Greetings from the Education Consultants

Editor: Gayle P. Varnell, PhD, RN, CPNP-PC (our FROG Expert)

Find, Reflect, Organize, & Generate news = FROG

The Texas Board of Nursing Education Consultants have prepared this newsletter for information purposes for programs. Please share with the nursing faculty in your school.

New Director Orientation

The Nursing Education Team offers Part II, or the Face-to-Face Session, of the Deans, Directors, and Coordinators Orientation three times each year. Completion of Part I, presented as an online learning module, is required prior to attending Part II.

The purpose of the face-to-face session is to provide an interactive, participatory learning experience and afford individuals an opportunity to apply knowledge of Board rules and regulations. In addition to the Nursing Education Team, Director of Enforcement Tony Diggs presents detailed information about the Petition for Declaratory Order, and Director of Operations Mark Majek describes the criminal background check process.

Attendance is mandated by Board Rule 214.6(h) for vocational nursing program coordinators/directors and Rule 215.6(i) for professional nursing program directors/deans. The day is designed to offer an informal learning environment for newly appointed nursing program leaders to network with peers. Repeaters and administrators are welcome, but priority in registration is given to new program directors. The next workshop is scheduled for June 21, 2019, at the William P. Hobby Building in Austin.
Nursing Faculty Module
A resource for nursing faculty, Nursing Faculty Module, is available on the Board website at:


The Education Consultants encourage Program Directors to utilize this learning module to familiarize nursing faculty with Board of Nursing Rules 214 and 215. Completion of the packet should assist faculty members to better understand not only their responsibility and accountability to Board rules and regulations but also those of the Program Director. Documentation of successful completion of the module could be maintained in the nursing faculty’s human resource file to verify professional development.

Pre-licensure Nursing Education Programs Outside Texas’s Jurisdiction
If you, as a Program Director or Nursing Faculty, encounter or become aware of pre-licensure nursing students or nursing faculty members from out-of-state programs during clinical rotations, please advise them to contact the Board of Nursing to discuss formal application. Approval from the Board exempts nursing students from the Nursing Practice Act [Sec.301.004, (a)(6)].

A pre-licensure nursing education program outside Texas’ jurisdiction must obtain Board of Nursing approval prior to conducting clinical learning experiences in the State of Texas. Out-of-state nursing education programs should initiate the process with the Board four months prior to the desired start date of the clinical learning experiences. The request to conduct clinical learning experiences in Texas cannot be approved by the Board until the program is approved by the Texas Higher Education Coordinating Board and/or the Texas Workforce Commission to conduct business/educational activities in the State of Texas.

Detailed information about the approval process is provided in Education Guideline 3.1.1.f, accessible from the Board website at:


Did you know? . . .
A list of out-of-state nursing education programs currently approved to conduct clinical learning experiences in Texas is available at:

https://www.bon.texas.gov/education_formal_education_for_students.asp
Curriculum Changes

When the education rules were revised last year, a fifth area was added to the teaching/clinical content areas for professional nursing education programs: geriatric nursing. This resulted from a growing concern that nursing preparation to care for the aging population should receive more attention. Most programs had content related to nursing care “throughout the lifespan,” but stakeholders in the community wanted geriatric nursing care to receive more attention. Nurses in the future will be caring for more clients over 65 years old and could benefit from nursing knowledge directed to care for older people. Since the acuity of patients in long term care is increasing, all nursing education programs should consider adding clinical learning experiences in that setting.

Nursing Jurisprudence Examination

A question was asked recently about whether a student completing a nursing program and planning to take the NCLEX examination for licensure in another state could take the Jurisprudence Exam to meet a program/course requirement. The answer is “No.” The NJE cannot be taken until an applicant files an examination application and fee with the BON. It is probably wise to NOT make the Jurisprudence Exam a requirement to complete a course or to complete the program.

A Tip from the Exam Team regarding Affidavit of Graduation (AOG) Errors

It’s graduation time again!

When the student’s name does not appear on the WEB-AOG list, this does not mean that you should send the paper-version AOG. Programs should advice the student to contact the Board to confirm the correct school code and graduation date.

Once the AOG is finalized, please allow 10 business days from the date the last item was received for the application to be processed.

2019 is the Texas Board of Nursing’s 110-year Anniversary!
NGN - how to start getting ready:

- Learn how to teach critical thinking to nursing students
- Ask more questions of students in the clinical area
- Study the Clinical Judgment Model
- Subscribe to the free, online NCSBN NCLEX NEWS
- Visit the NCSBN website (www.ncsbn.org) for short videos about the NGN
- Attend an NCLEX Regional Workshop, if possible – next one in September in Phoenix
- As a faculty group, try writing a question together, critique it, and try it

2018 Nursing Education Program Information Survey (NEPIS)

Clinical hours/places data from NEPIS 2017 to 2018

By Pam Lauer, Texas Center for Nursing Workforce Studies

The Texas Center for Nursing Workforce Studies is pleased to share a link to a new dashboard on nursing demographics. This interactive dashboard includes demographics for RNs in Texas for the years 2000 – 2018. The dashboard allows you to explore this data by year, geographic region, and even county.

http://healthdata.dshs.texas.gov/NurseDemographics

This is the third nursing dashboard available on http://healthdata.dshs.texas.gov/Home. On the blue ribbon across the top, click on “Healthcare Workforce & Facilities”, and then click on “Nursing Workforce Data.” There you’ll find this dashboard along with the dashboards on nursing education and Future of Nursing Dashboard Indicators.

We welcome your feedback on this dashboard, ideas for other dashboards, and requests for additional data.

Task Force Meeting, March 25, 2019

The Task Force (TF) to Study Implications of Growth in Nursing Education Programs in Texas met on March 25, 2019, in the William P. Hobby Building in Austin, Texas, to continue to work on the official Board charge to “create a dialogue between nursing education and clinical partners to facilitate optimal clinical learning experiences for all constituents.” At the last meeting, it was agreed that each of the members would bring a guest to the meeting. Educators were to bring someone from practice and the practice members were to bring someone from education. Dr. Pat Yoder-Wise, Chair of the TF, led the group. Members and quests presented and discussed the main issues in the “GAP” between education and practice. The next meeting is scheduled for July 15, 2019, in Austin, Texas.
New Education Guideline 3.8.2.a.

What about observation experiences? New guideline

A question arose at the New Directors’ Orientation Workshop on February 15th about observation experiences.

Rules 214.2 and 215.2 define an Observation Experience as “a clinical learning experience where a student is assigned to follow a health care professional in a facility or unit and to observe activities within the facility/unit and/or the role of nursing within the facility/unit, but where the student does not participate in hands-on patient/client care.”

Noteworthy in definition:
- Student is assigned to follow a designated health care professional
- Student is observing activities and/or the role of the nurse
- No hands-on care

Rules 214.10 and 215.10 under Clinical Learning Experiences state that the faculty are “responsible and accountable for managing clinical learning experiences and observation experiences of students.” Another responsibility of faculty is to “develop criteria for the selection of affiliating agencies/clinical facilities or clinical practice settings which address safety and the need for students to achieve the program outcomes and course objectives through the practice of nursing care or observation experiences.”

Noteworthy in rules for clinical learning experiences:
- Faculty are accountable for managing observation experiences
- Observation experiences should meet specific clinical objectives

The required ratio for 1 faculty to 10 students applies to clinical experiences where the student is providing hands-on care under the supervision of a faculty member. The ratios are different when preceptors are used. The question is: When students are assigned to an observation experience, do they count in the 1 to 10 ratio? IT DEPENDS on whether clearly-written objectives for the observation experience are provided to the student and to the health care provider working with the student. IT ALSO DEPENDS upon the signed agreement between the nursing program and the health care setting.

The faculty member is still responsible for the student even if they are assigned to an observation experience. The faculty member or other program representative must be available to the student if issues arise. The 1 to 10 ratio is common across the country to promote safety of patients as well as faculty involvement in supervision. Like many questions in nursing, the answer to “how many students?” depends upon the situation.

An abundance of observation experiences is discouraged since they do not offer the opportunity for the student to provide hands-on care. However, some observation experiences may provide a unique opportunity for students to learn first-hand about a procedure or activity.

Clinical learning experiences for community health or leadership allow more flexibility since they use a variety of settings and clinical assignments.
New Education Guideline 3.7.1.a. Proposals for Curriculum Changes

Education Guideline 3.7.1.a. Proposals for Curriculum Changes has been revised to provide clarity among the types of curriculum changes. Rules 214.9 and 215.9 advise that major changes include:

- Changes in philosophy and program objectives (which would then change the curriculum)
- Changing the format of the curriculum to a block, integrated, or concept-based format
- Changing the delivery method to distance education, such as online
- Adding a new track or alternative program of study including MEEP, Dual-Credit High School program
- Revisions in program hours
- Adding or removing courses

Curriculum changes are usually the results in the Total Program Evaluation Plan. The best way to begin when a curriculum change is needed is to ask the clinical partners if the program is preparing graduates to meet their needs and whether they have suggestions for the curriculum. The Advisory Committee is also a valuable group for feedback.

Please Welcome our New Nursing Consultant for Education – Ann Amaefule, MSN, RN

Welcome to Ann Amaefule, MSN, RN, our new Nursing Consultant for Education! Ann relocated from Chicago to Austin in December 2018. She represented nursing education as a Board Member for the Illinois Board of Nursing where she served on the Board education committee. Her recent work experience included the role of Dean of Nursing for Northwestern College in Bridgeview, Illinois, and as Director of Nursing for Elgin Community College in Elgin, Illinois, Associate Degree Nursing Education Program, and as Program Coordinator for the Basic Nursing Assistant Program. Ann began her nursing career as a Licensed Practical/Vocational Nurse and proceeded to become a Registered Nurse by completing a BSN at Northern Michigan University in Marquette, Michigan. She earned her MSN from North Park University in Chicago, Illinois. In addition to her experience teaching and directing pre-licensure nursing education programs, Ann’s clinical experience was in the antepartum and postpartum practice areas at Northwestern Memorial Hospital in Chicago, Illinois. Board Staff are pleased to add Ann to the education team as she makes Austin her new home.
Texas Board of Nursing Continuing Nursing Education (CNE) Offerings:

Please visit the CNE Course Catalog at https://www.bon.texas.gov/catalog/ for more information regarding continuing education activities.

### Upcoming Workshops

**Protecting Your Patients and Your Practice, Nursing Jurisprudence & Ethics @ #**
- This workshop has been approved for 8.6 contact hours
- ($109 – pre-registration / $125 – walk-in, if space available)

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<tr>
<td>Wed, Jun 5, 2019</td>
<td>DoubleTree Dallas Campbell Centre</td>
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<td>Thu, Sep 12, 2019</td>
<td>Wyndham El Paso Airport Hotel</td>
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### Online Courses

**Determining APRN Scope of Practice #** – 1.4 contact hour ($25)
**Documentation: So Let It Be Said . . . In Writing That Is #** – 1.4 contact hour ($25)
**Nursing Regulation for Safe Practice @ #** – 2.0 contact hours ($25)
**Prescriptive Authority for APRNs #** – 1.2 contact hour ($25)

Please review our system requirements.

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**Legend**

@ This course meets the 2-Hour CNE requirement for nursing jurisprudence and ethics established during the 2013 Legislative Session.

# This continuing nursing education offering was approved by the Texas Board of Nursing. The Texas Board of Nursing is an approved provider of continuing education by the Alabama Board of Nursing, ABNP1509, expiration date August 17, 2020.

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