



Kentucky Board of Nursing

Programs of Nursing Update

November 2006

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2005-2006 NCLEX Pass Rates

I know that with the implementation of the Clinical Internship there is great concern related to the impact on the NCLEX pass rates. To look at the potential impact, I am studying the 2004 to the 2005 results. Below is the data as of 11/8/06. The final information should be available in February.

RN Programs					PN Programs		
	BSN		ADN			04	05
	04	05	04	05			
Total Graduates	633	664	1371	1552	Total Graduates	783	801
Total Passed	571	654	1218	1483	Total Passed	713	693
%	90.2%	89.9%	88.8%	88.3%	%	91.1%	90.9%

Note: "Yet to Test" includes candidates that test outside of Kentucky.

Individual Student NCLEX Results

Just a reminder that a graduate's NCLEX results are considered to be a part of the student record. As such, it is subject to the privacy of information requirements governing student records. Aggregate information cannot be linked to specific students is certainly open records information. Except to other faculty, refrain from sharing "news" of NCLEX results either positive or negative.

Faculty & Clinical Instructor License Status

Renewal of RN and LPN licenses was completed on October 31, 2006. Don't forget to validate **new** and **current** faculty and clinical instructors to be sure that they have renewed their license. This needs to be done as a primary verification-meaning from the KBN website-versus a visual inspection of the card. Hopefully you have a checklist of some kind that you use when hiring new faculty or clinical instructors-make validation of Kentucky nursing license a part of hiring practice. This should be very high on the list. Making application to the Board does not count! They must have either an active license or a temporary work permit.

Save the Date: 2007 Kentucky Board of Nursing Regulatory Conference

Every two years the Kentucky Board of Nursing sponsors a regulatory conference. The conference will be June 1, 2007 at the Kentucky Fair and Exposition Center in Louisville. Complete details will be forthcoming—mark the date on your calendar!

Calling All Faculty--- NCLEX Development Opportunities

The National Council of State Boards of Nursing, Inc. (NCSBN) is constantly seeking individuals who are interested in serving on an item development panel. Qualified, highly motivated, and professionally committed nurses **who are currently licensed and employed in the United States** are needed to assist in developing test items (questions) for the National Council Licensure Examinations (NCLEX-RN® and NCLEX-PN®). A description of the panels can be found below. If you are interested in participating, the application is now on-line and can be completed quickly—go to www.ncsbn.org and the link is on the homepage called "Item Development On-Line Application." If you have questions or if you have any difficulties completing the application, call the NCSBN Item Development Program at 312-525-3775. Everyone that has participated has found the experience to be very exciting.

Qualifications: Item Writing and Item Review sessions for the NCLEX-RN and NCLEX-PN examinations are ongoing throughout the year. Each session lasts three to five days. To qualify, you must be currently licensed in the jurisdiction where you practice. Only jurisdictions in the US or its territories qualify for the purpose of participating in the Item Writing or Reviewing process.

Item Writers: Item writers create the multiple-choice questions, or items, used for the NCLEX examinations. LPNs/VNs who plan to take the NCLEX-RN examination within two years of service with NCSBN do not qualify for participation. To qualify:

- 1) For the NCLEX-PN exam, you must be a registered nurse (RN) or a licensed practical/vocational nurse (LPN/VN). For the NCLEX-RN exam, you must be a registered nurse with a masters degree or higher.
- 2) You must be responsible for teaching basic/undergraduate students in the clinical area, or you must be currently employed in clinical nursing practice, working directly with nurses who have entered practice within the last 12 months.

Item Reviewers: Item reviewers review the items that are created by item writers. LPNs/VNs who plan to take the NCLEX-RN examination within two years of service with NCSBN do not qualify for participation. To qualify:

- 1) For the NCLEX-PN exam, you must be an RN or an LPN/VN. For the NCLEX-RN exam, you must be an RN.
- 2) You must be currently employed in clinical nursing practice, working directly with nurses who have entered practice within the last 12 months.

Preceptor Certificates

As you are aware, nurses can utilize the opportunities that they have in Precepting either students or new employees as a means to document their continued clinical competence. Since many programs are utilizing preceptors, it has been suggested that programs may want to provide a certificate to the preceptor at the end of the rotation that they could maintain similar to a CE certificate documenting the number of hours that they served in this capacity. Melanie Sallee, from the Danville Campus of Bluegrass Community & Technical College was kind enough to share with me a sample of a certificate that her program utilizes.

Preceptored Experiences- How Many Students can a Faculty Member Monitor?

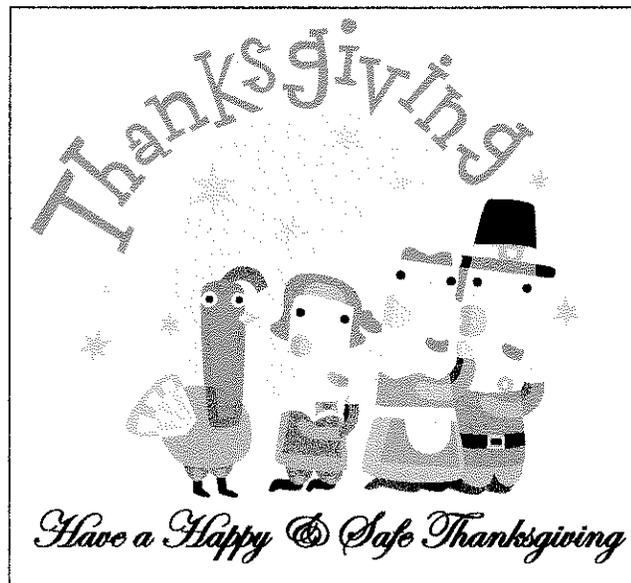
A question that is frequently posed is: *Is it permissible for a faculty member to have more than 10 students in a preceptored experience if the students are not all in the clinical facilities at the same time? For example, we may have 28 students who are all assigned a preceptor and are divided between 2 faculty members. The faculty members approve the schedules (days, shifts, weekend, etc) so that they are available and can make site visits during the students' preceptor experience BUT all students will not be in the clinical areas at the same time. Typically, it ends up being 3-4 at any given time per instructor. Is this permissible?*

The education committee discussed this topic and the answer is "No- it is not acceptable." The clinical faculty to student ratio in the state of Kentucky is 1:10. The use of preceptors is a teaching option but it should not be utilized to relieve the clinical instructor of his/her responsibilities to the student. If the program did not use a preceptor model, the clinical faculty would only be allowed 10 students to supervise.

NCLEX-RN EXAMINATION- EFFECTIVE APRIL 2007

The 2007 Test Plan has been released from National Council. It was voted on at the Annual Meeting held in August 2006. A copy of the short version of the plan is attached for your review. It is available for free download from the NCSBN website.

Good news—the plan did not change. The % for each category has not changed.



CERTIFICATE OF RECOGNITION

This certificate is awarded to

STACI SATTERLY

In recognition of

*Serving 135 hours as a Preceptor for the Practical Nursing Program at
Bluegrass Community & Technical College, Danville Campus
Spring 2006 Semester*

Signature

Date

NCLEX-RN®
TEST PLAN

Effective | April 2007



NCLEX-RN® Examination

Test Plan for the National Council
Licensure Examination for Registered
Nurses

National Council of State Boards of Nursing
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Mission Statement

The National Council of State Boards of Nursing, composed of Member Boards, provides leadership to advance regulatory excellence for public protection.

Purpose and Functions

The purpose of the National Council of State Boards of Nursing (NCSBN) is to provide an organization through which boards of nursing act and counsel together on matters of common interest and concern affecting the public health, safety and welfare, including the development of licensing examinations in nursing.

The major functions of NCSBN include developing the NCLEX-RN® and the NCLEX-PN® examinations, performing policy analysis and promoting uniformity in relationship to the regulation of nursing practice, disseminating data related to NCSBN's purpose, and serving as a forum for information exchange for NCSBN members.

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NCLEX-RN® Test Plan

Test Plan for the National Council Licensure Examination for Registered Nurses (NCLEX-RN® Examination)

Introduction

Entry into the practice of nursing in the United States and its territories is regulated by the licensing authorities within each jurisdiction. To ensure public protection, each jurisdiction requires candidates for licensure to pass an examination that measures the competencies needed to perform safely and effectively as a newly licensed, entry-level registered nurse. The National Council of State Boards of Nursing, Inc. (NCSBN) develops a licensure examination, the National Council Licensure Examination for Registered Nurses (NCLEX-RN®), which is used by state, commonwealth and territorial boards of nursing to assist in making licensure decisions.

Several steps occur in the development of the *NCLEX-RN® Test Plan*. The first step is conducting a practice analysis that is used to collect data on the current practice of the entry-level nurse (*Report of Findings from the 2005 RN Practice Analysis: Linking the NCLEX-RN® Examination to Practice*, (NCSBN, 2006). Six thousand newly licensed registered nurses are asked about the frequency and priority of performing more than 150 nursing care activities. Nursing care activities are analyzed in relation to the frequency of performance, impact on maintaining client safety and client care settings where the activities are performed. This analysis guides the development of a framework for entry-level nursing practice that incorporates specific client needs as well as processes fundamental to the practice of nursing. The second step is the development of the *NCLEX-RN® Test Plan*, which guides the selection of content and behaviors to be tested.

The *NCLEX-RN® Test Plan* provides a concise summary of the content and scope of the licensing examination. It serves as a guide for examination development as well as candidate preparation. NCLEX-RN® examination is based on the test plan. The NCLEX examination assesses the knowledge, skills and abilities that are essential for the nurse to use to meet the needs of clients requiring the promotion, maintenance or restoration of health. The following sections describe beliefs about people and nursing that are integral to the examination, cognitive abilities that will be tested in the examination and specific components of the *NCLEX-RN® Test Plan*.

Beliefs

Beliefs about people and nursing underlie the *NCLEX-RN® Test Plan*. People are finite beings with varying capacities to function in society. They are unique individuals who have defined systems of daily living reflecting their values, motives and lifestyles. Additionally, people have the right to make decisions regarding their health care needs and to participate in meeting those needs.

Nursing is both an art and a science, founded on a professional body of knowledge that integrates concepts from the liberal arts and the biological, physical, psychological and social sciences. It is a learned profession based on an understanding of the human condition across the life span and the relationships of an individual with others and within the environment. Nursing is a dynamic, continually evolving discipline that employs critical thinking to integrate increasingly complex knowledge, skills, and technologies and client care activities into evidence-based nursing practice. The goal of nursing for client care in any setting is preventing illness; alleviating suffering; protecting, promoting and restoring health; and promoting dignity in dying.



The registered nurse provides a unique, comprehensive assessment of the health status of the client (individual, family or group), and then develops and implements an explicit plan of care. The nurse assists clients in the promotion of health, in coping with health problems, in adapting to and/or recovering from the effects of disease or injury, and in supporting the right to a dignified death. The registered nurse is accountable for abiding by all applicable federal, state and territorial statutes related to nursing practice.

Classification of Cognitive Levels

The examination consists of items that use Bloom's taxonomy for the cognitive domain as a basis for writing and coding items (Bloom, et al., 1956; Anderson & Krathwohl, 2001). Since the practice of nursing requires application of knowledge, skills and abilities, the majority of items are written at the application or higher levels of cognitive ability, which requires more complex thought processing.

Test Plan Structure

The framework of Client Needs was selected for the examination because it provides a universal structure for defining nursing actions and competencies, and focuses on clients in all settings.

Client Needs

The content of the *NCLEX-RN® Test Plan* is organized into four major Client Needs categories. Two of the four categories are further divided as follows:

Safe and Effective Care Environment

- Management of Care
- Safety and Infection Control

Health Promotion and Maintenance

Psychosocial Integrity

Physiological Integrity

- Basic Care and Comfort
- Pharmacological and Parenteral Therapies
- Reduction of Risk Potential
- Physiological Adaptation

Integrated Processes

The following processes are fundamental to the practice of nursing and are integrated throughout the Client Needs categories and subcategories:

- *Nursing Process* – a scientific problem-solving approach to client care that includes assessment, analysis, planning, implementation and evaluation.
- *Caring* – interaction of the nurse and client in an atmosphere of mutual respect and trust. In this collaborative environment, the nurse provides encouragement, hope, support and compassion to help achieve desired outcomes.
- *Communication and Documentation* – verbal and nonverbal interactions between the nurse and the client, the client's significant others and the other members of the health care team. Events and activities associated with client care are validated in written and/or electronic records that reflect standards of practice and accountability in the provision of care.
- *Teaching/Learning* – facilitation of the acquisition of knowledge, skills and attitudes promoting a change in behavior. Distribution of Content

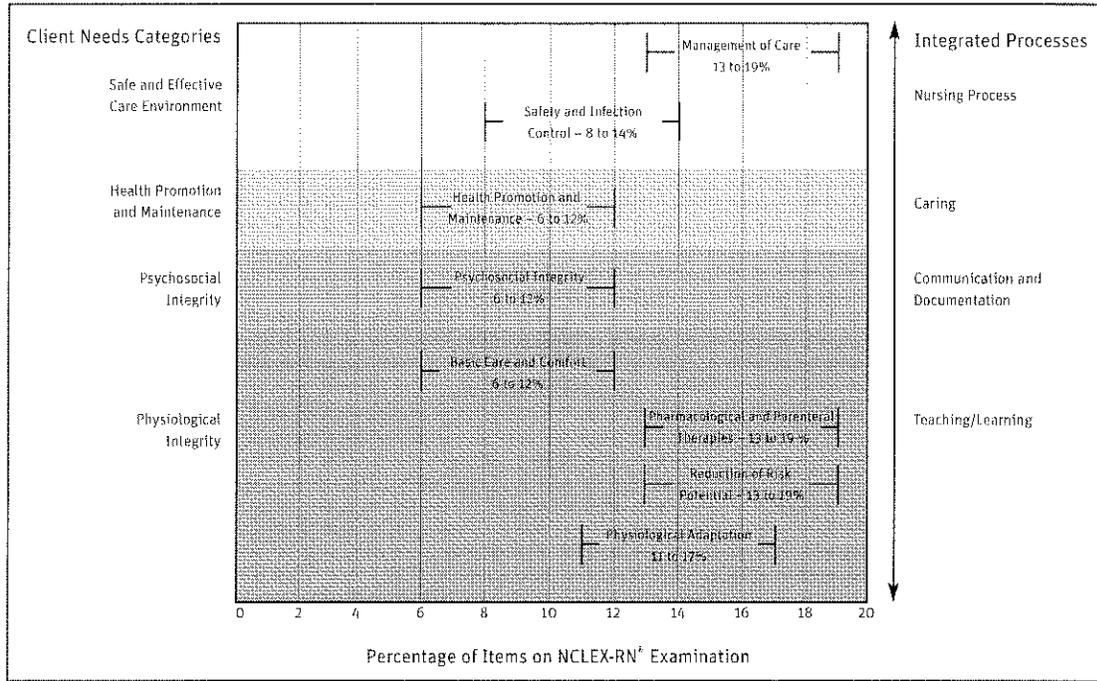
The percentage of test questions assigned to each Client Needs category and subcategory of the *NCLEX-RN® Test Plan* is based on the results of the *Report of Findings from the 2005 RN Practice Analysis: Linking the NCLEX-RN® Examination to Practice* (NCSBN, 2006), and expert judgment provided by members of the NCSBN Examination Committee.

Client Needs	Percentage of Items from Each Category/Subcategory
Safe and Effective Care Environment	
• Management of Care	13-19%
• Safety and Infection Control	8-14%
Health Promotion and Maintenance	6-12%
Psychosocial Integrity	6-12%
Physiological Integrity	
• Basic Care and Comfort	6-12%
• Pharmacological and Parenteral Therapies	13-19%
• Reduction of Risk Potential	13-19%
• Physiological Adaptation	11-17%



The following processes are integrated into all Client Needs categories and subcategories of the *NCLEX-RN® Test Plan*: Nursing Process; Caring; Communication and Documentation; and Teaching and Learning.

Distribution of Content for the NCLEX-RN® Test Plan



Overview of Content

All content categories and subcategories reflect client needs across the life span in a variety of settings.

Safe and Effective Care Environment

The nurse promotes achievement of client outcomes by providing and directing nursing care that enhances the care delivery setting in order to protect clients, family/significant others and other health care personnel.

- *Management of Care* – providing and directing nursing care that enhances the care delivery setting to protect clients, family/significant others and health care personnel.

Related content includes but is **not limited to**:

- Advance Directives
- Advocacy
- Case Management
- Client Rights
- Collaboration with Interdisciplinary Team
- Concepts of Management
- Confidentiality/ Information Security
- Consultation
- Continuity of Care
- Delegation
- Establishing Priorities
- Ethical Practice
- Informed Consent
- Information Technology
- Legal Rights and Responsibilities
- Performance Improvement (Quality Improvement)
- Referrals
- Resource Management
- Staff Education
- Supervision

- *Safety and Infection Control* – protecting clients, family/significant others and health care personnel from health and environmental hazards.

Related content includes but is **not limited** to:

- Accident Prevention
- Disaster Planning
- Emergency Response Plan
- Ergonomic Principles
- Error Prevention
- Handling Hazardous and Infectious Materials
- Home Safety
- Injury Prevention
- Medical and Surgical Asepsis
- Reporting of Incident/Event/Irregular Occurrence/Variance
- Safe Use of Equipment
- Security Plan
- Standard/Transmission-Based/Other Precautions
- Use of Restraints/Safety Devices

Health Promotion and Maintenance

The nurse provides and directs nursing care of the client, and family/significant others that incorporates the knowledge of expected growth and development principles; prevention and/or early detection of health problems, and strategies to achieve optimal health.

Related content includes but is **not limited** to:

- Aging Process
- Ante/Intra/Postpartum and Newborn Care
- Developmental Stages and Transitions
- Disease Prevention
- Expected Body Image Changes
- Family Planning
- Family Systems
- Growth and Development
- Health and Wellness
- Health Promotion Programs
- Health Screening
- High Risk Behaviors
- Human Sexuality
- Immunizations
- Lifestyle Choices
- Principles of Teaching/Learning
- Self-Care
- Techniques of Physical Assessment

Psychosocial Integrity

The nurse provides and directs nursing care that promotes and supports the emotional, mental and social well-being of the client and family/significant others experiencing stressful events, as well as clients with acute or chronic mental illness.

Related content includes but is **not limited** to:

- Abuse/Neglect
- Behavioral Interventions
- Chemical and Other Dependencies
- Coping Mechanisms
- Crisis Intervention
- Cultural Diversity
- End of Life Care
- Family Dynamics
- Grief and Loss
- Mental Health Concepts
- Psychopathology
- Religious and Spiritual Influences on Health
- Sensory/Perceptual Alterations
- Situational Role Changes
- Stress Management
- Support Systems
- Therapeutic Communications
- Therapeutic Environment
- Unexpected Body Image Changes



Physiological Integrity

The nurse promotes achievement of client outcomes by providing and directing nursing care that enhances the care delivery setting in order to protect clients, family/significant others and other health care personnel.

- *Basic Care and Comfort* – providing comfort and assistance in the performance of activities of daily living.

Related content includes but is **not limited** to:

- Assistive Devices
- Complementary and Alternative Therapies
- Elimination
- Mobility/Immobility
- Non-Pharmacological Comfort Interventions
- Nutrition and Oral Hydration
- Palliative/Comfort Care
- Personal Hygiene
- Rest and Sleep

- *Pharmacological and Parenteral Therapies*– providing care related to the administration of medications and parenteral therapies.

Related content includes but is **not limited** to:

- Adverse Effects/Contraindications
- Blood and Blood Products
- Central Venous Access Devices
- Dosage Calculation
- Expected Effects/Outcomes
- Medication Administration
- Parenteral/Intravenous Therapies
- Pharmacological Agents/Actions
- Pharmacological Interactions
- Pharmacological Pain Management
- Total Parenteral Nutrition

- *Reduction of Risk Potential* – reducing the likelihood that clients will develop complications or health problems related to existing conditions, treatments or procedures.

Related content includes but is **not limited** to:

- Diagnostic Tests
- Laboratory Values
- Monitoring Conscious Sedation
- Potential for Alterations in Body Systems
- Potential for Complications of Diagnostic Tests/Treatments/Procedures
- Potential for Complications from Surgical Procedures and Health Alterations
- System Specific Assessments
- Therapeutic Procedures
- Vital Signs

- *Physiological Adaptation* – managing and providing care for clients with acute, chronic or life threatening physical health conditions.

Related content includes but is **not limited** to:

- Alterations in Body Systems
- Fluid and Electrolyte Imbalances
- Hemodynamics
- Illness Management
- Infectious Diseases
- Medical Emergencies
- Pathophysiology
- Radiation Therapy
- Unexpected Response to Therapies

Administration of the NCLEX-RN® Examination

The NCLEX-RN® examination is administered to the candidate by Computerized Adaptive Testing (CAT). CAT is a method of delivering examinations that uses computer technology and measurement theory. Items go through an extensive review process before they can be used as items on the examination. Items on a candidate's examination are primarily four-option, multiple-choice items. Other types of item formats may include multiple-choice items that require a candidate to select one or more responses, fill-in-the-blank items, or items asking a candidate to identify an area on a picture or graphic. Any of the item formats, including standard multiple-choice items, may include charts, tables or graphic images.

With CAT, each candidate's examination is unique because it is assembled interactively as the examination proceeds. Computer technology selects items to administer that match the candidate's ability level. The items, which are stored in a large item pool, have been classified by test plan category and level of difficulty. After the candidate answers an item, the computer calculates an ability estimate based on all of the previous answers the candidate selected. The next item presented to the candidate is selected from the set of items that measure the candidate's ability most precisely in the appropriate test plan category. This process is repeated for each item, creating an examination tailored to the candidate's knowledge and skills while fulfilling all *NCLEX-RN® Test Plan* requirements. The examination continues with items selected and administered in this way until a pass or fail decision is made.

All registered nurse candidates must answer a minimum of 75 items. The maximum number of items that the candidate may answer is 265 during the allotted six-hour time period. Examination instructions and all rest breaks are included in the measurement of the time allowed for a candidate to complete the examination.

More information about the NCLEX® examination, including CAT methodology, is listed on the NCSBN Web site: www.ncsbn.org.

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