The Next Generation NCLEX® News is a quarterly publication that provides the latest information about the research being done to assess potential changes to the NCLEX Examinations.

As detailed in other newsletters and publications, the NCSBN Clinical Judgment Measurement Model (NCJMM) provides a critical foundation for the Next Generation NCLEX (NGN). Our Spring 2020 newsletter helped illustrate Layer 3 of the model through the presentation of an NGN Case Study. This newsletter takes a similar approach in highlighting Layer 4, the conditioning factors—environmental and individual—that influence the nurse’s ability to think critically and make a clinical decision.

Layer 4 of the NCSBN Clinical Judgment Measurement Model (NCJMM)
Layer 4 is used to “set the stage” when building the client scenario for the unfolding case study. The conditioning factors include, but are not limited to, the client’s environment, client observations, time pressure cues and medical record cues.

The following case study shows how the Layer 4 conditioning factors are integrated into items and scenarios.

**Scenario and Recognize Cues Item**

In this example, the four tabs are labeled Health History, Nurses’ Notes, Vital Signs and Laboratory Results. Other case studies may use different tab headings to present other types of information (e.g., Medications). Callouts have been added to highlight the inclusion of Layer 4 elements.

**Health History Tab:**

The nurse is caring for a 17-year-old male client who reports a recent injury to the left thoracic cage.
In this scenario, the client’s care environment is an acute care setting. Other examples may be an outpatient clinic, community health center, or post-anesthesia care unit, among others. The candidate is expected to know that resources change from one care setting to another. The candidate has visibility into client findings within a medical record, such as a history, vital signs and laboratory results. There are time pressure cues and activities that require completion in a timely manner, which affects the nurse’s care of the client. Those time pressure cues are another example of an Environmental Factor.

Continued on next page
The candidate’s knowledge is utilized throughout each step of the NCSBN Clinical Judgment Measurement Model. This knowledge is important as it considers any competencies mastered, the candidate’s fundamental knowledge obtained, and any work in a specific care setting during the candidate’s training. These are some of the Individual Factors in Layer 4.

The nurse is caring for a 17-year-old male client who reports a recent injury to the left thoracic cage. Client reports injuring his left ribs after being struck by a mechanically pitched baseball in a batting cage last week. He has significant bruising and feels lightheaded. He also reports having some intermittent pain in the left shoulder. He denies any shortness of breath, but has some discomfort in the left lower chest when taking a deep breath. He reports feeling abdominal fullness and occasional nausea. Patient has no significant past medical history. His surgical history includes an orthoscopic repair to the left shoulder for a torn rotator cuff last year. He has not felt well enough to attend baseball practice since the injury.
Prioritize Hypotheses

The behaviors that are considered in Prioritize Hypotheses include prioritization of care and addressing client conditions using client observation cues. This can include prioritizing actual client issues or potential client issues, as well as prioritization of care (e.g., addressing the client’s airway and breathing first to prevent respiratory deterioration). Other Layer 4 conditioning factors that could be included in a client scenario include, but are not limited to, additional time pressure or medical record cues.

Case Study Screen 3 of 6

The nurse is caring for a 17-year-old male client who reports a recent injury to the left thoracic cage.

Client reports injuring his left ribs after being struck by a mechanically pitched baseball in a batting cage last week. He has significant bruising and feels lightheaded. He also reports having some intermittent pain in the left shoulder. He denies any shortness of breath, but has some discomfort in the left lower chest when taking a deep breath. He reports feeling abdominal fullness and is occasionally nauseous. Patient has no significant past medical history. His surgical history includes an orthoscopic repair to the left shoulder for a torn rotator cuff last year. He has not felt well enough to attend baseball practice since the injury.

Generate Solutions

The candidate requires knowledge of treatments and interventions that could be incorporated into the plan of care to move the client toward a goal or outcome. In this item, the candidate must have knowledge of the treatments and interventions associated with splenic laceration.

Case Study Screen 4 of 6

The nurse is speaking with the physician regarding the treatment plan for the client who was just diagnosed with a splenic laceration and a left-sided hemothorax.

For each potential order, click to specify whether the potential order is anticipated, nonessential, or contraindicated for the client.

Environmental cues: Resources available

For each potential order, click to specify whether the potential order is anticipated, nonessential, or contraindicated for the client.
Take Action

In this item, the Layer 4 conditioning factors include using client observation cues to link the pathophysiology to nursing interventions for a client who requires surgery. The candidate needs to utilize knowledge and skills to identify the appropriate actions a nurse would take.

Evaluate Outcomes

In this step, the candidate must indicate if the client’s clinical course is progressing as expected. Again, Layer 4 conditioning factors include knowledge and experience with client observations, time pressure cues (perioperative, up to and including postoperative Day #3), and medical record. In this case study, by postoperative Day #3, the client should be ambulating with minimal assistance; this is good progress at this time. However, the client’s pain is not being adequately managed because the client is not using the incentive spirometer and is instead taking a maximum dose of pain medication via patient-controlled analgesia (PCA) device hourly.
Summary

Using Environmental and Individuals Factors from Layer 4 of the NCJM contributes to the authenticity of NGN case studies, not only by adding specificity but by also allowing for the variety of situations and settings that entry-level nurses will encounter in practice. Unlike the Layer 3 elements, which are directly assessed by NGN items and have specific locations within an NGN Case Study, the Layer 4 elements are contextual and can appear anywhere within an item set, often multiple times.

NGN Resources

For more information regarding the NGN project, please visit the NCSBN website and our Frequently Asked Questions, which address common questions from candidates and educators. The NGN Resources page includes past publications of the NGN News. The newsletter is published quarterly and provides the latest information about the work to assess potential changes to the NCLEX Examinations. NGN Talks & Videos houses short NGN videos on topics related to the NGN.