PN Focus Group

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Background

Periodically, NCSBN’s Research Services Department conducts an incumbent practice analysis (job analysis) for nurses up to six months in practice that provides the basis for the NCSBN’s Model Plan. These analyses are conducted on a three-year cycle, and NCSBN uses a rigorous methodology to evaluate practice. On May 19, 2003, NCSBN convened a national focus group to discuss the findings of NCSBN’s 2003 LPN/VN Practice Analysis. These results showed that the scope of practice for LPN/VNs was changing, and, therefore, some LPN/VNs could be practicing outside their scopes of practice in their jurisdictions. Each state or territory has its own practice act for LPN/VNs so scopes of practice vary from jurisdiction to jurisdiction.

This national focus group discussed the findings of the 2003 LPN/VN Practice Analysis and made recommendations to the NCSBN Board of Directors. To ensure the broadest possible range of experience and knowledge, participants were selected from various nursing-related disciplines across the United States. An experienced group facilitator, who is not in the nursing profession, was hired to assist with planning the day and facilitating group processes, and to analyze and record the group discussions.

The recommendations of the group are summarized below:

1) White Paper: There was strong consensus, both during small and large group sessions, that the most important recommendation was for NCSBN to write a white paper, capturing the discussion of the day. As much data from the various research projects at NCSBN should be included in this paper as possible, making it evidence-based.

This white paper can be used as a vehicle to develop partnerships and collaborations and to provide a consistent platform for dialogue about the scope of practice of LPN/VNs with employers, associations, boards of nursing, nurse executives and educators. These partnerships can be a positive influence to promote mobility of the LPN/VN through articulation programs, such as the ones that exist in Texas, Washington, Colorado, and Kentucky.

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3) NCSBN as a Central Clearinghouse for LPN/VN Data: It was recognized that there is a wealth of LPN/VN data available, but it has not been shared with various groups. Groups that collect data on LPN/VNs should collaborate and share their data, and NCSBN should make available all of the shared data. Some groups currently collecting data on LPN/VNs include NCSBN (practice analyses), Committee to Ongoing Regulatory Excellence (CORE), employer surveys, etc., National League for Nursing Accrediting Commission (NLNAC), National Association for Practical Nurse Education and Services (NAPNES), American Association of Community Colleges (AACC), and boards of nursing that collect discipline data. The group recommended that NCSBN encourage the use of the Treasury of Error: Root Cause Analysis and Practice Responsibly (TERCAP) tool by all boards of nursing. Some boards of nursing, such as the ones in Washington and Minnesota, have statewide initiatives to collect LPN/VN data. The combined results of all these studies will help to identify best practices.

4) NCSBN’s Committee Format Should Support LPN/VNs: There was consensus that NCSBN committees should specifically address LPN/VN issues, and the Board of Directors should consider LPN/VNs when committee charges are written and when committee members are selected.

Summary

Most of the recommendations address two areas: increasing the dialogue between nursing practice, education, regulation professionals and consumers about the issue of LPN/VN scope of practice; and the collecting and sharing of discipline data. These recommendations are accomplished, we can develop partnerships and collaborations, and best practices and articulation models can be created.

Angela Diaz-Ray, Director of Information Technology at NCSBN, replies.

Nurses’ (Nurse System) is a comprehensive electronic information system that contains nurse licensure and discipline information provided by boards of nursing in the United States and its territories. Nurses receive regular updates of national demographic frame, address, etc.), licensure, education and discipline information from participating boards of nursing. All boards of nursing have access to this information within NCSBN and use this site to verify the licensure information of a nurse requesting a license in a state. This is the system where many nurses will need to submit a request for license verification.

Employers or recruiters may access Nurses, but can only access information provided by boards that have agreed to allow such access to their information. This system can act as an one-stop-shop for employers or recruiters trying to gather all the nurse licensure and discipline information on a specific nurse. To date, almost 50% of all boards of nursing submit nurse discipline information. More detailed information can be found at NCSBN’s Web site or by visiting www.nursys.com.

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Alternate Item Formats and the NCLEX® Examinations

Anne Wendt, PhD, RN, NCSBN Associate Director of Testing Services, has provided the following information on alternate item formats on the NCLEX examinations.

The National Council of State Boards of Nursing (NCSBN) introduced computerized adaptive testing (CAT) in 1994. CAT has proven to be an efficient and effective method of assessing the knowledge, skills, and abilities of the entry-level nurse. With advancements in technology, NCSBN has developed items with alternate formats. In April 2003, NCSBN introduced several types of items that use formats that are different than the standard multiple-choice item. The types of items are multiple-response, fill-in-the-blank (calculation), fill-in-the-blank (ordered response) and hot spot. These formats are illustrated in Figures 1 through 4. Nursing candidates who take the NCLEX examination can easily identify the multiple-response item from the multiple-choice item by the check boxes prior to the answer options. In addition, the phrase “Select all that apply” appears in the multiple-response items. Fill-in-the-blank items are easy to differentiate from multiple-choice items because the candidate is expected to type in a response as illustrated in Figures 2 and 3. For these items, the candidate should just type in numbers. For hot spot items, the candidate should select an area on a chart or diagram which best answers the question posed in the item. There are no suggested areas or options to cue the candidate’s response.

Alternate items undergo the same rigorous process that is used to develop multiple-choice items. NCSBN is committed to developing a high quality examination to assess the knowledge, skills, and abilities needed to practice nursing at the entry-level. If you would like more information about the alternate items, you can access the NCBSN Web site at www.ncsbn.org for the Facts About Alternate Item Formats FAQ.

NCSBN Writes White Paper on Approval/Accreditation of Nursing Programs

NCSBN has selected the first three countries in which to offer the NCLEX® examinations for domestic nurse licensure purposes. Upon recommendation from the NCSBN Examination Committee, NCLEX testing is expected to begin in January 2005 in Seoul, South Korea; London, England; and Hong Kong.

“Those are the initial countries where testing will begin,” stressed Dr. Casey Marks, NCSBN director of testing services. He added that, “The examination committee was faced with difficult choices in order to choose the international markets. If the initiative proceeds as well as expected, additional countries will be added when warranted.”

“NCSBN utilized rigorous selection criteria in making this decision on what countries to pilot the initiative,” said Kathy Apple, NCSBN Executive Director. She added, “I feel the examination committee and Board made excellent initial choices.”

Selection criteria included security and geographic representation outside of the current member board of nursing locations. The countries selected were highly rated against this criterion.

The Nursing Practice Doctorate

Nursing leaders are discussing the nurse practice doctorate role at their various meetings and conferences across the country. NCSBN monitors the evolving roles of the profession, but does not become involved unless public protection is affected.

NCSBN was one of approximately 50 organizations that participated in the National Forum on the Practice Doctorate on December 8, 2003. The forum was cohosted by the National Organization for Nurse Practitioner Faculties (NONPF) and the American Association of Colleges of Nursing (AACN) and allowed stakeholders from nursing practice, education, regulation, certification, and accreditation to participate in a discussion regarding the key issues surrounding the nurse practice doctorate. Nurse practice doctoral programs have been in existence since 1979; however, only within the past several years have they been expressed interest across the educational community in these types of programs.

During the forum, discussion focused on the purpose for the nurse practice doctorate as well as its benefits and challenges. There were also small group discussions on issues related to practice, education, regulation, certification and accreditation. No consensus on any specific issue was reached but next steps were identified. More information on the National Forum can be found on the NONPF Web site (www.nonpf.org).