

**Follow-Up Report on Strategies Used by Texas Nursing Education Programs  
To Improve Candidates' Performance on the NCLEX® Examination**

**Summary:**

A January 2008 Board report provided information about strategies proposed by both vocational and professional nursing education programs based upon conclusions in their self-study reports related to low NCLEX® examination pass rates in 2005 and 2006. Self-study reports prepared by sixteen (16) vocational and eight (8) professional programs were reviewed by board staff. In the education guideline for writing a self-study report, programs are asked to evaluate factors which contributed to the graduates' performance on the NCLEX® examination and to provide a description of the corrective measures to improve candidates' performance within seven categories (first column below). Board staff added an eighth category based upon program responses. A total of one hundred seventy-eight (178) individual strategies were proposed by the programs within the following categories:

<b>Contributing Factors Categories</b>	<b>Number of Individual Strategies Named</b>	<b>Percent of Total Strategies</b>
Faculty	44	24.72%
Policies	42	23.60%
Students	27	15.16%
Curriculum	24	13.48%
Testing & Evaluation	22	12.36%
Evaluation Methods for Class and Clinical	12	06.74%
Total Program Evaluation	5	02.80%
Structural Changes	2	01.12%

**Update:**

In January 2010 Board staff surveyed the same twenty-four programs requesting information about strategies which were most helpful in improving students' performance on the NCLEX® examination. Even with a follow-up inquiry, six (6) of the twenty-four (24) programs did not respond to the survey. Information from the eighteen (18) programs who did respond listed a total of sixty-two (62) strategies used successfully:

<b>Contributing Factors Categories</b>	<b>Number of Individual Strategies Named</b>	<b>Percent of Total Strategies</b>
Students	21	33.87%
Testing & Evaluation	18	29.03%
Curriculum	10	16.12%
Policies	7	11.29%
Faculty	4	06.45%
Evaluation Methods for Class and Clinical	2	03.23%

The total number of corrective measures implemented related to **students** received the highest percentage of activity and included the use of remediation plans, student orientation, changes in student recruiting, identification of at-risk students, study groups, tutoring programs, extra clinicals, test-taking seminars, a student success counselor, and student development sessions.

Corrective measures related to **testing and evaluation** included the use of standardized tests, changes in test questions, an analysis of exams, use of test blueprints, and computer testing. Implementing standardized testing was mentioned by twelve (12) of the sixteen (16), and was the most frequently mentioned successful measure in the reports.

Corrective measures related to **curriculum** changes included: using a capstone course, implementing a review course, changing sequencing of courses, developing new data collection tools, and using new teaching techniques such as WebCT, podcasts, teaching teams, and case studies.

Corrective measures related to **policies** included changes in admission GPA, admission tests, and grading policies.

Even though programs planned to implement the largest number of corrective measures for **faculty**, only 6% of the programs found these helpful in improving student success. The corrective measures were: using more critical thinking and less lecturing in the classroom, increasing faculty qualifications, and putting more energy into recruiting, mentoring and retaining faculty.

Two programs mentioned changes in their **evaluation methods for class and clinical** and both changed the grading scales in their programs.

The NCLEX® examination pass rate for most of the programs in question improved within a year but no one strategy appears to be have been the determining factor for improvement.

Since so many nursing programs have incorporated the use of standardized exams for the evaluation and progression of students, the Board approved an education guideline on the use of these exams at the July 2010 meeting.

This report is for information only. No action is necessary.