Achieving NCLEX Pass Rate Stability: One School’s Experience
What Are the Issues Currently Impacting NCLEX Pass Rates?

- Accreditation/State approval requirements
- Increasing difficulty level in passing rates
- Complexity & amount of information
- Program variability – curriculum
- Faculty shortage and limited education knowledge
- Quality clinical access
- Diverse student populations with unique challenges –
Questions Raised

- Whose responsibility is NCLEX passage?
- Curricular preparation used to be enough to pass NCLEX – why isn’t it now?
- Now reviews are being required and responsibility has shifted more to students
- We are often better at predicting passing than failing – does this reflect the wide range of variables that impact passing?
- Does the use of forced remediation mask the underlying problem?
- Hi stakes testing – is it appropriate or fair?
What the Literature Says About Predictors

- NET/TEAS overall and subscales
- Adult Med Surg 1 & 2
- Fundamentals & Pathophysiology more predictive than other 1st semesters courses
- HESI Exit Exam/ERI content exams commonly used
- ATI MED SURG – Strongest Correlate (McCarthy Dissertation)
- Remediation Efforts
- Academic variables - Science courses vary in predictability, college GPA, ACT composite, science and math
- Withdrawing/failing a science course
- Repetition of predictive exams to achieve benchmarks diminishes predictability
- End of program exams are more designed to predict readiness than failure
Faculty Related Factors Negatively Impacting NCLEX – what does the literature show?

- Limited knowledge of the NCLEX process/blueprint
- Use of canned test bank questions
- Limited test writing skills at the upper levels - Application/Analysis
- Limited ability to understand statistical analysis of exams to improve quality
- Detailed study guides for exams
- Presentations/slides geared to the exams – decreases understanding and connection of concepts across content
- Absence of comprehensive final exams
- Focus on defending items in test review versus teaching test taking skills
Student Related Information

- **Student Perceptions of NCLEX**
  - “Faculty cared more about NCLEX repeats than students”
  - “Did not want to know their risk status”
  - “May take the first time to see how they do”

- **Student Factors Negatively impacting NCLEX**
  - Working Hours
  - Role Strain
  - Self Esteem
  - Fatigue

- **What Students should do**
  - Assume some accountability
  - Must see course work/clinical/testing as essential from the beginning to pass NCLEX
Intervention Strategies in the Literature

- Reliance on external testing for progression and graduation
- Repetition of predictive exams to achieve benchmarks
- Remediation
- Curriculum review
- Building test taking skills in students.
- Improving faculty skills at test writing and item analysis
Program Background

- Midwest urban city – 350,000
- Small Catholic University
- Baccalaureate program
- 8 other AD/BSN programs in the metro area
- Admits 2X/year, N= 32-34/class
- Mean age = 26
- 3-6% male, 5-10% minority; 2-3% ESL
- Variable NCLEX pass Rates 2000-2007
FRAMEWORK USED

• KATTS – McDowell (2008)  
  Student Focused
  • K – Knowledge
  • A – Anxiety
  • TTS – Test Taking Skills

• FATPACK – Student & Program Focused
  • F – Faculty
  • A – Anxiety
  • T – Testing
  • PA – Process of Admissions
  • CK – Curriculum/Knowledge
Faculty Development

• Test question development training
• Understanding of test statistical analysis into decision making and item overhaul (ID, KR-20, DI/Point Biserial)
• Construct exams using statistical data
• NCLEX participation
• Re-evaluation of faculty teaching and student evaluation
• Classroom strategies that promote critical thinking and active student participation
• Implementation of instructor designed application learning activities
• Faculty mentoring of student success
• Test blueprints that are general
Faculty

- Faculty use of application/analysis in class
- Faculty knowledge of NCLEX exams, process, changes
- Item writing workshops/work for NCLEX
- Meticulous evaluation of tests with item analysis
- Hold students accountable for past learning – don’t reteach
- Clicker systems – validate understanding in class
- Faculty Test Construction
- Relate theory to practice in classroom and clinical
- Teaching strategies to ↑ critical thinking
Anxiety

- Identify early
- Bolster confidence
- Positive self talk
- Increase student control through remediation plan
- Tutoring – start early to build confidence
- Relaxation/Imagery
- Adapting early in the program to computerized NCLEX style testing
- Counseling referral
- When taking practice NCLEX questions don’t grade!
Testing Program

• Teaching test taking strategies starting in first semester
• Test Reviews on all exams integrating test taking strategies
• Computerized testing with NCLEX style questions
• Including standardized assessments in course grade
• Test software to track stats by question and exam over time
• Ability to construct test to specifications of categories and difficulty level
• Integrated standardized testing – at midterm and end of course – part of the grade – benchmarks over time, reward for higher scoring
• Graduates to test within 1 month of graduation
Test Construction

• Test construction committee
• Development of faculty test banks - NCLEX style with emphasis on application/analysis
• Elimination of commercial test banks
• Testing software in NCLEX format/alternate items
• Test Review Committee
Teaching Test Taking Strategies

• Departure from recall
• Test taking skills in first semester
• Identify key terms/words
• Understanding that the stem drives the answer – isolate the problem
• Navigating questions with a negative.
• Prioritizing
• Avoiding personal biases
• Practice
Process of Admission

- Increase applicant pool
  - Talking Points for recruiters
  - LPN – BSN Bridge
  - Early Admissions

- Minimum requirements
- Interview all candidates
- Interview scoring grid
  - Prerequisites & Gen Ed GPA (40%)
  - Calculation skills
  - Writing skills
  - Penalty for repeated courses
Curriculum/Knowledge

- Curriculum Review
  - Curriculum review with the NCLEX blueprint - Gaps and overlaps
  - Review of course/concept sequencing
  - Leveled concepts at increasing complexity across levels – requires constant faculty dialogue.
  - No front loaded capstone
  - Standardized testing across curriculum with integration into the grade
  - System for predicting at risk students
  - Integrated NCLEX prep course within the curriculum- test taking strategies, identify remediation areas, acquaint with NCLEX process
  - Integration of Pharmacology and Parenteral therapies into clinical and specialty content at an application/analysis level.
  - Focus in L & M on delegation, quality improvement, application of management theory, conflict resolution, managed care, prioritization
  - Basic Care and Comfort
Curriculum/Knowledge

• Policy Review
  • Minimal requirements for admission
  • Grading scale – 75% to pass on all courses
  • Grading Scale – no rounding at minimal passing level
  • Weight of testing for course grade ↑ each level
  • Eliminate significant sources of “extra credit/padding points from non-testing sources.
• Limit course failures
• Required remediation plan failed exams
Curriculum/Knowledge

• Classroom/Clinical
  • Make accountable for previous learning
  • Post critical thinking or prep questions to prepare for class and integrate within
  • Integrate application exercises to allow concept application in class BEFORE testing
  • Integrate higher level questions in class
  • Clicker systems to allow faculty to assess overall understanding of the students
**Fourth Semester Predictor**

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<th>Name</th>
<th>Midterm NSG 4084*</th>
<th>Predictor #1</th>
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* MUST Have an A or B
Graduation Class & Academic Year NCLEX Performance

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<th>Date of Graduation</th>
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Recommendations

• Curriculum review/evaluation
• Develop criteria for at risk students
• Practice and remediation at every level
• Require practice exams for standardized tests if available
• Review exams at all levels for application/analysis questions
• Individualized study plan for each student.
• Evaluate teaching strategies – How is critical thinking/application/analysis integrated in every class/clinical area?
• Build faculty test writing and analysis skills
Recommendations

• Constructive test reviews
• Review the stats on all test questions – do any need to be reworked?
• How is the test blueprint developed in every course? Reintegrate Basic Care & Comfort and Pharm & Parenteral Therapies in every course
• Track exams over time to look for performance consistency and class variance
• Adopt program policies that support academic rigor
Lingering Controversies

• Should progression/exit exams – all or none (high stakes) be used?
• Are standardized tests reflective of what is learned in the curriculum? if not how can their use be valid? If so why can’t they pass them - is the curriculum or its implementation be the issue?
• SBON response to pass rates
• Accreditation response to pass rates
• Legal liability
• Hiring faculty with educator skills
References


Oklahoma Board of Nursing (2003). NCLEX pass rate task force report and recommendations.

Pabst, M. K., Strom, J., & Reiss, P. J. (2010). Use of focus groups to elicit student perception of NCLEX-RN preparation. *Journal of Nursing Education. 49* (9); 534-537.


