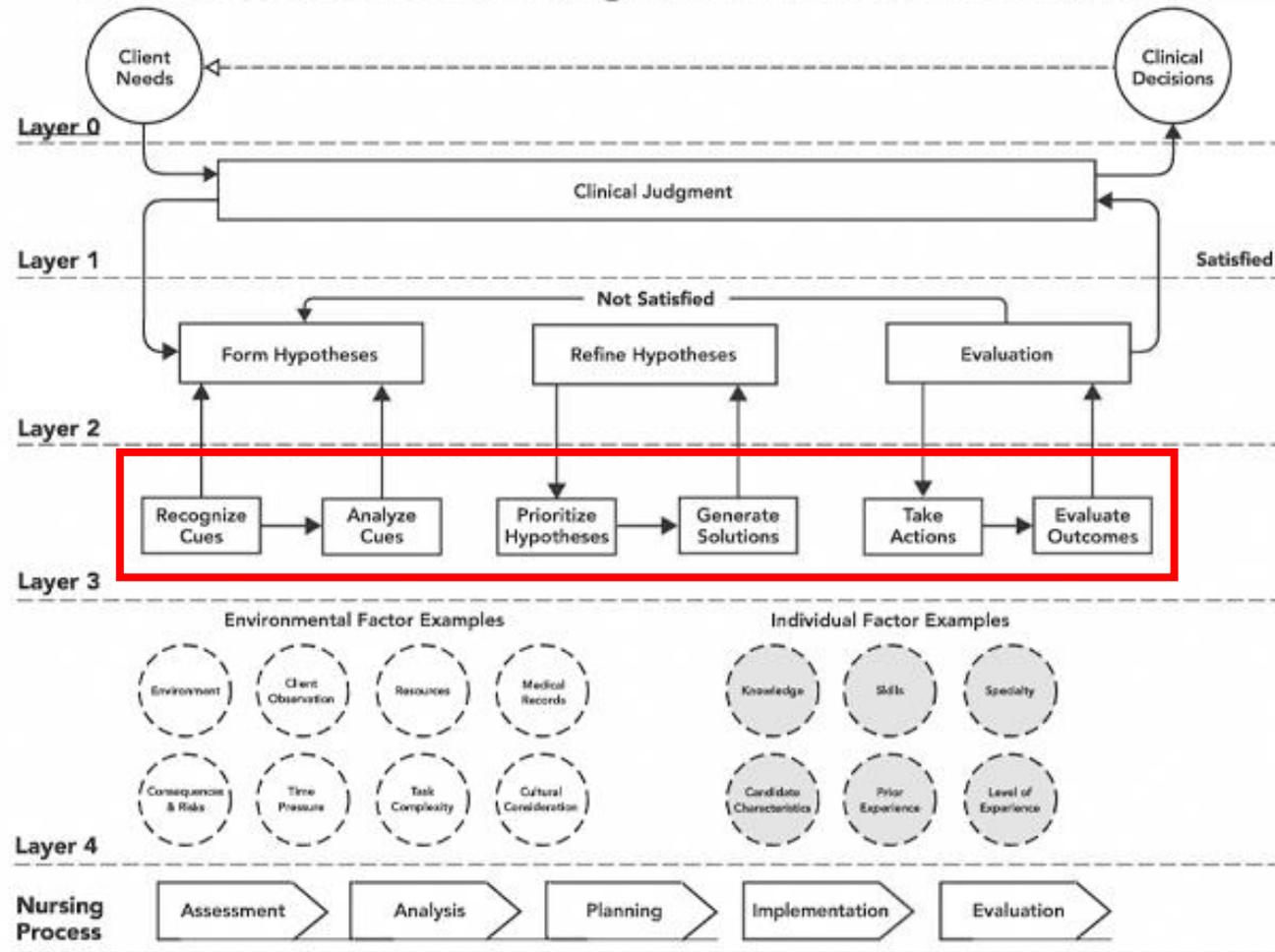


NGN News - Winter 2019

Topic: The NGN Clinical Judgment Measurement Model

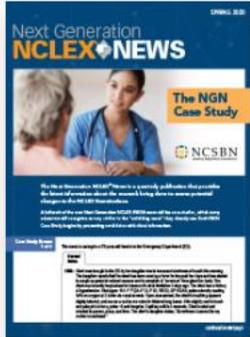
2019 | PUBLICATION

The NCSBN Clinical Judgment Measurement Model



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NGN Case Study



NGN News – Spring
2020

Topic: The NGN Case
Study

2020 | PUBLICATION

Sample Case Study

Case Study Screen 1 of 6

1

2

The nurse is caring for a 17-year-old male client who reports a recent injury to the left thoracic cage.

History and
Physical

Nurses'
Notes

Vital Signs

Laboratory
Results

3

reports in his left rib being struck by a mechanically pitched baseball in a batting cage last week. He has significant bruising and feels light-headed. He also reports having some intermittent pain in the left shoulder. He denies any shortness of breath, but has some discomfort in the left lower chest when taking a deep breath. He reports feeling abdominal fullness and is occasionally nauseous. Patient has no significant past medical history. His surgical history includes an orthoscopic repair to the left shoulder for a torn rotator cuff last year. He has not felt well enough to attend baseball practice since the injury.

4

5

6

7

➤ Which of the following assessment findings require **immediate** follow-up? **Select all that apply.**

- productive cough
- BP 90/50, P 116, RR 24
- intermittent left shoulder pain
- ECG showing normal sinus rhythm
- slightly diminished breath sounds on the left
- T 97.8° F (36.6° C), O₂ saturation 98% on room air
- Hgb 9 g/dL (90 g/L), HCT 27% (0.27), WBC 19,000/mm³ (19.0 x 10⁹/L)
- tenderness upon palpation and dullness to percussion over the abdomen

The nurse is caring for a 17-year-old male client who reports a recent injury to the left thoracic cage.

**History and
Physical**

**Nurses'
Notes**

Vital Signs

**Laboratory
Results**

Client reports injuring his left ribs after being struck by a mechanically pitched baseball in a batting cage last week. He has significant bruising and feels light-headed. He also reports having some intermittent pain in the left shoulder. He denies any shortness of breath, but has some discomfort in the left lower chest when taking a deep breath. He reports feeling abdominal fullness and is occasionally nauseous. Patient has no significant past medical history. His surgical history includes an arthroscopic repair to the left shoulder for a torn rotator cuff last year. He has not felt well enough to attend baseball practice since the injury.

The nurse is caring for a 17-year-old male client who reports a recent injury to the left thoracic cage.

**History and
Physical**

**Nurses'
Notes**

Vital Signs

**Laboratory
Results**

Patient appears pale and slightly diaphoretic. Large amount of bruising noted along the left torso and over the left upper quadrant (LUQ) of the abdomen. Patient is guarded and there is tenderness upon palpation and dullness to percussion over the abdomen. Slightly diminished breath sounds on the left, productive cough noted. Electrocardiogram (ECG) shows normal sinus rhythm.

The nurse is caring for a 17-year-old male client who reports a recent injury to the left thoracic cage.

**History and
Physical**

**Nurses'
Notes**

Vital Signs

**Laboratory
Results**

Vital signs:

- BP 90/50
- P 116
- RR 24
- T 97.8° F (36.6° C)
- O₂ saturation 98% on room air

The nurse is caring for a 17-year-old male client who reports a recent injury to the left thoracic cage.

History and Physical

Nurses' Notes

Vital Signs

Laboratory Results

Laboratory Test	Result	Reference Range
Hemoglobin (Hgb)	9g/dL (90 g/L)	Male: 13.2–17.3 g/dL (132–173 g/L) Female: 11.7–15.5 g/dL (117–155 g/L)
Hematocrit (HCT)	27% (0.27)	Male: 39%–50% (0.39–0.50) Female: 35%–47% (0.35–0.47)
White blood cell count (WBC)	19,000/mm ³ (19.0 x 10 ⁹ /L)	5,000–10,000/mm ³ (5–10 x 10 ⁹ /L)

- Which of the following assessment findings require **immediate** follow-up? **Select all that apply.**
- productive cough
 - BP 90/50, P 116, RR 24
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Recognize Cues

Identify relevant and important information from different sources (e.g., medical history, vital signs).

- What information is most important?
- What information is most important?
- What is of immediate concern?

Do not connect cues with hypotheses just yet.

What matters most right now?



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- Which of the following potential issues is the client at risk for developing? **Select all that apply.**
- stroke
 - hemothorax
 - bowel perforation
 - splenic laceration
 - pulmonary embolism
 - abdominal aortic aneurysm

Analyze Cues

Organizing and linking the recognized cues to the client's clinical presentation.

- What client conditions are consistent with the cues?
- Are there cues that support or contraindicate a particular condition?
- Why is a particular cue or subset of cues of concern?
- What other information would help establish the significance of a cue or set of cues?

Why?

Consider multiple things that could be happening. Narrowing things down comes at the next step.



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The nurse is initiating the client's plan of care.

- Complete the following sentence by using the list of options.

The nurse should first address the client's followed by the client's .

abdominal pain
Select...
abdominal pain
respiratory status
laboratory test results

Prioritize Hypotheses

Evaluating and ranking hypotheses according to priority (urgency, likelihood, risk, difficulty, time, etc.).

- Which explanations are most, least likely?
- Which possible explanations are most serious?

Item development should focus on ranking the potential issues and should use phrases such as “most likely.”

What's going on?

Where do I start?



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The nurse is speaking with the physician regarding the treatment plan for the client who was just diagnosed with a splenic laceration and a left-sided hemothorax.

- For each potential order, click to specify whether the potential order is anticipated or contraindicated for the client.

Potential Order	Anticipated	Contraindicated
echocardiogram	<input type="radio"/>	<input type="radio"/>
intravenous fluids	<input type="radio"/>	<input type="radio"/>
abdominal ultrasound	<input type="radio"/>	<input type="radio"/>
preparation for surgery	<input type="radio"/>	<input type="radio"/>
serum type and screen	<input type="radio"/>	<input type="radio"/>
chest percussion therapy	<input type="radio"/>	<input type="radio"/>
insertion of a nasogastric (NG) tube	<input type="radio"/>	<input type="radio"/>
administration of prescribed pain medication	<input type="radio"/>	<input type="radio"/>

Generate Solutions

Identifying expected outcomes and using hypotheses to define a set of interventions for the expected outcomes.

- What are the desirable outcomes?
- What interventions can achieve those outcomes?
- What should be avoided?

Focus on goals and multiple potential interventions—not just the best one—that connect to those goals. Potential solutions could include collecting additional information.

What could help?



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- The nurse has been asked to prepare the client for immediate surgery. Which of the following actions should the nurse take? Select all that apply.
- Mark the surgical site.
 - Provide the client with ice chips.
 - Obtain surgical consent from the client.
 - Perform a medication reconciliation.
 - Insert a peripheral venous access device (VAD).
 - Inform the client about the risks and benefits of the surgery.
 - Assess the client's previous experience with surgery and anesthesia.
 - Ask the client's parents to wait in the waiting room while you discuss the plan of care with the client.

Take Action

Implementing the solution(s) that addresses the highest priorities.

- Which intervention or combination of interventions is most appropriate?
- How should the intervention(s) be accomplished (performed, required, administered, communicated, taught, documented, etc.)?

For “how” questions, ensure that the elements from the scenario are what determines the approach. Avoid memorized or “textbook” procedures. The item stem and/or the responses should include action verbs.

What do I do?

How do I do it?



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- Click to highlight the findings below that would indicate the client is not progressing as expected.

Progress Notes

Client is post-op day #3 after a splenectomy and is able to ambulate in the corridor 3 to 4 times daily with minimal assistance. The client has clear breath sounds with a left chest tube in place attached to a closed-chest drainage system. Tiding of the water chamber noted with deep inspiration. **The client is refusing to use the incentive spirometer stating it causes left-sided chest pain.** **The client is utilizing prescribed patient-controlled analgesia (PCA) device maximally every hour and continues to have intermittent nausea with some vomiting.** Adequate urine output. Abdominal surgical incision site with dressing is clean, dry, and intact with no erythema, edema or drainage noted to site.

Evaluate Outcomes

Comparing observed outcomes against expected outcomes.

- What signs point to improving/declining/unchanged status?
- Were the interventions effective?
- Would other interventions have been more effective?

Item development should focus on the efficacy of the intervention(s) from the previous items.

How'd it go?



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Case Study – Summary

- Real-world nursing scenario
- Six items with clinical judgment focus (in order):



- Setting – Wherever entry-level nurses are
- Eligible content – Anything in the Test Plan

Everything Else

Test Content

Several new item types

- Trend items
- Bowtie items
- Others

 Fall 2019/Spring 2021

Scoring

Partial credit will apply!

- New clinical judgment items
- “Old” select all that apply items

 Summer 2021

Test Design

Composition of the exam

- How much new stuff?
- How much old stuff?
- How long is the test?
- Etc.

 Winter 2022

Test Plans

Changes for 2023-2026

Exam	%-ages	Details
NCLEX-RN	Y	Y
NCLEX-PN	N	Y

Passing Standard

No changes for 2023-2026

Exam	Passing Standard
NCLEX-RN	0.00
NCLEX-PN	-0.18

NCSBN Resources

ncsbn.org





NGN News - Summer 2022

Topic: Overview of the 2021 PN Practice Analysis

2022 | PUBLICATION



NGN News - Spring 2022

Topic: Overview of the 2021 RN Practice Analysis

2022 | PUBLICATION



NGN News - Winter 2022

Topic: NGN Test Design 2022 | PUBLICATION



NGN News - Fall 2021

Topic: NGN Case Study and Stand-alone Comparison

2021 | PUBLICATION



NGN News - Summer 2021

Topic: Scoring Models 2021 | PUBLICATION



NGN News - Spring 2021

Topic: Stand-alone Items 2021 | PUBLICATION



NGN News - Fall 2020

Topic: Licensed Practical/Vocational Nurses

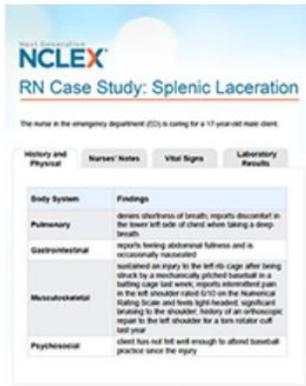
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NGN News - Summer 2020

Topic: Layer 4 of the NCJMM

2020 | PUBLICATION



Sample Questions

Experience the NGN's new item types with our sample pack.

- 3 RN Case Studies
- 2 PN Case Studies
- Additional examples

[FREE DOWNLOAD >](#)



Exam Preview

See how the new item types fit into the overall exam with our exam preview.

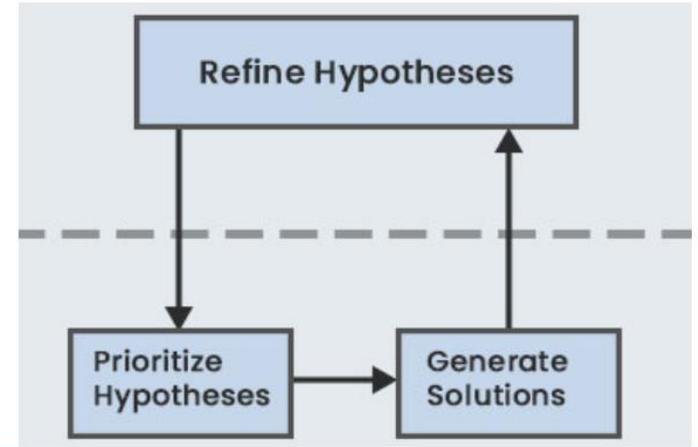
[FREE DOWNLOAD >](#)



Take the NGN Tutorial



The Secret to Computer Adaptive Testing



Clinical Judgment Measurement Model

**Live
Q&A**

Ask away!

**Anytime
Q&A**

jschwartz@ncsbn.org

Closing

Amy H. Ricords, MEd, BSN, RN, NPD-BC

PA-AC Director of Nursing Professional Advancement



Evaluations



COMPLETE YOUR
EVALUATION BEFORE
FRIDAY MAY 12TH



PLEASE PROVIDE ANY
COMMENTS/QUARTERLY
CONTENT TOPIC IDEAS!



EVALUATION LINK WILL BE
EMAILED THIS
AFTERNOON.

Calling for Nominations

We are headed into the 2023-2024 term and looking for interested individuals to fill the following Steering Committee positions:

1. Co-chair
2. Coordinator Member
3. System Coordinator Member (2nd position)

Please contact Amy if you are interested! Deadline is May 5th



Mark Your Calendars!

- June 23, 2023 Summer Collaborative Meeting 8:30-12pm VIRTUAL



Thank you!

Speakers
Steering Committee
To our members and your
commitment to making
Nurse Residency AWESOME!

Committee Role	2022-2023 Term
Chair	Tiffany Conlin (UPMC Magee)
Co-Chair	Elizabeth Holbert (Penn State Hershey Medical Center)
Past Chair	Jeanette Palermo (Thomas Jefferson)
Director Member	Lindsey Ford (Geisinger Medical)
System Coordinator Member	Teddi Porter (Excelsa Health)
Coordinator Member	
New to Vizient Member	Cindy Liberi & Lisa Sheehan (UPMC)
Networking Lead	Janice Gibson (Jefferson Health, Northeast)
Academic Partner	Brianna Blackburn (Penn State College of Nursing)

Thank YOU!

Connect with us!



**Jennifer
Gimbel, MBA**
Executive Director,
PA Action Coalition
jhorn@phmc.org



Amy Ricords,
Director of Nursing
Professional
Advancement
aricords@phmc.org



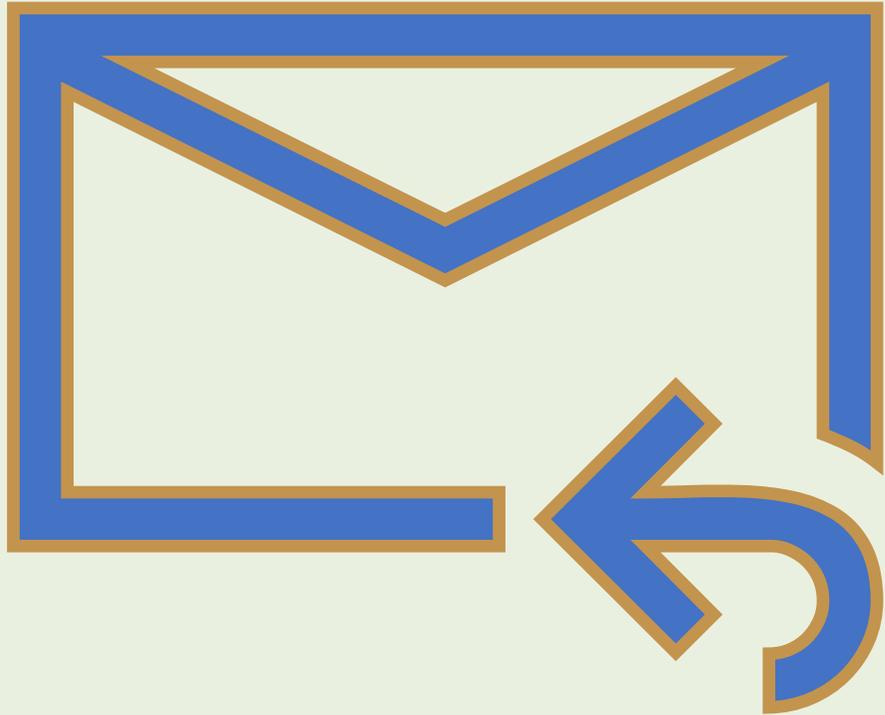
Saumya Ayyagari,
MSN, MPH
RN Workforce
Development Manager
SAyyagari@phmc.org



Zaharaa Davood,
MPH
Senior Manager, PA
Action Coalition
zadavood@phmc.org



Andrew Riblet
Events and Membership
Coordinator
ariblet@phmc.org



How Can We
Support You?

aricords@phmc.org