



NCSBN
Leading Regulatory Excellence

Next Generation NCLEX[®] (NGN) Project

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Objectives

- Discuss NCSBN Clinical Judgment research
- Define Clinical Judgment Model
- Review NGN item prototypes
- Identify FAQs and NGN resources

The Beginnings



*NCLEX Examination Committee



Evaluation of Current Item Types

Item Formats

Multiple choice

Multiple response

Drag and drop

Hot spot

Audio

Graphics

Exhibit

Clinical Judgment Skills

Cue recognition

Hypothesis generation

Communication

Consequences/risks

Task complexity

Time pressure

Distractions/interruptions

Current NCLEX® Item Bank: Clinical Judgment Domain Distribution

	Cue Recognition	Hypothesis Generation	Communication	Consequences and Risk	Task Complexity	Time Pressure	Distractions and Interruption
Multiple Choice	Yellow	Yellow	Yellow	Yellow	Yellow	Red	Red
Multiple Response	Yellow	Yellow	Yellow	Green	Yellow	Red	Red
Drag and Drop	Yellow	Yellow	Red	Yellow	Yellow	Red	Red
Hot Spot	Yellow	Yellow	Red	Yellow	Red	Red	Red
Audio	Green	Yellow	Yellow	Red	Red	Yellow	Red
Graphic	Yellow	Yellow	Red	Red	Yellow	Red	Yellow
Exhibit	Green	Red	Red	Red	Red	Red	Red

Summary

- 1 Clinical judgment is a necessary skill for the novice nurse
- 2 Client care and nurse errors can be improved by enhancing clinical judgment skills in novice nurses
- 3 Clear need for a direct, extensive, and explicit assessment of this construct in entry-level nurses
- 4 Assessing clinical judgment is a critical component of the overall goal of NCLEX ascertaining minimum competency
- 5 Clinical judgment currently is indirectly tested in a limited manner through integration across activity statements

Development of Clinical Judgment Model

January 2015: Operational definition of nursing clinical judgment

Clinical judgment is defined as the observed outcome of critical thinking and decision-making. It is an iterative process that uses nursing knowledge to observe and assess presenting situations, identify a prioritized client concern, and generate the best possible evidence-based solutions in order to deliver safe client care.

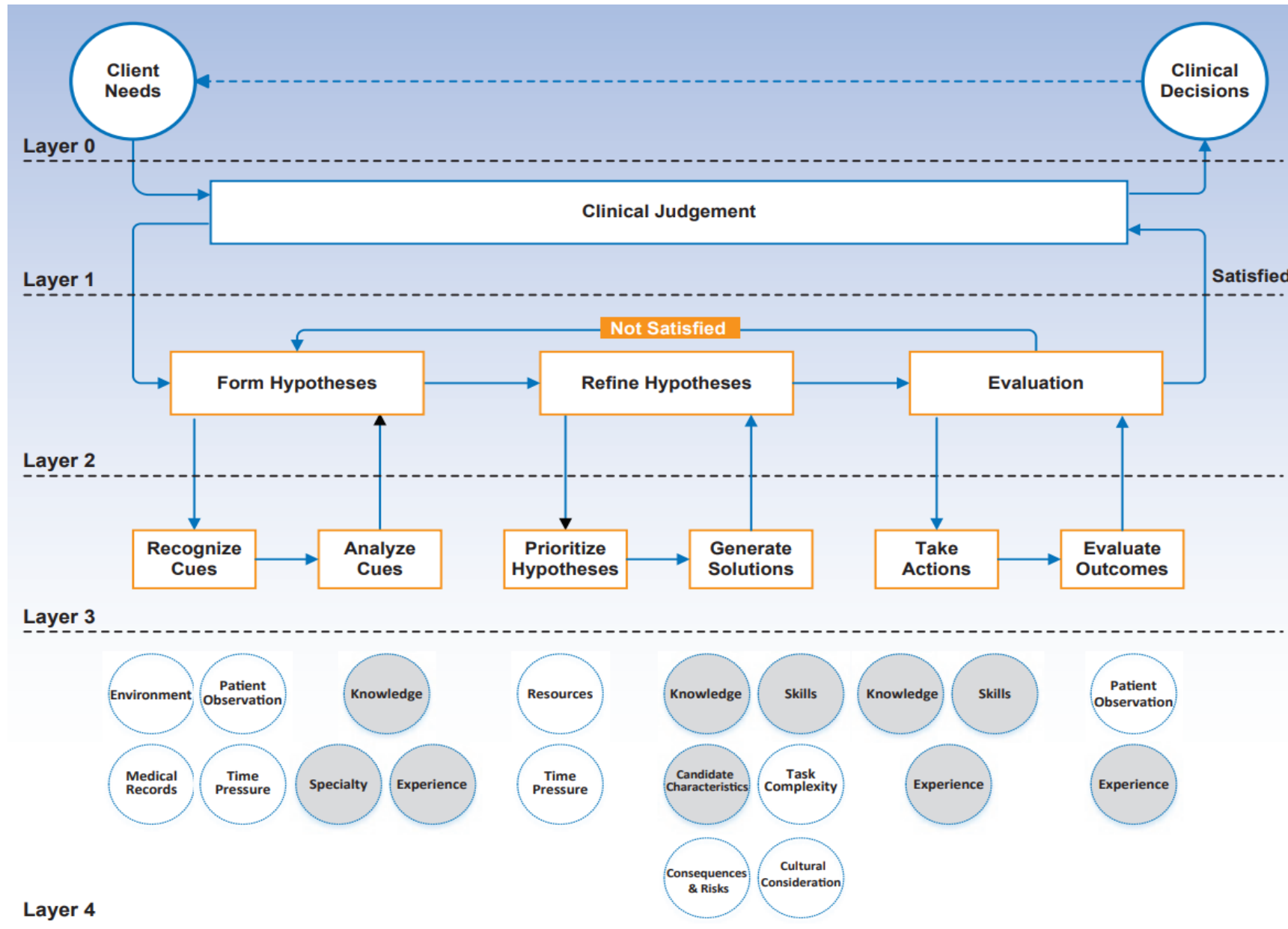


Development of Clinical Judgment Model

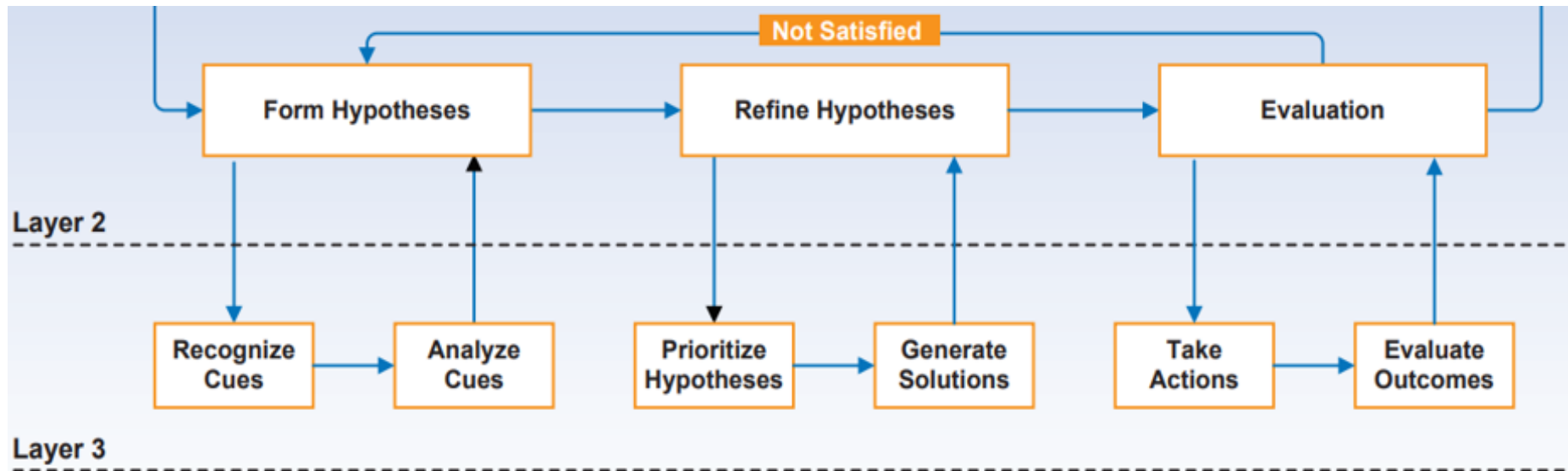
NCSBN research, literature review and pilot studies developed a comprehensive clinical judgment assessment model published in the *Journal Applied Testing Technology*, 2016.

Dickison, P., Luo, X., Kim, D., Woo, A., Muntean, W., & Bergstrom, B. (2016). Assessing higher-order cognitive constructs by using an information-processing framework. *Journal of Applied Testing Technology*, 17(1), 1-19. Retrieved from www.jattjournal.com/index.php/atp/article/view/89187/67797.

NCSBN Clinical Judgment Model



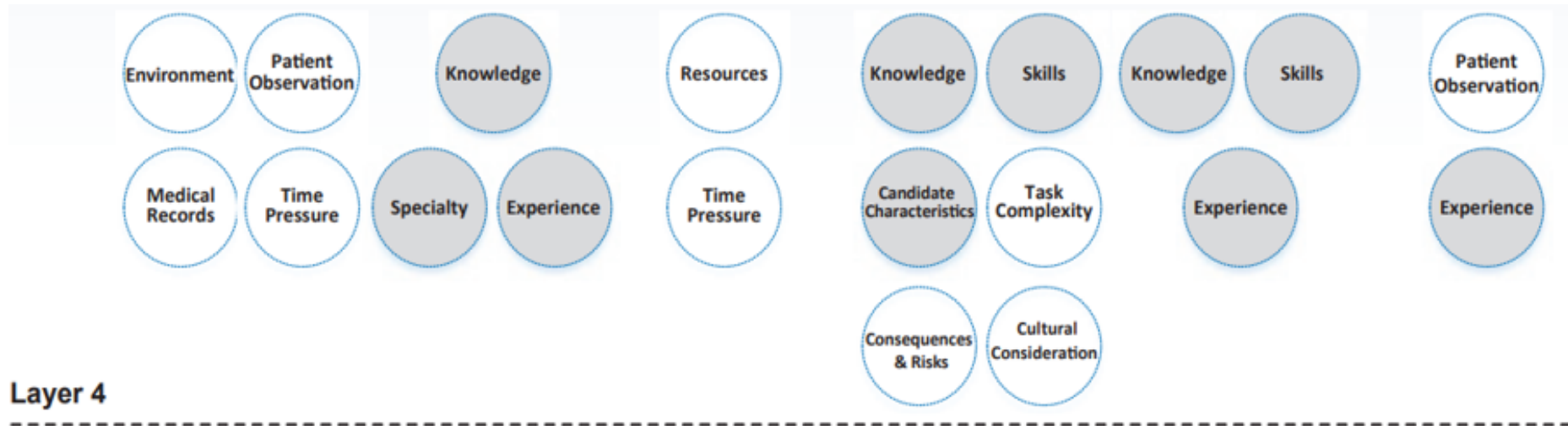
Layers 2 and 3



Definitions of Layer 3

- **Recognize Cues**-Filtering information from different sources (e.g., signs, symptoms, medical history)
- **Analyze Cues**-Organizing and linking the recognized cues from previous step to the client's clinical presentation. Candidates should establish probable client needs, concerns, or problems
- **Prioritize Hypothesis**-Evaluating and ranking hypotheses according to priority (urgency, likelihood, risk, difficulty, time, etc.)
- **Generate Solutions**-Identifying expected outcomes and using hypotheses to define a set of interventions for the expected outcome
- **Take Action**-Implementing the solution(s) that addresses the highest priorities. Important to recognize that sometimes no action is an action itself
- **Evaluate Outcomes**-Comparing observed outcomes against expected outcomes

Layer 4





Current NGN Item Prototypes

Case Study Example

The nurse is caring for a 28-year-old client who is gravida 4, para 2, is at 40 weeks gestation and is in active labor.

Nurses' Notes

Case Study

The client is receiving titrated intravenous oxytocin for augmentation of labor via the secondary line on an intravenous pump. The client is also receiving maintenance intravenous fluid of lactated Ringer's solution at 125 mL/hr via an intravenous pump. The client has a cervical dilatation of 5 cm and a cervical effacement of 100% with a fetal station of 0 in vertex presentation. Intact amniotic membranes are noted. Category I tracing of fetal heart rate (FHR) of 150 bpm, with moderate variability, and 3 accelerations of 15 bpm over the baseline lasting 15 seconds via external ultrasound. The client is experiencing contractions every 5 minutes, which are lasting 70 seconds with moderate intensity via tocotransducer. Vital Signs: HR of 88, BP of 115/78, RR of 15, T of 100.4°F (38.0°C). Has a continuous epidural infusion of 0.25% bupivacaine with fentanyl running at 10 mL/hr. Pain 0/10 at this time. Client states, "I had postpartum hemorrhage with my last vaginal delivery and I required a blood transfusion." Medical history of hypothyroidism and asthma.

Enhanced Hot Spot Example

➤ Click to highlight the findings that would require follow-up.

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CLOZE Example

➤ Complete the following sentences by choosing from the list of options:

The nurse should recognize that the fetal heart rate (FHR) may ,
the maternal temperature may , and the amniotic fluid may be
upon rupture of membranes if treatment is delayed.

Infection can cause adverse outcomes for the fetus, such as .

[There is a dropdown list of options in each box]

Extended Drag and Drop Example

The client has a temperature of 102.1°F (38.9°C) at this time. The nurse notes that the FHR is 170 with minimal variability and no accelerations present. Contractions are every 7 minutes, and last 50 seconds with moderate intensity. A category II FHR tracing is noted.

➤ Drag words from the choices below to fill in each blank found in the following sentence:

The best outcomes for the client would be to and . To achieve optimal outcomes, the nurse should and .

Word Choices

Reduce maternal temperature

Facilitate labor progression

Improve fetal well-being

Prepare for cesarean section

Perform intrauterine resuscitation

Administer intravenous antibiotics

Discontinue intravenous oxytocin

Extended Drag and Drop Example

- Drag the potential steps the nurse should take to perform intrauterine resuscitation to the box on the right. Choose only the steps that are appropriate:

Potential Steps

Place the client in the left lateral position.

Increase the infusion of titrated intravenous oxytocin.

Administer 10 L of oxygen via nonrebreather mask.

Request that the obstetrician artificially rupture the client's membranes.

Check the client's cervix for changes in dilatation.

Increase the maintenance intravenous infusion.

Appropriate Steps

Extended Multiple Response Example

The nurse is assessing the client after performing intrauterine resuscitation.

- For each finding, click to specify whether the finding indicates the intervention was effective, ineffective or unrelated:

Assessment Finding	Effective	Ineffective	Unrelated
Maternal temperature of 100.4°F (38.0°C)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
FHR of 145	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Absent fetal variability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Increase in bloody show	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Early decelerations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Maternal HR of 76	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

New NGN Item Types: Clinical Judgement Model Domain Distribution

	Cue Recognition	Hypothesis Generation	Communication	Consequences and Risk	Task Complexity
Enhanced Hot Spot	Green	Red	Yellow	Yellow	Yellow
Extended Multiple Response	Green	Yellow	Yellow	Green	Green
Extended Drag and Drop	Green	Yellow	Green	Green	Yellow
SBAR	Green	Green	Green	Green	Yellow
Cloze Items	Green	Yellow	Green	Green	Green
Constructed Response	Green	Green	Green	Green	Green
Rich Media Scenarios	Green	Green	Green	Green	Green
Dynamic Exhibits	Green	Green	Green	Green	Green

Special NGN Research Section

Current item types being piloted in the research section:

Extended Multiple Response

Extended Drag and Drop

CLOZE

Enhanced Hot Spot

Dynamic Exhibit

Constructed Response

Common FAQs

What does the special research section look like?

Once a candidate finishes their exam, an introductory screen will indicate the beginning of the Special Research Section. This section will also continue to be numbered in accordance with the completed exam – for example, if a candidate's exam ended with question 153, the first question on the Special Research Section will be numbered 154. Despite the consecutive numbering, these new questions will have no impact on NCLEX scoring or results.

What information will be collected?

The special research section collects data for developing scoring rules, provide evidence of item characteristics and determine how much time candidates spend on each item.

How should students prepare for the special research section?

As the new items included in the special research section are for research purposes only, no additional preparation is necessary. The special research section is testing the new item types' functionality, not the candidates' ability.

Can educators see the special research section?

All questions on the NCLEX-RN and the special research section are confidential, and are not available to anyone outside of the testing environment.

Which candidates are selected for the special research section?

Only NCLEX-RN candidates are selected to participate in the special research section. A number of factors determine whether or not a candidate will be given the special research section (e.g., the time remaining in their NCLEX appointment).

How will the items be scored ?

The special research section items will not be scored. One of the purposes of the special research section is to gather the data needed to determine scoring methods for the new item types.

Is there a penalty if a candidate refuses to participate?

No. The special research section is optional and will not count towards the NCLEX result.

Will more information about the special research section come out soon?

Yes. Language informing candidates about the special research section is included in the regular correspondence to NCLEX candidates, on the NCSBN and Pearson VUE websites and provided via the NCSBN social media sites.

NGN Information on NCSBN Website



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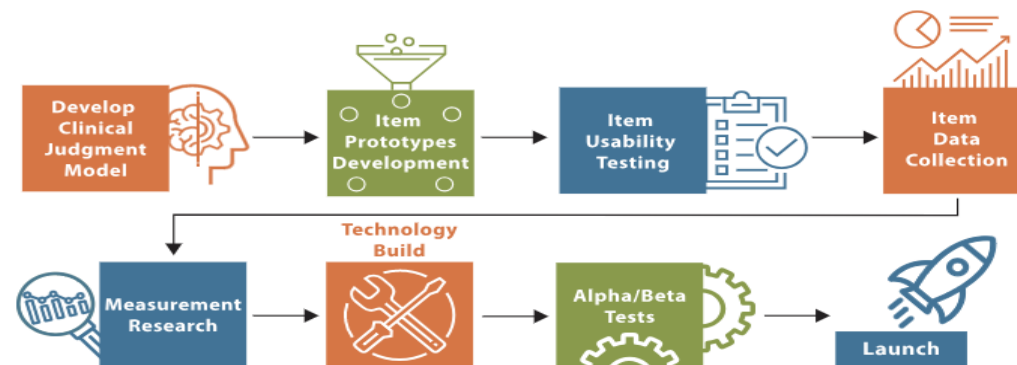
NCLEX FAQs >

Next Generation NCLEX Project

The 2013-2014 NCSBN Strategic Practice Analysis highlighted the increasingly complex decisions newly licensed nurses make during the course of patient care. NCSBN is conducting research to determine whether clinical judgment and decision making in nursing practice can be reliably assessed through the use of innovative item types. This objective is the Next Generation NCLEX project, or NGN.

Overview

The NGN consists of several phases of research, which are delineated in the model below. If the evidence during any individual step indicates that potential innovations will not support the rigor and quality of the NCLEX, the project will be reexamined at all levels.

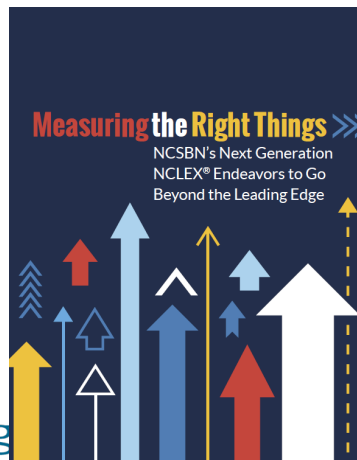


NGN Resources

- Quarterly Newsletter



<https://www.ncsbn.org/next-generation-nclex.htm>



ncsbn.org

Next Generation NCLEX Project:

<https://www.ncsbn.org/next-generation-nclex.htm>

Next Generation NCLEX FAQs:

<https://www.ncsbn.org/11449.htm>

Measuring the Right Things, In Focus article:

<https://www.ncsbn.org/12021.htm>



Thank you!

For additional questions please email:
nclexinfo@ncsbn.org