A Review of the 2019 Self-Study Reports
Professional Nursing Education Programs

Background:
Nursing Education Programs with a one-time NCLEX® examination pass rate below the 80% benchmark are required to submit a Self-Study Report (SSR) following board guidelines that analyzes many aspects of the program and determines factors that may have contributed to the pass rate. The program is expected to develop a plan to correct the weaknesses and improve the performance. The NCLEX® pass rate is one of a number of indicators of a quality nursing education program, and the NCLEX® pass rate reflects areas where the program is in noncompliance with the education rules or is not operating within the standards expected of successful programs.

Board Staff review the SSRs and provide responses to the programs with a summary of the program's conclusions from their analysis and plans for improvement. The information from the SSRs provides valuable insight into common issues and challenges facing nursing education programs in Texas and guides Board Staff in monitoring programs and making approval decisions.

In this annual summary report of the SSRs submitted by professional nursing education programs, Board Staff have elected to compare the findings to outcomes measured in a nationwide research study conducted by the National Council of State Boards of Nursing (NCSBN) that focused on quality indicators and warning signs for nursing programs (Alexander et. al., 2020). The quality indicators were identified through a nationwide Delphi study with responses from 174 nursing educators, 71 clinical nurse educators who work with new graduates, and 50 education consultants from Boards of Nursing. This report will discuss findings in the SSRs and compare them with the appropriate Delphi study quality indicators.

Nine Associate Degree Nursing (ADN) programs in Texas were required to submit a SSR to Board Staff in April 2020 based upon their NCLEX-RN® pass rate for 2019. The pass rates for these nine programs ranged from 58.82% to 77.50%. An additional SSR was required from Excelsior College in Albany, New York, for their 78.38% pass rate for their ADN program. Excelsior has a waiver from the Texas Legislature that allows their Texas graduates to take the licensing examination even though they do not have faculty-supervised clinical practice in their online program. No Baccalaureate Degree Nursing Education programs in Texas were required to produce a SSR for 2019.

Students:
The most common area of weakness identified in SSRs relates to admission policies. Many programs realize their admission policies are either too lax or they are not followed. The Delphi study determined that a quality indicator was that the admission criteria emphasized having a background in the sciences. One of the Texas programs found a correlation between the score on an English comprehensive test and success in the nursing program. Programs also realized their readmission policies allowed weak students to be readmitted to the program for a second or third time after a course failure, which has allegedly contributed to a low NCLEX pass rate. A
related weakness found by the Texas programs was that at-risk, weak students were not identified early and were provided with learning helps and remediation. Programs also expressed frustration about knowing how to motivate students to take advantage of remediation activities and review courses. In addition, grade inflation and the adequacy of grading policies were also questioned by the nine programs.

Curriculum:
A quality indicator that ranked high in the Delphi study was the use of an evidence-based curriculum that emphasizes critical thinking and clinical reasoning skills. One of the Texas programs stated their students did not have an understanding of critical thinking, and all reported needs in their curriculum. Some of their comments are listed below:
- Need a thorough curriculum review;
- Will reinforce key concepts in later courses;
- Realize a lack of consistency between didactic and clinical components;
- Need more clinical with acute care patients;
- Will realign the curriculum with the Texas Concept Based Curriculum;
- Will add a course on clinical decision-making;
- Will add a review course;
- Plan to evaluate other standardized exams; and
- Need to improve Management of Care concepts in the curriculum.

Needs for ongoing curriculum review and updates were compounded by the faculty issues below.

Faculty:
Most of the areas of weakness found by the Texas programs stemmed from a lack of enough faculty which in turn often lead to faculty turnover. A Delphi quality indicator is consistent full-time faculty (as opposed to reliance on adjunct faculty). Often when a full-time faculty member resigns, it is easier to hire adjunct faculty which increases the burden on the remaining full-time faculty to manage the faculty responsibilities of the program. If new faculty are hired without an organized orientation and an assigned mentor, they tend to leave the position. Another quality indicator is administrative support for ongoing faculty development – not just because of the information and skills gained by faculty but also because of the energy and new ideas generated among the faculty. Several Texas programs named specific areas for faculty development:
- Test item development and analysis;
- Test blueprints;
- Updates on NCLEX; and
- Teaching clinical judgment.

Other problematic areas mentioned by Texas programs included workload policy, Faculty Handbook not being followed, and lack of communication with faculty from administration.

Program Director:
The Delphi study pointed out the importance of consistent leadership in a nursing program. Board Staff have noted that frequent changes in the program director indicate problems. One of the Texas programs stated they had 11 different directors in 10 years.

Clinical Learning Experiences:
Texas programs recognized a need for hands-on clinical practice for students in the specialty areas of obstetrics, pediatrics, women’s health, and psychiatric nursing. Delphi quality indicators
for clinical include clinical experiences with actual patients that prepare students for the reality of clinical practice and significant opportunities for a variety of clinical experiences with diverse populations. Another quality indicator is quality simulation that is used to augment clinical experiences. One Texas program acknowledged that they need to further develop their simulation experiences.

**Total Program Evaluation (TPE):**

Another quality indicator lies in the ongoing systematic evaluation of the nursing program, and with an effective evaluation process, many problems will be alleviated before they affect the program. One Texas program acknowledged there is a need for more faculty involvement in the TPE and that their TPE needs review and revision.

One other significant quality indicator noted in the Delphi study is that the program has national nursing accreditation. None of the nine Texas program required to submit a SSR is accredited by a national nursing accreditation organization.

**Excelsior College:**

Excelsior College also submitted a SSR for staff review. Their 2019 pass rate we 78.38%. The SSR discussed recent changes made and future plans to include clinical learning experiences. Information in the SSR reported that Excelsior students number 4,611 across the country. There were 925 graduates from the Licensed Vocational Nursing to ADN program who tested for the 2019 exam year in Texas. When students complete the required 67 credits (32 general education + 35 nursing credits), they are required to take a clinical competency test in a hospital setting under the supervision/evaluation by a nursing faculty member. Texas students who are ready to take this clinical exam have been delayed since March when most health care settings ceased allowing students in the facilities.

In March 2020 the Accreditation Commission for Education in Nursing (ACEN) made a decision to deny the ongoing accreditation for Excelsior based upon two factors: the low pass rates and a lack of evidence for the type of clinical requirements. Excelsior filed an appeal which was held on August 26, 2020. A notice was placed on the ACEN web page on October 1, 2020, that Excelsior will maintain accreditation until May 2021. Students who graduate after that date will be required to follow a pathway described in Rule 217.2(a)(4)(E)(i) that requires 500 hours of precepted clinical practice before a full license is issued.

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

References: