

LEADER LEADER

INTERVIEW:

An Education Consultant's Firsthand Experience with the International Center for Regulatory Scholarship (ICRS)



In the fall of 2019, NCSBN piloted an exciting new program called the International Center for Regulatory Scholarship (ICRS). The ICRS program promotes collaboration, innovation and new ideas for the protection of the public and the future of professional regulation. Providing unprecedented opportunities for regulators from diverse jurisdictions to learn, interact and collaborate, the program fosters out-

standing leadership development, the acquisition of advanced knowledge and skills, and the generation of regulatory evidence.

Alexandra Duke, DNP, RN-BC, CEN, CHSE, CNEcl, EBP-C, has been a nursing education consultant at the California Board of Registered Nursing since April 2019. Though she has been a registered nurse (RN) for 13 years, she is relatively new to the field of nursing regulation. In the fall of 2019, Duke signed up for three courses in the ICRS pilot.

What are your general duties at the California Board of Registered Nursing?

My role is to support the California Board of Registered Nursing's (BON) mission of public protection, which is the broad goal of what we do at the board. Some of my individual responsibilities include consulting on regulatory proposals in legislation, specific to nursing programs and RN licensure. I work with nursing programs to review self-study reports in preparation for approval visits, and I also conduct continuing approval visits for both prelicensure and graduate nursing programs. In addition to those responsibilities, I provide ongoing support to program directors and deans on day-to-day nursing education issues that may come up with individual schools. Otherwise, I am also responsible for representing the BON when attending frequent regional and local meetings.

How did you hear about the ICRS program?

As a new consultant with the BON, we were provided with information that NCSBN offers to novice nurse regulators. When I had gone onto the NCSBN

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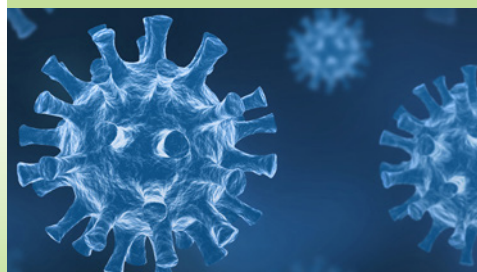
Q & A

Q: Does NCSBN have any resources for educators during this COVID-19 crisis?

A: Yes! NCSBN has a dedicated **COVID-19 website** that is filled with information of interest to nurse educators. We encourage you to explore the website, in depth, as there is a lot of information available. However, here are a few resources that might be especially valuable to educators:

1. As of May 4, most Pearson Vue testing Centers are open and are following CDC guidelines for social

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Interview: Alexandra Duke continued from page 1

website to look for additional resources and information from the organization, I was very intrigued by the work they were doing. From there, I learned that they were offering the ICRS program. **Sally Hamlin, MA**, (ICRS program manager, Nursing Regulation, NCSBN) provided me with information on the ICRS pilot, and based on the description and what the program had to offer, I thought it would be a perfect fit for me.

What interested you about the ICRS program?

I am very interested in scholarship, and I am also working on my PhD at the University of Nevada, Las Vegas. My Long-term goal is to become a nurse scientist and to conduct research that will hopefully inform some decision making by regulatory boards and legislators. Specifically, I want to generate evidence in the fields of simulation and nursing education. I am really interested in how simulation can be used to promote nursing faculty competence, and in generating evidence to support some legislation in states across the country. I thought that, in order to fulfill this goal and launch my program of research, the ICRS program seemed to be a great opportunity.

What prompted you to take the Role of the Education Consultant course?

The Role of the Education Consultant course was excellent because we, as students, are getting all the specific tools that we need to become scholars. For example, the writing assignments **Nancy Spector, PhD, RN, FAAN**, (director, Regulatory Innovations, NCSBN) gave us were organized in a way that would help us to hopefully one day publish in the field of nursing regulation. That's what really prompted my desire to take the course, the fact that it was going to provide me with specific knowledge and skills that I needed to really launch my career in regulatory science.

Something else that I think is important: as a new education consultant, it's easy to struggle with understanding the complexities of the role itself. Because it is such a new specialty of science, there really isn't a lot of well-defined training programs for nurse regulators. So, when I learned about this two-part ICRS course on the role of the education consultant, I thought it would be a terrific opportunity for what I needed at the time.

Could you talk about your experience in the course?

There were weekly discussion posts focused and geared toward what a nursing education consultant needs to know for their role. We received a lot of feedback from faculty. We were also required to interact and respond to other students in the course, and a lot of these other students have leadership roles in regulatory agencies across the country. That was ideal, because we could easily bounce ideas off one another. I really appreciated the fact that it was open to regulators across the country. Because nursing practice and regulation across the country are so different, I think it's important for us to not get stuck in our silos of how we do things in our individual jurisdiction or state. I really appreciate how we were able to network and collaborate with other members across the country. It was an eye-opening course.

What did you take away from the course?

I have been able to take some of the knowledge that I have gotten from this course to improve what I am doing in my practice as a consultant for the California BON. I was even able to improve a couple of my processes based on some of the activities that some of other regulators were doing in their jurisdictions. I also learned best practices when it

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“That’s what really prompted my desire to take the course, the fact that it was going to provide me with specific knowledge and skills that I needed to really launch my career in regulatory science.”

– Alexandra Duke



Interview: Alexandra Duke continued from page 2

comes to continuing approval visits and solving complex problems within nursing education. We were provided with great templates and easy-to-use tools that I was able to adapt to my practice as a nurse regulator and plug into what I'm doing every day for my BON.

Which other ICRS courses have you taken, or in which courses are you currently enrolled?

I also took Administrative Law: Part 1 and the Fundamentals of Research. Both courses were phenomenal and informative. **Brendan Martin, PhD**, (associate director, Research, NCSBN) was so knowledgeable about research and presented it in a way that—for someone who isn't familiar with research procedures—was easy to understand and learn. I really appreciated that. He gave great feedback that I was able to integrate into one of my research projects for my post-doctoral work, too. It was a lot of work, but it was very informative and helpful in terms of learning how to become a researcher.

The Administrative Law course was very interesting because it's not something that nurses are as typically well-versed in, in terms of really understanding legal proceedings and things of that nature. **Eileen Fry-Bowers, PhD, JD, RN, CPNP-PC, FAAN**, (associate professor at the University of San Diego), was very knowledgeable and had a way of presenting the content with case studies that really helped to enhance my learning.

What are your next steps?

I received a grant from NCSBN's Center for Regulatory Excellence, and I am excited that I will be able to use some funding, in addition to what I've learned in ICRS, to hopefully develop a publication. My next step is to work on a project that will allow me to publish within the nursing regulatory environment. For the ICRS, I plan on taking Administrative Law: Part 2 and the Advanced Governance course.

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Q & A



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distancing, screening of candidates and center personnel and cleaning and disinfecting of the center. The decision to reopen these centers speaks to the unprecedented need for nurses and their importance in the health care system during this time of global pandemic. Some changes will be made to our testing program to enable testing to resume. You can find some information about the **[COVID-19 impact to NCLEX candidates here](#)**. Precautions are being made to keep both test-takers and personnel working in the testing centers safe. On April 8th, 2020, NCSBN hosted a special **webinar for educators on COVID-19 and the NCLEX**. This recording can now be [accessed online](#).

2. Every day we update our **[Changes in Education Requirements](#)** document, which reflects any changes that states have made because of COVID-19. Many of you will find this particularly valuable.
3. NCSBN and the National League for Nursing have disseminated widely a **[joint statement](#)** calling for flexibility of nursing education programs, accreditors, boards of nursing and practice during this crisis.
4. In collaboration with many nurse leaders, NCSBN has developed a **[practice-academic partnership model](#)**, endorsed by 10 nursing organizations, to be used during these unprecedented times. So far a few states are using this model very successfully and more are considering adopting this model. ♦

COMING SOON:

ICRS Offers Free Nursing-specific COVID-19 Online Short Courses



Presented with the critical need to provide new, established and returning nurses with training and resources during the coronavirus pandemic, NCSBN's International Center for Regulatory Scholarship (ICRS) will offer a series of free, online COVID-19 courses. Launching soon, these short courses will cover topics such as how to properly don and doff personal protective equipment (PPE), how to care for COVID-19 patients and how to protect patients and their families from coronavirus hoaxes and conspiracy theories. To self-enroll in one or more of these free COVID-19 online courses, please visit: catalog.icrsncsbn.org. For more information, please email icrs@ncsbn.org.

Interview: Alexandra Duke continued from page 3

You are active in the private Facebook group for ICRS participants. What makes this Facebook group valuable to you?

What I like about the Facebook group is that the administrators post a lot of very interesting articles that are pertinent to nurse regulators, especially other countries', issues, too. For me, I really value the opportunity to have more of a global perspective because those are perspectives that we often don't consider in our day-to-day practice [in the U.S.]. For example, I never thought before about how nursing was regulated in Nigeria. In my short time working in nursing regulation, I can see we sometimes work in silos, so I just think that it is important for us to have a more global perspective.

To whom would you recommend the ICRS program and why?

I would consider it for any novice nurse regulator and for seasoned nurse regulators as well. For novice nurse regulators, the program is perfect because it gives you a structure for learning. Not only that, it also helps you to develop a blueprint for your own professional portfolio. Again, there isn't a lot of information out there on the specialty of nursing regulation, so as someone who is new, it really helps to see what those competencies are, and what kind of educational opportunities I need to find myself in order to meet those objectives. As a novice, that's what I really liked.

I would highly recommend the program even for experienced regulators. For example, I was able to take information I learned back to my colleagues at the BON, and they were always interested. I think, just based on my interactions with them, and presenting some of the best practices of what I have learned from each course, they are in turn learning how to improve their practices and see how they can use evidence from NCSBN to better serve citizens of the state. As nurses are expected to practice using the best evidence, the same goes for regulators. In order to serve the public and our consumers, we really need to be using the best evidence. That is why I recommend the ICRS program for both novice and experienced regulators.

The ICRS pilot ends in fall 2020, at which point it will open enrollment to the public, both nationally and internationally. To learn more about the ICRS Certificate Program, including course information and how to apply, visit the official [ICRS homepage](https://catalog.icrsncsbn.org) or contact icrs@ncsbn.org. ♦

"I would highly recommend the program even for experienced regulators."

– Alexandra Duke

CORONAVIRUS DISEASE COVID-19

Important Information

On March 11, 2020, the World Health Organization declared Coronavirus Disease 2019 (COVID-19) a global pandemic. NCSBN is carefully monitoring developments of this pandemic and has created webpages dedicated to updates on COVID-19 and its impact on nursing regulatory bodies (NRBs).

On the main [COVID-19 information webpage](#), NCSBN has gathered COVID-19 information relevant to:

- State and emergency responses regarding RNs and LPNs/VNs
- Education requirement updates for nursing programs
- Updates for practice/academic partnerships
- Exceptions for inactive and/or retired licenses
- Jurisdictional telehealth updates
- State responses regarding APRNs, including:
 - Certification extension/waiver policies
 - Licensure waivers and updates
 - Prescriptive authority/guidance
 - Waived or suspended practice updates
- Video and Presentation, "State of the World's Nursing Report: Recommendations & Their Relevance to the COVID-19 Pandemic," by David Benton, NCSBN CEO
- Joint statements
- Free nursing-specific COVID-19 online courses from the ICRS
- The latest press releases
- Impacts and Updates on NRBs
- FAQs
- Policy briefs
- Other related news from nurse leaders and organizations

For NCSBN's [COVID-19 Impact on NCLEX Candidates](#) webpage, resources include:

- Up-to-date testing information
- FAQs for NCLEX candidates
- FAQs for educators and NRBs
- Pearson VUE's COVID-19 webpage and FAQs

Additionally, until further notice, the daily newsletter [Good Morning Members](#) will focus on COVID-19, including general information, updates and research. [Click here to subscribe.](#)

Information on these webpages will be updated as events develop.

Nurse Educators and Clinical Partners Share Knowledge and Experiences in Texas Summit

By Janice I. Hooper, PhD, RN, FRE, CNE, FAAN, ANEF, nursing consultant for education, Texas Board of Nursing



Janice I. Hooper, PhD, RN,
FRE, CNE, FAAN, ANEF

The Texas Board of Nursing and the Texas Organization of Nurse Leaders co-sponsored a nursing summit, entitled *The Future of Nursing in Texas: Stakeholders Moving Towards Alignment*, in Austin on Feb. 24–25, 2020. The event was the culmination of discussions from a Task Force to Study Implications of Growth in Nursing Education Programs in Texas, charged by the Texas Board of Nursing to “create a dialogue between nursing education and clinical partners to facilitate optimal clinical learning experiences for all constituents.”

Day one of the summit laid the foundation for the conversations and included presentations by:

- ◆ **Susan Hassmiller, PhD, RN, FAAN**, senior scholar in residence and adviser to the president on nursing, National Academy of Medicine, in real-time video;
- ◆ **Lisa Campbell, DNP, RN, PHNA-BC**, professor and program director, Texas Tech University Health Sciences Center School of Nursing, on the social determinants of health;
- ◆ **Pamela Lauer, MPH**, program director, Texas Center for Nursing Workforce Studies;
- ◆ An APRN panel considering the preceptor role in APRN education, transition to advanced practice, and scope of APRN practice;
- ◆ **Nancy Spector, PhD, RN, FAAN**, director, Regulatory Innovations, NCSBN, on the gap/transition to practice;
- ◆ **Rachel Barbey**, from the Texas Student Nurse Association, on the student perspective on clinical experiences; and
- ◆ **Joan Stanley, PhD, CRNP, FAAN, FAANP**, chief academic officer, and **Lin Zhan, PhD, FAAN**, nursing dean and professor, American Association of Colleges of Nursing, on the new essentials.

On day two of the summit, the dialogue between education and practice was actualized through a World Café focusing on major identified issues in nursing education and clinical learning experiences. The day began with a presentation of the patient perspective by

David Sacedo, vice president, Texas Board of Nursing. To introduce the World Café model, **Kristin Benton, DNP, RN**, director of nursing at the Texas Board of Nursing, provided an overview and instructions; I moderated a demonstration panel for the World Café conversation using the topic of transition to practice.

There were 24 conversation tables for the World Café and 12 topics with specific questions for each table. A table facilitator monitored each conversation, took notes and managed the time allowed for five rotations of participants. Doctor of Nursing Practice (DNP) students from major universities in Texas “roamed” and observed the dialogues. Before concluding, a “harvesting” time completed the meeting where each facilitator gave a brief report.

The wealth of information will be analyzed, studied and prepared for distribution to stakeholders with a promise of a future with better collaboration, communication and educational experiences for nursing students at all levels.

Practice/academic partnerships are important in nursing education today. This statewide world café, bringing practice and educators together to find solutions for the education practice gap, is a model that other states may want to follow. ◆

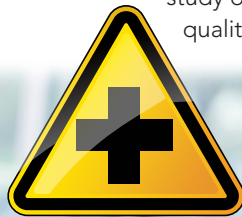


Photos taken Feb. 24–25, 2020, prior to social distancing mandates.

NCSBN APPROVAL GUIDELINES:

Studies Determine Quality Indicators and Warning Signs for Nursing Education Programs

The Boards of Nursing (BONs) asked for evidence-based, legally defensible criteria to use when approving nursing education programs. Therefore, in 2017 NCSBN embarked on a three-year journey to identify, from the evidence, nursing program quality indicators and warning signs that nursing regulatory bodies (NRBs) could use when approving nursing education programs. Over three years we conducted a large mixed methods study, consisting of three parts: a national Delphi study of experts in education, regulation and those in practice who work with new graduates; a national quantitative study of five years of BON annual reports of nursing programs; and a national qualitative study of five years of BON site visit documents. Along with these three companion studies, we also conducted a comprehensive literature review, specific to our questions:



- 1) What are the quality indicators of nursing education programs? and
- 2) What are the warning signs when programs begin to fall below standards?

The literature review consisted of published and gray literature, where we graded each paper, using the Johns Hopkins evidence levels.

Once all the evidence was collected, NCSBN invited experts from nursing regulation, education, research and law to review all the findings and to develop evidence-based and legally defensible warning signs and quality indicators.

NCSBN held a four-hour virtual conference with its members on Feb. 4, 2020, to roll out the results of the three studies, the literature review, as well as the Approval Guidelines that were developed by the expert panel. Researchers and other NCSBN staff presented the results of the studies, the literature review and the Approval Guidelines. **Janice Hooper, PhD, RN, FRE, CNE, FAAN, ANEF**, the lead education consultant of the Texas BON, presented on the regulator's perspective. More than 100 people attended this virtual conference, which is available to the public [here](#) (click the "Watch Conference Videos" link), along with the Approval Guidelines.

An additional resource that emerged from this work was an evidence-based annual report template for collecting core educational data from nursing schools. In Fall 2020, NCSBN plans to launch this standardized annual report where we will assist participating BONs with collecting data for their annual reports. The intent of this annual report is to collect data from multiple BONs on a standardized set of annual report items that evidence has shown to be predictive of nursing program approval. This will provide further evidence for the relationship between specific quality indicators and nursing program approval.

This groundbreaking work, which will be published, in total, in a supplement of the July issue of the *Journal of Nursing Regulation*, provides educators and nurse regulators with much needed evidence-based quality indicators and warning signs of nursing education programs. It is hoped that these guidelines will enhance collaboration between educators and regulators. Together, they will be able to identify warning signs when the nursing program is beginning to fall below standards and then, using the quality indicators, to guide the program to meet standards. This early intervention will assist nursing programs to take action before BON sanctions or program closures, thus continuing to graduate safe and competent nurses, in adequate numbers, to care for patients. ♦

This groundbreaking work ... provides educators and nurse regulators with much needed evidence-based quality indicators and warning signs of nursing education programs.

Going Global in the Year of the Nurse and Midwife

By Amy Lippert, PhD, MA, associate, Nursing Regulation, and Laura Jarosz, manager, Nursing Regulation, NCSBN

This tool allows educators to easily compare regulations in their own jurisdictions with others; and researchers can access data from around the world.

In an increasingly interconnected world, nursing care often transcends the boundaries of countries and continents. Educators need to be aware of the similarities and differences across continents, especially with the emphasis on global and population health and many programs providing experiences for students that require travel abroad.

NCSBN's Global Regulatory Atlas is the first comprehensive resource on the regulation of nurses in countries around the world. This tool allows educators to easily compare regulations in their own jurisdictions with others; and researchers can access data from around the world. Free to use and built with the assistance of health care regulators worldwide, the Global Regulatory Atlas puts the world's nurses at your fingertips.

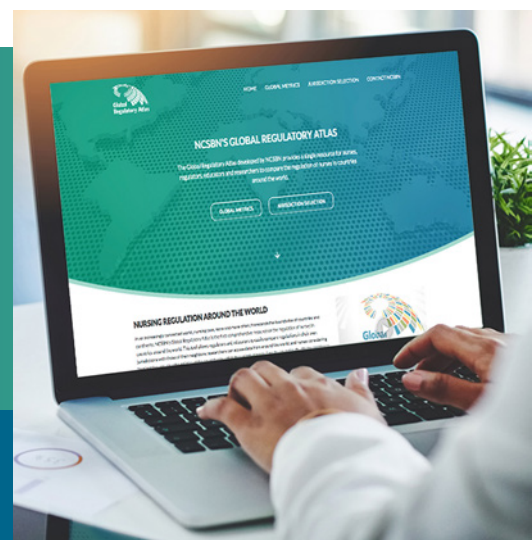
NCSBN's Global Regulatory Atlas provides a global and regional comparison of nursing regulatory bodies across more than 300 jurisdictions worldwide, which together represent more than 20 million nurses.

Users may select a single jurisdiction or compare data from up to three jurisdictions at once, including data related to: Governance, Licensure/Registration, Education, Discipline, Telehealth and Nursing Research. Jurisdictional data can also be exported.

The NCSBN Global Profile of Nursing Regulation, Education, and Practice was published in early 2020 as a special edition of the *Journal of Nursing Regulation (JNR)*, based upon the data within the Atlas. It provides an overview of the data collected through the Atlas. It commences—in the first part of the publication—with a global view of the data that specifically examines Regulation and Governance, Licensure and Registration Requirements to Practice, Nurse Types and Titles, Education, Practice, and Discipline. The second part of the Global Profile provides a more detailed view of the Regulatory Atlas data, sorted by region. The publication includes four appendices: a Glossary of Terms, a list of Jurisdictions Not Included in Data Analysis, the Educational Requirements for Entry into Nursing Programs by Regions, and the full Global Regulatory Atlas Questionnaire that was sent to nursing regulatory bodies worldwide, and upon which the Atlas is based. It is our hope that this undertaking represents just the beginning of an ongoing international dialogue among nursing regulators and educators in the interests of public safety and protection. ♦

NCSBN's Global Regulatory Atlas Charts the Nursing Regulatory Landscape

This comprehensive online compendium of nursing regulation worldwide was created with the assistance of health care regulators across the globe. The atlas currently holds information from more than 300 jurisdictions representing more than 20 million nurses. New Jurisdictions are continually being added.



[regulatoryatlas.com](https://www.regulatoryatlas.com)

Recommendations for Mathematics and Statistics Education for Quality and Safe Nursing Practice

We have reported in past issues of *Leader to Leader* about our [Safe Student Reports study](#). We currently have more than 200 nursing programs participating in this study, and our enrollment is ongoing. We are studying the types and extent of errors and near misses that occur in nursing program clinical experiences (with patients, in the learning labs or in simulation). We have learned a lot from the study and will be publishing our findings in 2021.

Currently, our data suggest that the majority of near misses and errors occur with medication administration and, of those, with calculation of dosages. Given that, we have become a part of the High-Quality Mathematics Education for Nursing Task Force. This group met in October of 2019 and from that meeting the group developed a document entitled, "[Recommendations for Mathematics and Statistics Education for Quality and Safe Nursing Practice](#)." The task force welcomes feedback via a form on the webpage.

If you are not enrolled in our SSR study, we invite you to [enroll now](#). You are able to learn about your students' errors and near misses and compare them to the aggregate report that we send out biannually. We also hold quarterly conference calls to network with our participants so that they can learn best practices from each other. ♦



From the Desk of the Researchers

By Brendan Martin, PhD, associate director, Research, NCSBN

NCSBN is set to embark upon the largest study of nursing practice error in the U.S. to date. The [Research department](#) is currently designing an innovative multisite study to capture the numerous, and often codependent, factors that can contribute to an adverse event or near miss. These include nurse-, patient-, shift-, unit-, and facility-based factors. Phase one of this study will consist of a pilot study to first investigate the contributory roles of individual and environmental factors resulting in patient harm or near harm with up to ten sites across the country. The pilot results will then inform a national launch scheduled for early to mid-2021. The goal of this study is to improve patient safety by reducing unnecessary facility-based nurse discipline, which directly affects external reporting, and to develop tools that support facilities in reducing preventable patient harm. This research will comprehensively assess patient care to generate evidence that will contribute to risk management strategies for the broader health care workforce and inform regulatory policy intended to protect patients. ♦



Brendan Martin, PhD

Percentages of Programs that are Accredited: An Update

By Josephine H. Silvestre, MSN, RN, senior associate, Regulatory Innovations, NCSBN

In December 2019, NCSBN sought to verify the current accreditation status of nursing programs. A list of nursing programs with NCLEX program codes (N = 4,127) was obtained from the NCSBN exams department. The accreditation status of each program was initially verified using the Accreditation Commission for Education in Nursing (ACEN), the Commission on Collegiate Nursing Education (CCNE) and the National League for Nursing Commission for Nursing Education Accreditation (CNEA) websites. Then, the remaining list of programs not found on the accrediting agencies' websites was sent to the executive directors at ACEN, CCNE and CNEA to

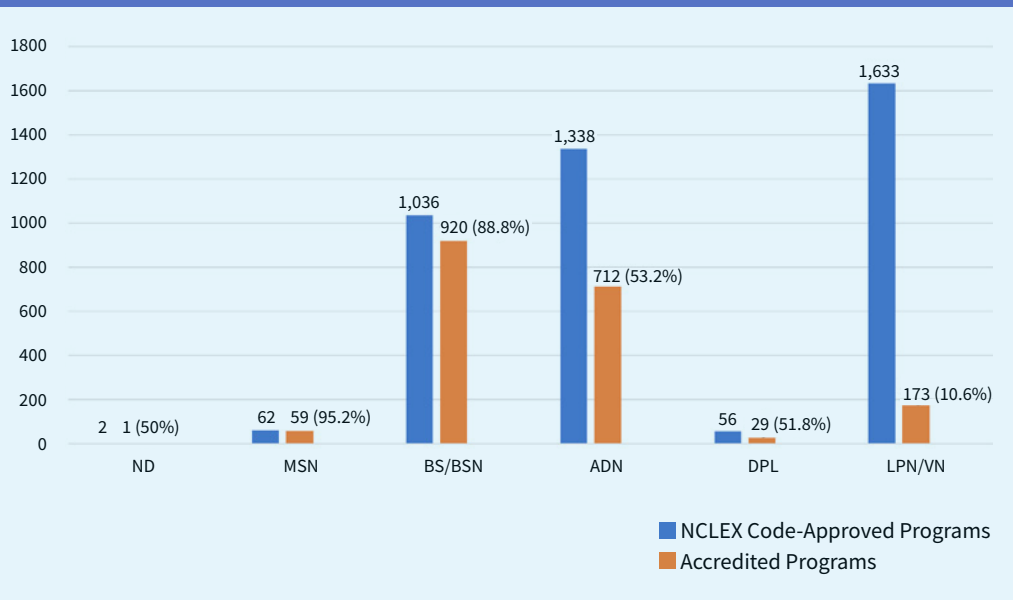
confirm the accreditation status.

When comparing the number of programs accredited by the national nursing accrediting agencies to the number of approved programs, 88.8% (n = 920) of baccalaureate programs and 95.2% (n = 59) of master's programs are accredited. Additionally, one of the two prelicensure nursing doctorate programs is accredited. Approximately 53% of associate degree programs and approximately 52% of diploma programs are accredited. Only 10.6% of practical/vocation programs were found to be accredited. Figure 1 shows the breakdown of the NCLEX® code-approved programs and accredited programs.

Accreditation rates previously reported from 2012 applied a

similar methodology (Spector & Woods, 2013). Since 2012, there has been a 6.5% increase (N = 3,874 in 2012) in the number of programs across all types but a majority of this is due to the large increase in baccalaureate programs, 811 (in 2012) to 1,036 (present). When comparing the 2012 accreditation rates to the current rates, there is a decrease in the accreditation rate from 96% to 89.1% for baccalaureate degree programs or higher and a slight increase from 52% to 53.2% for associate degree programs. The decreased accreditation rate for baccalaureate degree programs or higher is not fully understood, but perhaps some of this might be attributed to newer programs not receiving accreditation right away. ♦

FIGURE 1.
Comparison of NCLEX Code-approved and Accredited Programs



REFERENCE

Spector, N., & Woods, S. L. (2013). A collaborative model for approval of prelicensure nursing programs. *Journal of Nursing Regulation*, 3(4), 47-52.

NCSBN and the CBS Community Partnership Educate the Public About the Next Generation NCLEX

All of this represents more than an evolution in testing, it is actually a revolution in testing science. Now it is time for more audiences to learn how this will all potentially be deployed in the future.

For more than five years, NCSBN has worked on what is likely the most significant research it has ever conducted—the [Next Generation NCLEX® \(NGN\)](#) project. Out of this research the [Clinical Judgment Measurement Model](#) was created to explore new ways of testing clinical judgment in the nursing profession as part of the licensure examination. All of this represents more than an evolution in testing, it is actually a revolution in testing science. Now it is time for more audiences to learn how this will all potentially be deployed in the future.

NCSBN has employed a number of ways to inform nurse educators, nurses, nursing students, health care administrators and employers, and the general public about the NGN project. These varied methods include: published research, [NGN Talks](#), the [Next Generation NCLEX News](#) and presentations about NGN at various conferences, among others.

In the past, NCSBN has successfully worked with the CBS Community Partnership Program (CCPP) to produce several commercials for broadcast television. With the changing viewing habits of Americans and the proliferation of new social media platforms, it was logical to explore disseminating our messages about NGN through a digital marketing campaign that the CCPP now offers.



With the gracious permission of Loyola University's School of Nursing in Maywood, Ill., NCSBN and CCPP shot several spots at the school's Health Sciences Lab. The [30-second commercial](#) utilized NCSBN staff from across the organization and new NCLEX staff members **Latrice Johnson, MS**, test development manager, Examinations and **Emily Petersen MS, MJ, RN, APRN, CPNP, RN**, test development associate II, who doubled as actors and expert advisers. In addition to NCSBN staff, two professional actors were hired to play the main roles in the spot, one of whom is actually an RN. Playing the younger nurse in the scenario, her expertise added to the realism and made it easier for NCSBN's nursing experts to explain what she needed

to do in each scene. Additionally, a long form, [three and a half-minute video](#) that details the various types of questions that would be in the NGN exam, was also produced.

The campaign launched in December 2019. The commercial spots—distributed via display, video, email marketing and social media—will be used to increase awareness about NGN. Emails will also be sent to nurse educators, nurse preceptors, registered nurses, nurse aides, directors of nursing and others who would be impacted by changes in the NLCEX exam.

The ads are also delivered to the mobile phones of individuals who are currently located at nursing schools across the country and then resent to those users after they leave each location. Additionally, mobile phones of those attending nursing conferences will receive the advertising and be retargeted after the conference is over and they leave the location.

The campaign will run over a period of several years and will be evaluated on an ongoing basis to adapt its messages and how they are delivered to best promote NGN to the targeted audiences. ♦

[Click to view the 30-second Next Generation NCLEX commercial.](#)





Thank you *nurses.*



Nurses Week 2020



LEADER TO LEADER



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