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Past Event: 2022 NCSBN Annual Meeting - Committee Forum: NCLEX RN and PN Test Plan Video Transcript

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Event

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Presenter

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- [Crystal] So, I'd like to welcome you to the "2023 NCLEX Test Plan Summary of Proposed Changes Session." I am Crystal Tillman. I am the chair of the NCLEX Examination Committee, actually, we refer to it as NEC. My other job, I have the pleasure of serving as a CEO of the North Carolina Board of Nursing.

Now, is Jan Hooper in the room from Texas? Okay, great. Great. I'm glad you're here, Jan, because I started with the NEC in 2014 and at that time, Jan Hooper was the chair and certainly a great mentor for me.

Jan asked a very important question during NEC, are we measuring what we need to measure? Critical thinking, clinical judgment. Yes, we're measuring it, but could we do it better? And so, thank you, Jan, for taking us down this road.

And now we're about to have the NGN I guess we can say birthed next year, correct? So, the NEC has worked extremely hard this year on meeting the charges set before us. And today we're just going to look at some highlights of some of the impactful projects of the committee has been working on.

We're also going to review the mission and the NEC charge, accomplishments, and an overview of the practice analysis, clinical judgment, and NCLEX test plans, along with the proposed 2023 NCLEX-PN and RN test plans. First, I'd like to introduce to you the committee.

So, when your name is called, please stand. And once you stand, feel free to sit back down. So this committee is made up of educators, board members, EOs, who are all familiar with education and nursing regulation, and they are dedicated to the work of the NEC.

So, as I call your name, please stand. Kristin Benton, from Texas. And some folks may be virtual, Barbara Blozen, from New Jersey. Gary Hicks, from Maryland, Vicki Hill, from Alabama, Karen Lyon,

from Louisiana, Claire MacDonald, Massachusetts, Danette Schloeder, Alaska, and Carol Timmings, Ontario.

And thank you, Karen, for being our board liaison for the committee. We appreciate your hard work. And we like to use acronyms a lot. So NIRSC or rather the NCLEX Item Review Subcommittee is just that, NIRSC is a subcommittee of the NEC.

These folks work especially hard. There's 19 members. They do three days at a time. They do these intense reviews of looking at pretest items for the NCLEX. They've also just been going through reviewing the NGN items.

So, since June '22, this committee has been meeting hybrid and it's been working well. So, please stand as I call your name, then you can be seated. Meedie Bardonille, I'm sorry. I knew I'd massacre someone's name.

I apologize. Tammy Bryant, Sandra Culpepper, Allison Edwards, Mariclaire England, Cindy Fairchild, Camille Forbes-Scott, Anne Hardee, Anne Heyen, Georgina Howard, Brandon Jones, Linda Kmetz, Elise McDermott, Kathleen McManus, Patricia Motl, Jennifer Pelletier, Jacci Reznicek, Sheron Russell, and Maceo Tanner.

So, please join me in welcoming and thanking them for all the hard work that they've done. Wow. I cannot thank the examination staff enough, these folks are phenomenal, and they make our life so much easier when we come for these intensive meetings, whether it'd be NEC or NIRSC.

So, thank you for your hard work, your dedication, and mostly for your commitment to NCSBN. And there has been a tremendous amount of work on the NGN. And so, thank you so much for that. Many of the staff are in the office today, but for those, with the examination staff, if you will please stand so we can recognize you.

So, NEC monitors all aspects of the NCLEX examination ensuring two things, that the NCLEX is psychometrically sound and that it's legally defensible.

NEC has been working to develop NCLEX prototypes using technology-enhanced item types that focus on measuring clinical judgment. NEC's accomplishments this year included reviewing NCLEX policies, approving NCLEX items and case reports, and engaging in strategic discussions for the committee's future direction.

NEC's accomplishments also included approval of the 2021 PN practice analysis and nursing knowledge survey reports, which also included clinical judgment relevancy related to PN practice. Approve the panel of judges who will be meeting later this month to recommend the passing PN standard.

Also approved a 2023 PN test plan for proposed recommendations to the Delegate Assembly, which delegates will consider this week. And the board of directors will give their final approval. And finally, the test plan will be implemented of April 2023.

Yes, that's the way I feel too. Yes. So, NEC also included approval of the 2021 RN practice analysis and nursing knowledge survey reports, which also included the clinical judgment relevancy related to the RN practice.

Approved panel of judges that met this past June to make recommendations for the passing RN standard. Also, we approved the 2023 RN test plan for proposed recommendations to Delegate Assembly, which delegates will consider this week and the board of directors will give their final approval.

And then, finally, the test plan will be implemented in April '23. The practice analysis studies are used to assist in evaluating the validity of the test plan and content distribution for future NCLEX examinations.

And the 2021 practice analysis surveys will first introduce clinical judgment for safe, effective nursing care at the entry level. You know, nursing is constantly evolving, and man, has it evolved in the last few years. And so, the NCLEX must keep pace with the job requirements.

Nurses need critical thinking skills. They also need clinical judgment to be able to think through processes. In 2021, clinical judgment was included in the PN and RN practice analysis and will be included in the 2023 NCLEX test plans.

The nursing scope of practice is the framework of allowable duties for nurses. Remember, the scope of the practice is different for the PN and the RN, but clinical judgment is the same. So, NEC will recommend adoption of the proposal for the 2023 NCLEX-PN and RN test plans.

Recommendations and report can be found in the business book. You have one clean copy and also a strikethrough version as well. Recommendations are based on the 2021 PN and RN practice analysis, panelist expert judgment, feedback from nursing regulatory bodies, trends in nursing practices, and other historical data.

So, here is the NCLEX test plan journey. The 2021 NCLEX-PN and RN practice analysis data was analyzed. The NEC recommends a draft NCLEX test plan for category structure and percentages along with activity statements.

And that brings us to Delegate Assembly to vote during the annual meeting. So, the proposed 2023 NCLEX-PN test plan, client needs category percentages will be retained. So, in other words, for the NCLEX-PN, there will be no changes in the category, subcategories, or percentages.

Clinical judgment will be added as a new integrated process. The administration of the NCLEX-PN will include new details with now being able to use polytomous scoring, and you say, "Well, what is polytomous scoring?" That means it's partial credit. So, before, when you would answer a question, it was either a yes, or you either got it right, or you got it wrong.

So, when we started breaking down and doing the case studies, we had to figure out a way to give partial credit for multi answers to a test item. So that was huge trying to figure that out. And then the independent and unfolding case studies will be included in the NCLEX-PN. So, here, you can see a comparison, but between the 2020 test plan and the 2023.

All percentages are completely the same. And the proposed 2023 NCLEX-RN test plan client needs category percentages will be modified, and why? Due to the COVID impact.

Clinical judgment will be added as a new integrated process. The administration of the NCLEX-RN will include new details with now being able to use polytomous scoring as well. Independent and unfolding cases will be included in the NCLEX-RN. So, here is your comparison between the RN for 2019 and 2023.

So, the subcategories of management of care will be decreased by 2%, and we never want to change anything more than 1% to 2%. We always want to keep it small.

So, with it coming down 2%, we will add 1% to safety infection control and to the pharmacological therapies, increasing it by 1% as well. And this will be in the 2023 test plan. So here is a timeline for those who like to see in a chart format of the implementation of the 2023 NCLEX-PN and RN test plans.

June of this year, the panel of judges met to recommend the '23-RN passing standard. August, the panel of judges meets in '23 to discuss the PN passing standard. And then the proposed 2023 NCLEX PN and RN test plans will be submitted to Delegate Assembly, and then in December, to the board of directors, for final approval.

Let's see. And what the nursing programs have really been waiting on is for this to appear on the website in January. So, if approved, it will move forward. And then January, it appears on NCSNB's website so that the nursing educators can see what changes have been made.

And then finally, April 1st, 2023, the approved 2023 NCLEX PN and RN test plans passing standards will become effective. And this has been years in the making and this is just a phenomenal year. So, I will tell you, I am just honored to be on this committee. I've learned so much, and it's been a highlight of my career.

But to start off with the beginnings of NGN and to see all the great work that board staff, you know, it's just... And that the psychometricians are able to break it down for us who do not understand at such a deep level. They just do an excellent job, so we really appreciate that. And future activities include monitoring and evaluating all aspects of the NCLEX program, and communicate updates on clinical judgment research for the NCLEX to the NRBs and the public.

The annual NCLEX conference will now remain virtual. So more people can attend and it will remain occurring in September. NEC will conduct NCLEX-PN and RN standard settings, which continue to occur every three years.

And that historically is how it's been every three years. And then, finally, on one of our future activities, the keyword is exploring remote proctoring. I just love Phil's passion and energy.

And so I know when he came out at midyear and said, "We are exploring," it doesn't mean it's a done deal yet, right? But there's a lot of research that needs to go into it. But the NEC's always moving forward and we're grateful for that. And I served with some great committee members. So, we have a short video that we would like to share with you.

And then I will entertain questions. ♪ [music] ♪ - [Dr. Dickison] Clinical judgment. Clinical judgment is actually a fundamental component of nursing.

What nurses do, who they are. Documentation, the interaction between the client and the nurse. The interaction between the nurse and the physician. It is fundamentally the underpinning of all things that nurses do. We were, in fact, measuring clinical judgment.

The idea was, could we make it better? What we tried to do was build a model in its simplicity that no matter how you make your decisions, we could actually measure the outcomes of those decisions and

the process. So, if I am a nurse taking care of a patient, I need to focus my decision-making in that moment, taking that from the bedside and making new item types.

♪ [music] ♪ The item types and the tests look like real life. ♪ [music] ♪ Focus on that education because it will prepare you to pass the test. It is merely built to validate the knowledge, skills, and abilities you gain from your education so that you are ready to practice on the first day.

♪ [music] ♪ - I love the NCSBN videos. They are so well done.

So thank you to the IT folks. So, does anyone have questions about what we discussed? I know I'm the last presenter of the day, and everyone's ready to go take a boat cruise or enjoy the Chicago weather, but I do want to answer any questions that you may have. Four?

- [Brittany] Hi, Brittany Dawson from the Virgin Islands. My question would be, have we been partnering with some of the educational institutions to make sure that these students graduating that will be taking this version of the exam are better prepared to answer these kind of questions?

- Yes. From the beginning, Phil Dickison, and now Jason Schwartz, they have been going out, they've been meeting with the educational organizations. We have been talking about this for years. We've been talking about it at the NCLEX conference annually. So, people are becoming aware.

And certainly, the publishers are aware as well and have been included in their texts. And also education programs are looking into using more NGN-type questions.

- Crystal? Crystal, you've got a remote question.

- Oh, a remote question, okay.

- [Man] We have a question from Diane Mancho. Will the new test plan require changes in nursing curriculum?

- Will they change in nursing curriculum?

- Yes.

- I don't know, Phil, you want to answer that? Because all we have are the percentages for the provided.

- Is this good?

- Yep.

- Good. So the answer is no, there's no requirement to change curriculum. Now, let me be really clear about this. We have looked at the actual change in practice. And what we found out in early research is that educators had been teaching clinical judgment long before we got to this level.

That being said, I think it's very important for everyone here to know that we still have to set the standard. That's unknown that the board does that in December, but the actual process of teaching doesn't have to change. If, in fact, your education program is not, has not adopted, is one that's sort of sticking out there and doing anything, I would suggest they relook at that.

But generally, the literature suggests that the majority of education programs in nursing have already adopted this approach. And so whether they're using the Tanner model, or humanistic, or intuition models where the variety models are used, paradigms to teach this, doesn't matter. Sort of where we were getting that, we wanted to build something simplistic enough that any education program could use a paradigm to teach clinical judgment, and we would be able to measure it anyway.

So, my answer is, if you haven't been doing it, I would suggest you do it. If you have been doing it and you're doing it well, you should be okay.

- Great, thank you. And Madam President, I will let you close it out.