



## In This Issue

- 1 Greeting from the Education Team
- 1 Please Welcome Elise McDermott, MSN, RN
- 2-3 Kudos to Texas Nursing Programs NCSBN Pass Rates for 2023!
- 3 The Perfect Time to Revisit the BON Website
- 3 A Reminder to Nursing Programs
- 4 Upcoming Events
- 4 Curriculum Changes When do you need approval for changes in the curriculum?
- 5 Results from Clinical Learning Experiences Survey
- 6 Where do you go to Find Information on Nursing Licensure?
- 7 Using slack time in clinicals for creative learning activities for nursing students
- 8 Did You Know?
  - Rule Exemptions
  - NCSBN Examination Publications
- 9-11 New Education Guideline Launched
- 11-14 NEW 3.7.8. Education Guideline: Including Long-term Care Facilities Among Settings for Clinical Learning Activities
- 15 Dr. Jolene Zych
- 15 Certificates of Approval
- 15 Contact Information for the Education Team

## Greetings from the Education Team

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



**Find, Reflect, Organize, & Generate news = FROG**

The Texas Board of Nursing (BON) Education Team has prepared this newsletter for information purposes for programs. Please share it with the nursing faculty in your school. If you have comments about what you would like to learn about in future newsletters, please send an email to: [gayle.varnell@bon.texas.gov](mailto:gayle.varnell@bon.texas.gov)

## Please Welcome Elise McDermott, MSN, RN



Hello, I am Elise McDermott, MSN, RN, the current Director of Nursing for the Texas Board of Nursing, effective September 1, 2023. In this new role with the Board, I am looking forward to working with you all and getting to know your programs more. I have been with the Board for over seven years, working mainly in the regulation of nurses once they are licensed. While at the Board, I have been a Nursing Consultant for Practice and a Team Lead for Nursing Practice prior to becoming Director. As the Director of Nursing, I lead policy development and regulatory activities associated with pre-licensure nursing education programs, APRN licensure operations, and standards of nursing practice in Texas. Prior to my work with the Board, I practiced in a variety of settings, including organ donation, perioperative services, and labor and delivery nursing. I hold Bachelor of Science degrees in Biomedical Science and Nursing, and a Master of Science degree in Nursing Education from Texas A&M University. My areas of regulatory expertise include nursing jurisprudence and ethics, and nursing peer review. I have authored several articles about various nursing practice topics for the Board's quarterly newsletter, *The Bulletin*, and co-authored an article on peer review evaluation of nursing practice breakdown, published in the *Journal of Nursing Regulation*. I have also served and continue to serve as an expert witness at the State Office of Administrative Hearings on the Board's rules and regulations pertaining to nursing practice. Additionally, I served two terms on the NCLEX Item Review Subcommittee of the National Council of State Boards of Nursing.

## Kudos to Texas Nursing Programs NCSBN Pass Rates for 2023!



The period between January 1, 2023, and December 31, 2023, is used for the purpose of determining programs' NCLEX-PN® examination pass rates. The attached report provides final 2023 NCLEX-PN® examination pass rates of first-time test-takers from the vocational nursing education programs in Texas. Programs with an asterisk (\*) are recognized with commendations for their pass rates of 90% or above. New programs that have not had graduates are not included in the report. Rule 214.4(c) states that "Approval status is determined biennially by the Board on the basis of the program's compliance audit, NCLEX-PN® examination pass rate, and other pertinent data". Certificates of Approval are provided to all programs every two years and will be issued in 2024.

### Trends for NCLEX-PN®:

- The overall 2023 NCLEX-PN® examination pass rate for Texas programs was calculated to be **92.92% (3,190/3,433)** after data were reviewed by the programs and finalized. The Texas pass rate is above the national average of **86.68%**.
- Texas, California, and Florida have the largest number of VN program graduates.
- Fifty-nine VN education programs in Texas experienced a ninety percent (90%) or higher 2023 NCLEX-PN® examination pass rate with 17 programs scoring 100%.
- Six programs will be required to submit a Self-Study Report due to a pass rate below 80%.

The following table provides a comparison of Texas NCLEX-PN® pass rates with the national average.

Year	2023	2022	2021	2020	2019
<b>Average for VN Texas Programs</b>	92.92% 3,190/3,433	87.38% 3,268/3,740	86.49% 3,323/3,842	88.52% 3,818/4,313	89.05% 3,789/4,255
<b>National Average</b>	86.68% 41,214/47,549	79.93% 38,075/47,634	79.60% 36,898/46,353	83.09% 37,934/45,656	85.63% 41,299/48,228

## Trends for NCLEX-RN®:

- The overall 2023 NCLEX-RN® examination pass rate for Texas programs was calculated to be 91.15% (**13,788/15,127 candidates**), which is above the national average of **88.56%**.
- Texas is one of three states with more than 10,000 first-time candidates for the NCLEX-RN® examination. The other two states are California and Florida.
- Eighty-three professional nursing education programs in Texas experienced a ninety percent (90%) or higher 2023 NCLEX-RN® examination pass rate with 17 programs scoring 100%.
- Two professional programs will be required to submit a Self-Study Report due to a pass rate below 80%.

The following table provides a comparison of Texas NCLEX-RN® pass rates with the national average.

Year	2023	2022	2021	2020	2019
<b>Average for RN Texas Programs</b>	91.15% 13,788/15,127	84.28% 12,499/14,831	86.70% 13,293/15,333	91.00% 12,039/13,231	91.90% 11,905/12,954
<b>National Average</b>	88.56% 165,059/186,375	79.91% 150,214/187,986	82.13% 167,214/203,608	86.76% 151,617/174,750	88.07% 150,508/170,899

## This a brand-new year and the perfect time to Revisit the BON Website!

The Education Guidelines have recently been reviewed.

Go to the Education Link and select Education Guidelines that are at:  
[https://www.bon.texas.gov/education\\_guidelines.asp.html](https://www.bon.texas.gov/education_guidelines.asp.html)

Here you will find the answers to many of your questions, such as Education Guideline 3.6.1. Proposals for Curriculum Changes. This will get you started and should you still have questions, contact your Education Consultant to assist you.



[Back to Table of Contents](#)



**A Reminder to Nursing Programs**  
For Affidavit of Graduation (AOG) Questions, please contact:  
Rosemary Riojas  
Licensing Department  
[Rosemary.Riojas@bon.texas.gov](mailto:Rosemary.Riojas@bon.texas.gov)



## Upcoming Events

### 2024 Quarterly Board Meetings

April 18-19, 2024

July 18-19, 2024

October 24-25, 2024

BON **Board Meeting** agendas and minutes are available on the Board of Nursing website under the **News** heading.

### Texas BON YouTube Homepage

### Deans & Directors Virtual Orientation Sessions:

June 5, 2024

September 4, 2024

### Nursing Education Resources

Education Guidelines

Education FAQs

Education Newsletters

### Nursing Education Inquiries

Nursing Education  
PH: (512) 305-6816

Texas Board of Nursing  
1801 Congress Avenue  
Suite 10-200  
Austin, Texas 78701

[www.bon.texas.gov](http://www.bon.texas.gov)

## Curriculum Changes

### When do you need approval for changes in the curriculum?

Rules 214.9 and 215.9 require that a program seek Board approval if a curriculum change is a “major curriculum change.” The rules also describe the difference between major and minor curriculum changes. A minor change includes editorial updates of philosophy/mission and objectives/outcomes; or a redistribution of course content or course hours. These may be improvements in wording in the mission or objectives, or moving hours between courses. Such changes do not require Board approval, but Board Staff appreciate notification of these changes and will maintain such changes in the program file for any questions that may arise.

Board approval of a program is based in part on the approval of the program curriculum and Board Staff are authorized to approve changes and doing so, Board Staff are aware of the current curriculum. Major changes include:

- Changes in philosophy/mission and objectives/outcomes which result in a reorganization of the entire curriculum such as changing the format of the curriculum (integrated, block, concept-based, etc.) or the delivery method (online or hybrid);
- The addition of a track or alternative program of study (MEEP, Dual-Credit High School, abbreviated curriculum, etc.);
- Revisions in program hours; or
- The addition or reduction of a course or courses.

Programs may also need to seek approval from other regulatory agencies or accreditation organizations.

As always, contact your Education Consultant if you have questions. The curriculum should be in ongoing evaluation by the faculty and curriculum changes made based on evaluation outcomes.

Recently the BON received information from the Accreditation Commission for Education in Nursing or ACEN reporting approved substantive changes to accredited nursing programs in Texas. No Texas programs were included. If your program is accredited by one of the national nursing accreditation organizations, they require approval of changes recognized as “substantive.” Curriculum changes are one of several changes that need approval through a substantive change report. You will notice in our guideline on Accredited Programs that Board Staff do not approve curriculum changes, but request you submit those changes to the accreditation agency and let us know of the approval.

*Thank You!*

[Back to Table of Contents](#)



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## Results From Clinical Learning Experiences Survey

### Notes about Clinical Learning Experiences

In December 2023, Board Staff submitted an online questionnaire to Program Directors asking a few questions about clinical experiences. About one-third of each program type (VN, ADN, BSN) responded with very introspective and interesting answers that are worth sharing:

1. Describe one or more successful clinical experiences that provide examples of good clinical learning for hands-on practice (in order of times listed by programs):

- Use of preceptors
- Clinical settings with diverse opportunities
- Nurses willing to work with students
- Community settings
- Clinical partnership arrangements
- Dedicated education units
- Simulation experiences
- Positive relationships with clinical settings
- Long term care settings
- Home health experiences with nurses
- \*\*\*Pediatric Summer Camp for disabled/chronically ill children
- \*\*\*Hiring full-time faculty who also work part-time in the clinical setting
- \*\*\*Pairing first-level students with senior-level students for a mentoring experience

\*\*\*creative

2. What are your greatest challenges in providing hands-on clinical experiences:

- Competition among programs for clinical sites/spots
- Lack of qualified faculty
- Limited faculty-to-student ratios allowed by clinical settings
- Unwillingness of nurses to work with students
- Difficulty finding preceptors
- Limited places for VN clinicals
- Lack of faculty to supervise evening/night clinicals
- Students not motivated
- Limited opportunities for using EHR and giving meds
- Finding summer rotations for clinicals

3. Clinicals which best prepare students for the workplace:

- Clinicals in multiple sites
- Faculty-led clinicals
- Using preceptors
- Skills labs for foundational skills
- Soft skills
- Clinical teaching tools: care plans, giving medications, documentation, using clinical judgment, post conferences, EHR
- Community involvement
- LTC
- Specialty clinicals

[Back to Table of Contents](#)

## Where do you go to Find Information on Nurse Licensure?

The NCSBN Nurse Licensure Guidance Tool is available here:

<https://www.ncsbn.org/nursing-regulation/licensure/nurse-licensure-guidance.page>



# Nurse Licensure Guidance

## Questions About Nurse Licensure?

Nurse licensure can be complex. NCSBN's Nurse Licensure Guidance tool helps international and U.S.-educated nurses learn about state-specific licensure requirements, based on where they want to live and practice in the U.S.

For registered nurses (RNs) and licensed practical/vocational nurses (LPN/VNs) educated in the U.S., the tool displays licensure requirements in their state, jurisdiction or territory and points them to helpful resources, such as:

- Direct link to licensure application (or application portal)
- Other relevant application information
- Link to state/jurisdiction's Nurse Practice Act
- Board of nursing (BON) contact information
- Nurse Licensure Compact (NLC) links

For internationally educated RNs and LPN/VNs, the tool displays licensure requirements for where they plan to live and practice. It also gathers important information directly from BONs, such as:

- BON-accepted English proficiency exams
- BON-accepted credentials evaluations services
- Social Security number requirements
- Other relevant application information
- BON contact information

Both sections of the tool include an interactive U.S. map to illustrate where the nurse would and would not have authorization to practice based on their selections.



**Learn more today**  
**ncsbn.org**

[Back to Table of Contents](#)

## Using slack times in clinicals for creative learning activities for nursing student

Didactic and clinical nursing education is continually changing. Although critical thinking and clinical decision-making will always be foundational goals for students in any nursing education program, the process of how students arrive at these essential skills is always evolving. Challenging students by creating a clinical learning environment that is interactive and thought-provoking has been shown to promote successful student outcomes and enhance critical thinking and clinical decision-making (Jessee, 2021). However, we know that oftentimes clinical experiences are not always robust and even difficult to find. In the event that hands-on clinical time might be delayed or interrupted, the following are some strategies that might prove helpful to use during unexpected downtime.

- Initial Review - Have students document what they hope to accomplish during their clinical learning experience and how they expect to achieve this learning. Take inventory of each student's expectations and help them reach their learning goals.
- Critical Reflection – This is different from simply journaling about the clinical day. Have students reflect on not only what they did during their day, but also what they did that could be improved upon, and/or what they might do differently the next time they are in the clinical setting (Melrose et al., 2021).
- Case Study – Case studies have been used successfully in many prelicensure nursing education programs to narrow the gap between nursing education and practice (Englund, 2020). Case studies can be developed using one's own clinical experiences or found on many nursing or healthcare related websites.
- Team Leading – Much like in the clinical areas students are frequenting, there is often a nurse designated as a team leader. This is typically a rotating position where someone is assigned to this designation for a certain period of time. Have students practice being the team leader for the clinical group and each week assign this role to a new student. The student should be aware of what is expected in this role and arrive to the clinical site early to make assignments for the other students. The team leader should round with students, be aware of any discharge planning needs, remind students to view new laboratory tests that have been resulted, or physician's orders that have been updated, and the team lead should organize breaks and mealtimes for all other students. This is a great way to help students understand transition-to-practice competencies, time management, and continuity of care (Melrose et al., 2021).
- Preferred Learning Styles – take an inventory of preferred learning styles in the group to ensure all styles are being taught in the clinical setting.
- Peer support opportunities – Provide activities for students to work in groups with others in the clinical setting to understand the perspectives of the group members, and to discuss best strategies used to allay fears. Peer support can be an important tool to promote collegiality (Melrose et al., 2021).



## References

- Englund, H. (2020). Using unfolding case studies to develop critical thinking skills in baccalaureate nursing students: A pilot study. *Nurse Education Today*, 93, 104542. <https://doi.org/10.1016/j.nedt.2020.104542>
- Jessee, M. A. (2021). An update on clinical judgment in nursing and implications for education, practice, and regulation. *Journal of Nursing Regulation*, 12(3), 50–60. [https://doi.org/10.1016/s2155-8256\(21\)00116-2](https://doi.org/10.1016/s2155-8256(21)00116-2)
- Melrose, S., Park, C., & Perry, B. (2021). *Creative clinical teaching in the health professions*. Athabasca University Press.

[Back to Table of Contents](#)

## Did You Know?



**Did You Know?**

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### *Rule Exemptions for Nursing Education Programs with Voluntary National Nursing Accreditation*

Nursing education programs with voluntary national nursing accreditation are exempt from the Texas Board of Nursing (Board) education rules that are comparable to accreditation standards, but the programs are not exempt from rules related to protecting the public, patient safety, and content related to jurisprudence. Board Education Guideline 3.2.3. Specific Exemptions from Education Rule Requirements for Nursing Education Programs Accredited by a Board-approved National Nursing Accreditation Organization, accessible at: 3-2-3- Guideline.pdf (texas.gov), presents complete information about the exemptions for nursing education programs accredited by a Board approved national nursing organization as well as details about rule sections from which these accredited programs are not exempt. Board Rule 214 Vocational Nursing Education, Section 4 Approval, sets forth the requirements for approval of a vocational nursing education program whereas Board Rule 215 Professional Nursing Education, Section 4 Approval, sets forth the requirements for approval of a professional nursing education program. During the Texas Legislative 80th Session, legislators approved amendments to Board Rules 214 and 215, based upon House Bill 2426, that allowed programs holding national nursing accreditation specific exemptions to Board rules. Areas for exemption have been identified through crosswalks between national nursing accreditation standards and Board rules. In addition, Rule 214.4.(c)(4) and Rule 215.4.(c)(4) waive the requirement for a regular (six-year) Board survey visit to a nursing education program that is accredited by a Board-recognized national nursing accrediting agency. Please be mindful that it is the responsibility of the nursing education program with voluntary national nursing accreditation to provide the Board with accreditation reports from the accrediting agencies and to continue to provide other information required by the Board.

Other resources that will help a program examine their graduates' performance on the NCLEX compared to other candidates are available on the NCSBN website. If you have not done so, please consider subscribing to their mailing list. Links to the available resources are provided below.

Every quarter, NCSBN Examinations publishes the Exam Statistics and Publications on NCSBN's website (<https://www.ncsbn.org/exams/exam-statistics-and-publications.page>) to give the public general data regarding volume and performance on the NCLEX-RN and NCLEX-PN Examinations.

The NCLEX Pass Rates (<https://www.ncsbn.org/exams/exam-statistics-and-publications/nclex-pass-rates.page>) document provides information on volume and pass rates of NCLEX exams broken down by the following candidate types:

- \* Educational program; and
- \* Domestic vs. internationally educated.

The NCLEX Fact Sheet (<https://www.ncsbn.org/exams/exam-statistics-and-publications/nclex-fact-sheet.page>) document also provides volume and pass rates for both U.S. and international candidates but also includes information about the top five countries of education by volume.

**Did you know?**

*Subscribe to the NCSBN Mailing List to receive the latest news, publications, and event information from NCSBN.*

[Back to Table of Contents](#)



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## New Education Guideline Launched: Including Long-term Care Facilities Among Settings for Clinical Learning Activities

by Christine Riley, MSN, RN, Practice Consultant



The dynamic field of nursing education is constantly evolving to meet the demands of the changing healthcare landscape. As healthcare continues to advance, people are living longer and the need for skilled and compassionate healthcare professionals in long-term care (LTC) facilities has become increasingly important. The report titled *Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity* reinforced that “nurses will need to be educated to care for a population that is both aging, with declining mental and physical health, and becoming increasingly diverse” (National Academies of Sciences, Engineering, and Medicine, 2021).

Collaborative efforts between The Texas Board of Nursing (BON) and the Texas Health and Human Services Commission (TX HHSC) reviewed current nursing educational programs and evaluated how these programs could be used to meet professional nursing standards and benefit care provided to the patient populations living in LTC facilities. This collaboration led to the development of a new education guideline for nursing education programs: 3.7.8 Education Guideline - Including Long-term Care Facilities Among Settings for Clinical Learning Activities. Through this guideline, the BON encourages all nursing programs providing LVN and RN education to utilize LTC settings for clinical experiences so that all students will be exposed to the practice setting at some point in the educational program.

### Board Rules on Clinical Experiences:

The Board does not specify a clinical hour requirement for any specific setting. Board Rule [214.9\(c\)\(3\)](#) for vocational nursing education and Board Rule [215.9\(c\)\(4\)](#) for professional nursing education state that hours in clinical learning experiences shall be sufficient to meet program of study requirements with a rationale for the ratio of contact hours assigned to classroom and clinical learning experiences. The Board requires clinical learning experience with the geriatric population but is not overly prescriptive about in which settings.

### Why incorporate Long-Term Care (LTC) settings into nursing school curriculum?

The underutilization of LTC facilities as clinical practice settings may be due to perceptions that these facilities are less demanding or complex than acute care settings (i.e., hospitals), and they lack challenging learning opportunities (Iheduru-Anderson, 2015; Splitgerber, et al., 2021). Similarly, LTCs may be hesitant to allow nursing students to work with their residents or view students as an additional stressor (Iheduru-Anderson, 2015). However, working relationships between a LTC facility and a nursing education program can be mutually beneficial among all parties involved including aspiring nurses, residents living in LTC, and LTC staff.

**Student benefits:** Students are provided with a variety of learning opportunities which offers a stable foundation and successful transition into the nursing profession. The experience of day-to-day operations of a LTC facility provides students with an integrated understanding of residential care, one that goes beyond the episodic nature of acute care. Clinical experiences in LTC settings can provide valuable benefits for student nurses such as:

- Involvement in the provision of care on an ongoing basis throughout the resident’s aging process for both urgent and chronic health conditions (Dunbar-Jacob and Fulmer, 2023; Splitgerber, et al, 2021),

- enhancement of skills related to performing focused and comprehensive assessments, developing care plans, and providing health education (Iheduru-Anderson, 2015),
- interdisciplinary collaboration among other healthcare team members (Dunbar-Jacob and Fulmer, 2023; Iheduru-Anderson, 2015),
- exposure to nurse leadership roles and leadership techniques to manage adequate staffing levels and determine which tasks can be assigned or delegated (Dunbar-Jacob and Fulmer, 2023; Splitgerber, et al, 2021), and
- the exposure to aspects of holistic care beyond immediate medical needs, such as resident well-being and quality of life (Splitgerber, et al, 2021).

Resident benefits: LTC residents measure the quality of care in nursing homes by several parameters, such as autonomy, social relationships, joy of life, and meaningful activities (Haugland and Giske, 2021). This population can also be prone to loneliness and isolation. Studies have suggested that the relational qualities of the nurse-patient interaction are key to the residents' sense of self-worth and well-being. Nursing students in LTC settings supplement staffing levels, allowing for greater time spent with the residents and their families. Other additional benefits include:

- having a nursing student as an additional caretaker and advocate for safe resident care and quality of life,
- creativity and updates to evidence-based nursing practices can lead to positive health outcomes, and
- meaningful engagement, including indoor and outdoor activities that provide a sense of home for nursing home residents.

LTC staff benefits: Just like other healthcare settings, LTC facilities experience staffing shortages and sometimes struggle to find sufficient staff and retain the staff they have. Nursing educational programs have a special opportunity to support and assist LTC staff and improve health inequity issues within their communities through clinical experiences in LTC settings.

LTC staff benefits could include:

- an increase in the volume of qualified caretakers,
- opportunity for LTC staff to evaluate current policies, develop new quality improvement initiatives, and provide staff training to meet resident needs, and
- the chance to promote and engage future nurses in the LTC setting (Farsetta, 2015; Splitgerber, et al, 2021).

Please see 3.7.8 Education Guideline - Including Long-term Care Facilities Among Settings for Clinical Learning Activities for more information, including suggestions for students to participate in the LTC practice setting. Keep in mind, this is not an exhaustive list, and these don't have to be formal clinical experiences.

Nursing education programs are obligated to prepare students for the diverse challenges they may encounter in their careers. Incorporating LTC training is a strategic investment in preparing future nurses for a seamless transition into the nursing profession, as well as meeting the growing needs of our healthcare system.

## References:

Dunbar-Jacob, J. and Fulmer, T. (2023). Nursing homes for nursing education. *J Prof Nurs.* 2023 May-June; 46: A1-A2; doi: [10.1016/j.profnurs.2023.03.019](https://doi.org/10.1016/j.profnurs.2023.03.019)

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Iheduru-Anderson, K. (2015). Why long-term care is an excellent clinical learning environment. *American Nurse Today*. Volume 10, Number 5. <https://www.myamericannurse.com/long-term-care-excellent-clinical-learning-environment/>

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The National Academies Press. <https://doi.org/10.17226/25982>.

Splitgerber, H., Davies, S., and Laker, S. (2021). Improving clinical experiences for nursing students in nursing homes: An integrative literature review. *Nurse Education in Practice*. Volume 52, March 2021, 103008. <https://www.sciencedirect.com/science/article/abs/pii/S1471595321000445>

## Additional Resources

- Advancing Care Excellence for Seniors (ACES), National League for Nursing. <https://www.nln.org/education/teaching-resources/professional-development-programsteaching-resourcesace-all/ace-s>
- Johnson-Turpin Center for Gerontological Nursing, University of Texas at Austin School of Nursing, <https://nursing.utexas.edu/research/luci-baines-johnson-and-ian-j-turpin-center-gerontological-nursing>
- Long Term Care Facilities. Centers for Medicare & Medicaid Services (CMS). <https://www.cms.gov/medicare/health-safety-standards/conditions-coverage-participation/long-term-care>
- Long-term Care Providers. Texas Health and Human Services Commission. <https://www.hhs.texas.gov/providers/long-term-care-providers>

[Back to Table of Contents](#)

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## TEXAS BOARD OF NURSING

### 3.7.8. EDUCATION GUIDELINE

#### Including Long Term Care Facilities Among Settings for Clinical Learning Activities

Effective: 3/11/2024

#### Background:

Based upon requests from the Texas Health and Human Services Commission (TX HHSC) Long Term Care Facilities Council (LTCFC) for more involvement of nursing education programs in using LTC as a clinical learning experience, Board Staff reviewed current use of LTC settings among clinical placements.

Annual data from the 2023 Nursing Education Program Information Survey (NEPIS) report that covers academic year 2023 indicated that the mean number of hands-on clinical practice hours spent in long term care settings hours for vocational nursing (VN) programs was 143.9 hours and the mean number of hands-on clinical practice hours for professional (RN) programs was 30.8 hours. Nine VN programs and 45 RN programs spent zero hours in LTC practice.

Academic Year 2023 Clinical Practice Hours for VN Programs					
Setting	Minimum	Maximum	Mean	Median	St Dev
Acute care setting	0.0	682.0	206.7	190.0	159.0
Long-term care setting	0.0	828.0	143.9	80.0	164.6
Community setting	0.0	265.0	44.3	25.0	52.1
Observational setting	0.0	96.0	16.0	0.0	23.3
Other (please specify)	0.0	369.0	24.0	0.0	62.5

Academic Year 2023 Clinical Practice Hours for RN Programs					
Setting	Minimum	Maximum	Mean	Median	St Dev
Acute care setting	0.0	2341.0	405.5	390.5	288.2
Long-term care setting	0.0	204.0	30.8	12.0	45.6
Community setting	0.0	293.0	57.6	44.0	55.3
Observational setting	0.0	292.0	18.8	0.0	37.7
Other (please specify)	0.0	882.0	33.2	0.0	110.8

### Education Rules Requirements:

Rule 214.2(10) requires "...The clinical settings for faculty-supervised hands-on patient care include a variety of affiliating agencies or clinical practice settings, including, but not limited to: acute care and rehabilitation facilities; primary care settings; extended care facilities (long-term care and nursing homes); residential care settings; respite or day care facilities; community or public health agencies; and other settings where actual patients receive nursing care."

Rule 214.9(e) requires "...the program of study shall include, but not be limited to, the five (5) areas described as follows: Faculty-supervised, hands-on patient care clinical learning experiences in acute and non-acute settings may include **long-term care**, rehabilitation settings, clinics, respite or day care settings, or other settings where the clinical objectives can be met: (1) nursing care of children; (2) maternity nursing; (3) **nursing care of the aged**; (4) nursing care of adults; and (5) nursing care of individuals with mental health problems (optional clinical for mental health).

(3) Nursing Care of the Aged. Content includes:

- (A) Physical, psychological, and cognitive changes associated with the aging process.
- (B) Implications of aging in planning nursing care.
- (C) Nursing care of individuals experiencing common health problems associated with aging.
- (D) Palliative and end-of-life care.
- (E) Examples of clinical experiences may include but are not limited to: long-term care and rehabilitation settings, acute care units serving adult clients of all ages, clinics, elderly respite or day care settings, nursing homes, and assisted living settings."

Rule 215.2(10) requires "...The clinical settings for faculty-supervised hands-on patient care include a variety of affiliating agencies or clinical practice settings, including, but not limited to: acute care and rehabilitation facilities; primary care settings; extended care facilities (**long-term care and nursing homes**); residential care settings; respite or day care facilities; community or public health agencies; and other settings where actual patients receive nursing care."

Rule 215.9(e) requires "the program of study shall include, but not be limited to, the following areas: (1) non-nursing courses, clearly appropriate for collegiate study, offered in a supportive sequence; (2) nursing courses which include didactic and clinical learning experiences in the five content areas, medical-surgical, **geriatric**, maternal-child health, pediatrics, and mental health nursing that teach students to use a systematic approach to clinical decision-making and prepare students to safely practice professional nursing through the promotion,



prevention, rehabilitation, maintenance, restoration of health, and palliative and end-of-life care for individuals across the lifespan.”

### **The Value of LTC Clinical Experiences:**

Clinical learning experiences in LTC have traditionally been considered as a common setting for VN programs since many LVNs become employed in LTC settings following graduation. With the growing shortage of clinical spaces for nursing education and the need for nursing students to have exposure to LTC settings, this guideline offers ideas for clinical practice experiences in all levels of nursing education. Several positive outcomes include providing:

- A valuable experience for students providing care for a vulnerable population:
- An introduction to primary care and public health services
- An opportunity to apply a real-life scenario to required laws, such as those related to ethics and jurisprudence, since resident rights and Texas Administrative Code (TAC) are not commonly covered in nursing programs
- An increase in individualized care for the population requiring health services due to the inclusion of nursing students

The LTC clinical experience could be beneficial for nursing students as it refines therapeutic communication and skills related to performing focused and comprehensive assessments, advocating for residents, serving on a care-planning committee, and providing care for both urgent and chronic health conditions (Dunbar-Jacob and Fulmer, 2023; Iheduru-Anderson, 2015; Splitgerber, et al, 2021). By working with residents in long-term care, nursing students learn more about the aging process to compound what they are taught in the classroom. For instance, the setting offers firsthand experience with professional boundaries, compassion, and dealing with setbacks and loss throughout the natural stages of life.

The presence of nursing students would not be included in staffing ratios but would provide value to the aging population by contributing another layer of assessment and stimulation. Such an experience, for students, may encourage nursing students to consider careers outside the hospital (Farsetta, 2015; Splitgerber, et al, 2021).

### **Suggested Activities for Nursing Students in LTC:**

There are many options for activities. The type of activity can vary for different program types and may be different depending on the level of the student in their program (i.e. entry level vs near graduation). Some activities may or may not require direct faculty supervision.

- Faculty-supervised patient care where students are assigned to patients and provide nursing care, administer medications, and engage in a total patient assessment with documentation, patient plan, implementation and evaluation.
- Participate in group activities with the patient.
- Provide focused care to evaluate one or more patients' activity level, cognition, fall risk, and abilities for self-care.
- Group work with other students to plan therapeutic activities for patients that include socializing and appropriate physical and cognitive activities to promote overall health, along with the evaluation of these activities.
- Use reminiscence therapy and practice therapeutic communication techniques.
- Work with the interdisciplinary team members and family members to collaborate on the best interest of the resident's health care. Participate in family meetings or care team meetings to discuss needs of social work, physical therapy, speech therapy, etc.
- Tour the facility with the Director of Nursing and shadow them for a shift to observe the management role and to assist in the tasks for the day.

- Senior or Junior level students serve as team leader for entry level nursing students during a rotation.
- Senior level students make rounds on a group of patients and give report of all patients at the end of shift to students and/or staff.
- Focus on a major nursing consideration, such as SAFETY, listing all possible safety concerns in the facility.
- One student serving as charge nurse, making assignments, and supervising the nursing care team.
- Plan and carry out an improvement project for LTC residents.
- LVN Preceptorship experience.
- Develop practice/education partnership internships allowing student nurses to be hired as unlicensed personnel or apprenticeship nurses. This arrangement can serve two purposes: meeting clinical hours/objectives through an employment model if all requirements for such are in order.

## References

Dunbar-Jacob, J. and Fulmer, T. (2023). Nursing homes for nursing education. *J Prof Nurs.* 2023 May-June; 46: A1-A2; doi: [10.1016/j.profnurs.2023.03.019](https://doi.org/10.1016/j.profnurs.2023.03.019)

Farsetta, D. (2015). Introducing Nursing Students to Long-Term Care. Center for Aging Research and Education. CARE at the UW-Madison School of Nursing. <https://care.nursing.wisc.edu/2015/07/11/introducing-nursing-students-to-long-term-care/>

Iheduru-Anderson, K. (2015). Why long-term care is an excellent clinical learning environment. *American Nurse Today.* Volume 10, Number 5. <https://www.myamericannurse.com/long-term-care-excellent-clinical-learning-environment/>

Splitgerber, H., Davies, S., and Laker, S. (2021). Improving clinical experiences for nursing students in nursing homes: An integrative literature review. *Nurse Education in Practice.* Volume 52, March 2021, 103008. <https://www.sciencedirect.com/science/article/abs/pii/S1471595321000445>

## Resources:

Advancing Care Excellence for Seniors (ACES), National League for Nursing. <https://www.nln.org/education/teaching-resources/professional-development-programsteaching-resourcesace-all/ace-s>

Center for Excellence in Aging Services and Long-Term Care, University of Texas at Austin School of Nursing. <https://www.utlongtermcarenurse.com/>

Johnson-Turpin Center for Gerontological Nursing, University of Texas at Austin School of Nursing, <https://nursing.utexas.edu/research/luci-baines-johnson-and-ian-j-turpin-center-gerontological-nursing>

Long Term Care Facilities. Centers for Medicare & Medicaid Services (CMS). <https://www.cms.gov/medicare/health-safety-standards/conditions-coverage-participation/long-term-care>

LTC Facilities Council, Advisory Committee, Texas Health and Human Services Commission. <https://www.hhs.texas.gov/about/leadership/advisory-committees/ltc-facilities-council>

Long-term Care Providers. Texas Health and Human Services Commission. <https://www.hhs.texas.gov/providers/long-term-care-providers>

National Hartford Center of Gerontological Nursing Excellence. <https://www.nhcgne.org/>

Texas Center for Nursing Workforce Studies (TCNWS), Texas Department of State Health Services (DSHS). <https://www.dshs.texas.gov/texas-center-nursing-workforce-studies/nursing-education-reports>

The John A. Hartford Foundation. <https://www.johnahartford.org/>

[Back to Table of Contents](#)

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## Dr. Jolene Zych, PhD, APRN, WHNP-BC



The BON lost a very Valued staff member when Dr. Jolene Zych retired at the end of January 2024. I came to know Dr. Zych when I was selected to serve on the Advanced Practice Advisory Committee many years ago. She was a mentor and role model to me and a dear friend. She will be missed. As much as she loved working at the BON, her parents needed her more and she retired so that she could help them with their health care needs. We all wish her well!

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## Certificates of Approval

Texas Board of Nursing *Certificates of Approval* are e-mailed to all Board approved program directors during **May** of even-numbered years. These documents are suitable for framing! The timing of this distribution is designed to follow formal Board approval of the NCLEX pass rates at each April quarterly Board meeting and after the Board's IT Department has updated the Board website to indicate the program's approval status.

If you have any questions or concerns about the *Certificates of Approval*, please contact your assigned Education Consultant. When the consultants conduct a face-to-face survey visit and see the documents framed and prominently displayed in the program's reception area, we are delighted!

This process is set forth in Board Rule 214.4/215.4, as stated below:

*Ongoing Approval Procedures. Ongoing approval status is determined biennially by the Board on the basis of information reported or provided in the program's NEPIS and CANEP, NCLEX examination pass rates, program compliance with this chapter, and other program outcomes. Certificates of Board approval will be e-mailed to all Board-approved nursing programs biennially in even-numbered years.*



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[Back to Table of Contents](#)