

Winter 2018

IN FOCUS

A PUBLICATION OF THE NATIONAL COUNCIL OF STATE BOARDS OF NURSING

Measuring the Right Things

NCSBN's Next Generation
NCLEX® Endeavors to Go
Beyond the Leading Edge

NCLEX-PN® ITEM DEVELOPMENT OPPORTUNITIES | THOUGHTS ON LEADERSHIP | YEAR IN REVIEW

Managing Editor and Writer

Michael Grossenbacher | mgrossenbacher@ncsbn.org

Contributing Editor and Writer

Dawn Kappel | dkappel@ncsbn.org

Designer

Kalona Owens | kowens@ncsbn.org

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Istockphoto.com.

Founded March 15, 1978, as an independent not-for-profit organization, NCSBN was created to lessen the burdens of state governments and bring together boards of nursing (BONs) to act and counsel together on matters of common interest. NCSBN's membership is comprised of the BONs in the 50 states, the District of Columbia, and four U.S. territories — American Samoa, Guam, Northern Mariana Islands and the Virgin Islands. There are also 30 associate members that are either nursing regulatory bodies or empowered regulatory authorities from other countries or territories.

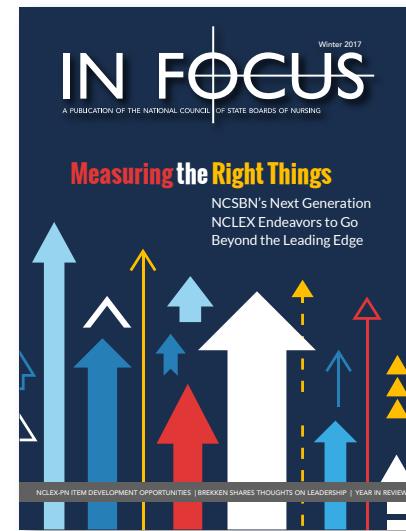
NCSBN Member Boards protect the public by ensuring that safe and competent nursing care is provided by licensed nurses. These BONs regulate more than 4.5 million licensed nurses.

Mission: NCSBN provides education, service and research through collaborative leadership to promote evidence-based regulatory excellence for patient safety and public protection.

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Address inquiries in writing to NCSBN Permissions,
111 E. Wacker Drive, Suite 2900, Chicago, IL 60601-4277.
312.525.3600 | www.ncsbn.org | infocus@ncsbn.org



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In This Issue



4. NCSBN is Recruiting for 2018 NCLEX-PN® Item Development Opportunities



6. Shirley Brekken Shares Thoughts on Leadership Growth, Development and Engagement

10. Measuring the Right Things: NCSBN's Next Generation NCLEX® Endeavors to Go Beyond the Leading Edge

16. 2017 NCSBN Year in Review



9. Speed Round

15. News & Notes



TRANSITION TO PRACTICE®

ENGAGING • EXPERIENCING • EMPOWERING

from **NCSBN LEARNING EXTENSION**
Your resource for e-learning for the nursing community

TRANSITION TO PRACTICE® PROGRAM

The first year of employment for new graduate nurses can be challenging as they integrate into the new role as practicing nurses. The new Transition to Practice course series from NCSBN puts new nurses on the right track to effectively build vital on-the-job proficiencies:

- » Adopt proven communication strategies that reduce errors
- » Empower patients, families and significant others
- » Apply critical reasoning through evidence-based practice
- » Participate in processes that improve outcomes of care
- » Connect technology with caring
- » Interact with a preceptor to develop clinical decision making

Based on the results of a comprehensive research study, NCSBN Learning Extension has developed an exciting new e-learning offering - the Transition to Practice® (TTP) program. Consisting of a preceptor course and five courses for new nurses, the program is designed to help new nurses develop more confidence and become more competent nursing professionals.

Course 1: Communication & Teamwork

Provide safer and more effective care through situational awareness and positive workplace behaviors.

Course 2: Patient- & Family-centered Care

Understand how to empower your patients and include them as integral members of the health care team.

Course 3: Evidence-based Practice

Engage intellectual curiosity within the context of a health care team in order to achieve improved outcomes.

Course 4: Quality Improvement

Embrace change and participate in processes that continuously improve the outcomes of care.

Course 5: Informatics

Empower patients with new technologies that allow vital information to flow between the patient and health care team.

Course for Preceptors: Helping New Nurses Transition to Practice

Foster the growth of new graduate nurses by embracing the roles of teacher, coach, and protector.

learningext.com/new-nurses



NCSBN is Recruiting for 2018 NCLEX-PN® Item Development Opportunities

NCSBN is currently recruiting qualified nurses to serve on upcoming 2018 NCLEX-PN [Item Review and Item Writing panels](#). The volunteers who participate on these panels are an integral part of the item development process.

To apply, volunteers simply complete an [online application](#). A potential panelist receives notification via email when their application is approved, and when they are considered for a specific panel. A panel session lasts three to five days. Sessions are held throughout the year in Chicago and travel expenses are covered.

“We rely on hundreds of volunteers each year to come to Chicago and participate on panels of subject matter experts,” says Daniel Hydzik, Test Development Associate, Examinations, NCSBN. “We recruit from a variety of practice settings, areas of expertise or specialties, experience levels, and geographic regions. We want diversity among each panel, that’s the goal.”

The NCLEX is designed to test the knowledge, skills and abilities essential to the safe and effective practice of nursing at the entry level. The process of developing one item (question) for the NCLEX-PN requires multiple steps and involves many qualified volunteers to write and review items.

“The test development process is a very thorough and rigorous process adhering to the standards outlined in professional test development,” says Hydzik. “From the time an item is written until it makes its way onto an actual exam, can take up to 18 months.”

There are a variety of panels that NCSBN Examinations hosts each month throughout the year, primarily the Item Writing and Item Review panels. “Educators write the items, they are familiar with the textbooks that nursing students study and the material that they learn,” says Hydzik. “Then we have clinicians who work with entry-level nurses through preceptoring, mentoring or supervising nurses with experience of less than 12 months. They know exactly what those nurses are doing on a daily basis. Those clinicians review the items to make sure they are meeting our criteria. The items have to be accurate, current, entry-level, job-related and linked to the test plan.”

Qualifications

To serve on an Item Development panel, you must meet the following criteria:

- Hold a current, unencumbered nursing license in the U.S. or Canada;
- Be knowledgeable of the current scope of practice of nursing, including entry-level practice;
- Be employed as a registered nurse (RN) or licensed practical/vocational nurse (LPN/VN) for at least two years;
- Have not participated in nursing licensure examination development in the previous two years; and
- Are currently either: (1) teaching undergraduate students in the clinical setting or, (2) working directly with nurses who have entered nursing practice in the past 12 months.

Benefits

Janna Hackett, MSN, RN, a clinical instructor at Clovis Community College in New Mexico, has participated in several item development panels. She became interested a few years ago when she learned at a conference that nursing instructors could volunteer to help write NCLEX questions. “I was absolutely thrilled when I was



asked to come to Chicago for an item-writing session,” she says. “Writing questions is hard work, but it can be a lot of fun. It’s also very valuable professionally. It has strengthened my understanding of test-taking processes and helped me to learn how to write effective test questions.”

Hackett notes that it is also an opportunity to develop relationships with other nurse educators across the country. “The sessions are only a few days, but we all have our profession in common, so we tend to get to know each other quickly. I enjoy learning about the differences and similarities in our programs because it helps us improve by taking good ideas back to our local schools.”

“We receive a lot of positive feedback,” says Hydzik. “The experience is rewarding both personally and professionally. They enjoy meeting other educators or clinicians from across the U.S. and Canada. They gain a better understanding of the entire process of how the NCLEX is developed and an appreciation for how much work goes into it. The educators must maintain confidentiality of course, but through the training they receive, they can help their students understand how it works.”

—Janna Hackett

“I would definitely recommend it,” says Hackett. “I have been allowed to volunteer three times over the past several years and I still look forward to being notified of upcoming sessions. I also love having the opportunity to enjoy the city of Chicago when I go. I also appreciate the staff in the sessions. They’re kind and generous with their time, making sure that our questions are answered and that we are comfortable during the session.”

U.S. participants also earn continuing education contact hours. Most importantly, participants have the unique opportunity to contribute to promoting continued excellence in the nursing profession and grow professionally by learning new skills to use in their current positions. ■■■■



The NCLEX® Depends on You

Apply to be an Item Writer or Item Reviewer Today

Interested in participating?
[Submit an application.](#)

All item development panels are held in downtown Chicago and expenses are covered.

For specific questions, email
nclexitemdev@ncsbn.org.

Brekken Shares Thoughts on Leadership Growth, Development and Engagement



The Leadership Succession Committee (LSC) will be hosting a series of Leadership Succession Calls, focusing on promoting leadership engagement through thoughtful discussion with past NCSBN leaders.

On the Nov. 15, 2017 Leadership Succession Call, the LSC interviewed Shirley Brekken, MS, RN, executive

director of the Minnesota Board of Nursing and past NCSBN Board president. Brekken has also served on numerous NCSBN committees and task forces as chair or committee member. She shared her thoughts about leadership growth, development and engagement.

Brekken shared that her own leadership was inspired by a mentor who instilled in her the courage, drive and passion to actively seek out engagement opportunities that could impact the greater good. Mentorship benefits both the mentor and the mentee in gaining new knowledge and skill. It also ensures that the mentorship cycle will continue in the future. Mentorship positively impacts the individual's concept of learning through relationships.

Brekken went on to say that leadership skill is further refined through social interactions, perspectives and intelligence. Social interactions that foster reciprocal sharing of information, while leveraging active listening, contribute to a deeper understanding of shared goals and objectives as well as clarifying important perspectives. Emerging leaders should be encouraged to reach out to peers, other leaders and mentors for opportunities to share experiences and apply emerging skills through the process of appreciative inquiry. In this manner, emerging leaders can reflect on areas for further focus and development.

Finally, Brekken remarked on the importance of self-

promotion by engaging fearlessly in public speaking. She identified that refining expertise in a given topic that can be leveraged to further political alliances will facilitate future selection for leadership roles. Leadership opportunities are inextricably linked with one's ability to be courageous, to take calculated risks and to be socially receptive.

NCSBN has several leadership opportunities for emerging leaders. Take the calculated risk. Share your expertise with others, working toward a common goal. Encourage and mentor another to tap into the courage to lead. Through ongoing leadership succession, the future of NCSBN is assured. ■■■■



NCSBN's Leadership Succession Committee contributes the *Pathways To Leadership* feature. There are many leadership paths and opportunities for members of NCSBN to support professional development. Learn more through the [NCSBN Leadership Development Program](#) and [watch our video](#) to learn how you can benefit personally and professionally by becoming involved with NCSBN (ncsbn.org username and password required).

An Exciting Opportunity for Graduate Nursing Students

Now Accepting Applications

The NCSBN Regulatory Scholars Program is a great opportunity for graduate nursing students. The program will provide graduate students with cutting edge experiences in nursing regulation and policymaking. It consists of three positions: a grant program for doctoral students, a paid graduate internship, and an unpaid graduate experience to satisfy the clinical component of a graduate nursing program. The program helps advance the field of nursing regulation by building regulatory experts and researchers, providing high-level evidence for nursing regulatory and policy decision-making, and encouraging scholarly dialogue and publications.

For applications and more information, please visit www.ncsbn.org/rsp or contact us at regulatoryscholars@ncsbn.org.





2018 NCSBN
**MIDYEAR
MEETING**

MARCH 5-7

LOEWS CHICAGO

CHICAGO
ILLINOIS



Speed Round

Get to know NCSBN staff:

Mattie Williams, Accounting Associate, Finance

What do you do?

I work in the Finance department. My role consists of a variety of specialized accounting functions that include preparing accounting reports, registering and billing for membership for upcoming meetings, reconciliation of American Express, journal entries and assisting in the maintenance of the general ledger.

What are the best and most challenging aspects of your job?

The best aspect of my job is the role of providing financial assistance and support to Board members, staff and volunteers. I am heavily relied upon to solve numerous accounting issues. The most challenging aspect of my job is multitasking. I am responsible for juggling projects throughout the course of the day that require a great deal of analysis. It can be cumbersome but rewarding.

If you weren't working at NCSBN, what would your dream job be?

I'd be a travel blogger! I enjoy traveling and writing about each experience. My love for traveling has grown over the years. I get fulfillment learning about other cultures, hanging out with locals, trying new foods and exploring places outside the touristy areas. I'd love to start sharing my inspiration, recommendations and photos with others while gaining new experiences.

Save the Date

2018 NCSBN
Scientific
Symposium

Oct. 24, 2018
Chicago

Measuring the Right Things

NCSBN's Next Generation
NCLEX® Endeavors to Go
Beyond the Leading Edge

As one of the preeminent exams in the world, the NCLEX® is standing at a precipice of a new era in testing, poised to take a leap ...

However, being the preeminent example of testing means that it does not take “leaps of faith” but rather bases decisions about its future direction on the rigor of research. Changes, when determined to be necessary, are made by experts in the field based on sound evidence gathered over time. In short, these are the reasons it is a well-respected, legally defensible and psychometrically sound exam. So this is where NCSBN finds itself two decades into the 21st century, taking an analytical look at its exams and trying to determine how to take what is already the standard bearer of testing beyond the leading edge of where it already sits.

The ability to instantaneously access an unlimited wealth of information is now commonplace. Knowledge of just about anything is nothing more than a finger swipe away. The need to memorize a list of facts and statistics almost obsolete. The way students learn is different from even a decade ago and the environment in which they are educated is rapidly changing; nursing candidates are no exception. Obviously, nurses still need to be able to recall facts and measures without a smart phone in their hands, but more importantly, can they, at the entry level, appropriately put together those facts, assess the client under their care and make crucial clinical judgments about the care they need to deliver? And, from a licensure exam perspective, is decision making and critical thinking measurable? That is what NCSBN is trying to find out.

“Back in 2012 this all started with a very profound question posed by the NCLEX® Exam Committee,” explains Philip Dickison, PhD, RN, NCSBN, chief officer, Examinations, “which was, ‘Is the NCLEX measuring the right things?’” To determine whether the test is actually accessing what needs to be measured, NCSBN commissioned a literature review of 200 peer-reviewed manuscripts detailing what is occurring in nursing practice, education and testing. What emerged was that nursing education had already made critical thinking, clinical decision making, and clinical judgment a standard part of nursing curricula. What was somewhat alarming was that 50 percent of nurses were involved in errors in some way, and 65 percent of those errors were attributable to poor clinical decision-making skills. Additionally, it was found that only 20 percent of employers were happy with the decision-making skills of novice nurses.

Recognizing that the NCLEX measures practice, not education, NCSBN decided that it needed to do a practice analysis but to do it in a more innovative way than it had done before – an observational practice analysis. This study, done in 2015, was a departure from the traditional survey type of analysis NCSBN usually conducts. To conduct the observational analysis, the country was divided into quadrants and observers were deployed to watch novice nurses do their job. Everything that happened was recorded. Focus groups of both novice and experienced nurses were also conducted. What was observed was divided into either task, skills or attributes. This generated a 1,000 plus pages of data!

The data were analyzed to determine the strength of association between entry-level nurse tasks and nurse skills. Unsurprisingly many of the attributes and tasks

“Back in 2012 this all started with a very profound question posed by the NCLEX® Exam Committee, which was, ‘Is the NCLEX measuring the right things?’”

—Philip Dickison

required problem solving, critical thinking and clinical judgment. This is the evidence of how important those three proficiencies are. This brings us back to the big questions – can we measure these proficiencies? Are we doing so already?

The next step in the process was an assessment of the current NCLEX item bank to ascertain whether its item types adequately measure clinical judgment, critical thinking and problem solving skills on a consistent basis. The analysis found that there were three areas where the current items could measure clinical judgment, about a half that could moderately measure it but there were still large gaps. Dickison comments, “Because we know that nurse client care and nurse errors can be improved by enhancing clinical judgment skills in novice nurses, it is imperative that we find a way to assess the degree to which NCLEX candidates possess clinical judgment. It is a critical component of the overall goal of ascertaining whether a nursing candidate is minimally competent. This is a public protection issue.”

Paramount in NCSBN’s approach to potential evolutionary transformation to its exam was the foundational tenet that any changes must be evidence-based. The construct must be built first and then the items that can be used to measure it can be described. NCSBN first defined clinical judgment as “the observed outcome of critical thinking and decision making. It is an iterative process that uses nursing knowledge to observe and access presenting situations, identify a prioritized client concern, and generate the best possible evidence-based solutions in order to deliver safe client care.”

NCSBN then embarked upon research, a literature review and pilot studies to develop a comprehensive clinical judgment assessment model, “[Assessing Higher-order Cognitive Constructs by Using an Information-processing Framework](#),” published in the *Journal of Applied Testing Technology*. “If you can define the ‘boxes’ of clinical judgment, you can measure each of the boxes together and gauge where the strengths and weaknesses are. More importantly,

you can access how successful a candidate is at making clinical judgments,” notes Dickison.

The Clinical Judgment Model (CJM) represents a fundamental shift from the current dichotomous measurement models in which something is either right or wrong. When context is removed and items are extremely sterile, a very precise and stable measurement can be obtained. “The problem is that the way individuals learn today and the way we make decisions is not context irrelevant, Dickison asserts. “The context in which we make decisions matters. Consequences, time constraints and risks cause someone to make decisions a certain way.”

The CJM (see Figure 1) is complex but can be broken down into four levels. Imagine that a nurse walks into a client room and cues exist that must be first be recognized and then analyzed in order to care for the client properly. The nurse (1) forms hypotheses, (2) prioritizes them, (3) generates solutions and then (4) takes actions. Research thus far has indicated that these actions can be measured. The next layer is one that has not been introduced in any psychometric models before now – the context. Dickison stresses, “The question is whether you can put context around items in a way that you actually make it more real. In addition to the exam being psychometrically sound and legally defensible, one more condition must be introduced as we move forward into the future – fidelity. Does it look like what we do as nurses?”

Students today who were raised on video games and information being available at their fingertips are educated differently. Now it is about giving them the whole picture and having them interact within that world. They have fidelity from the first day and throughout their education.

NCSBN believes that measuring clinical judgment is not only new to how it tests its candidates but also new to the field of measurement. It is a game changer that stretches beyond nursing into all instances where public safety is involved.

Recognizing that it was necessary to ascertain whether

Clinical Judgment Model

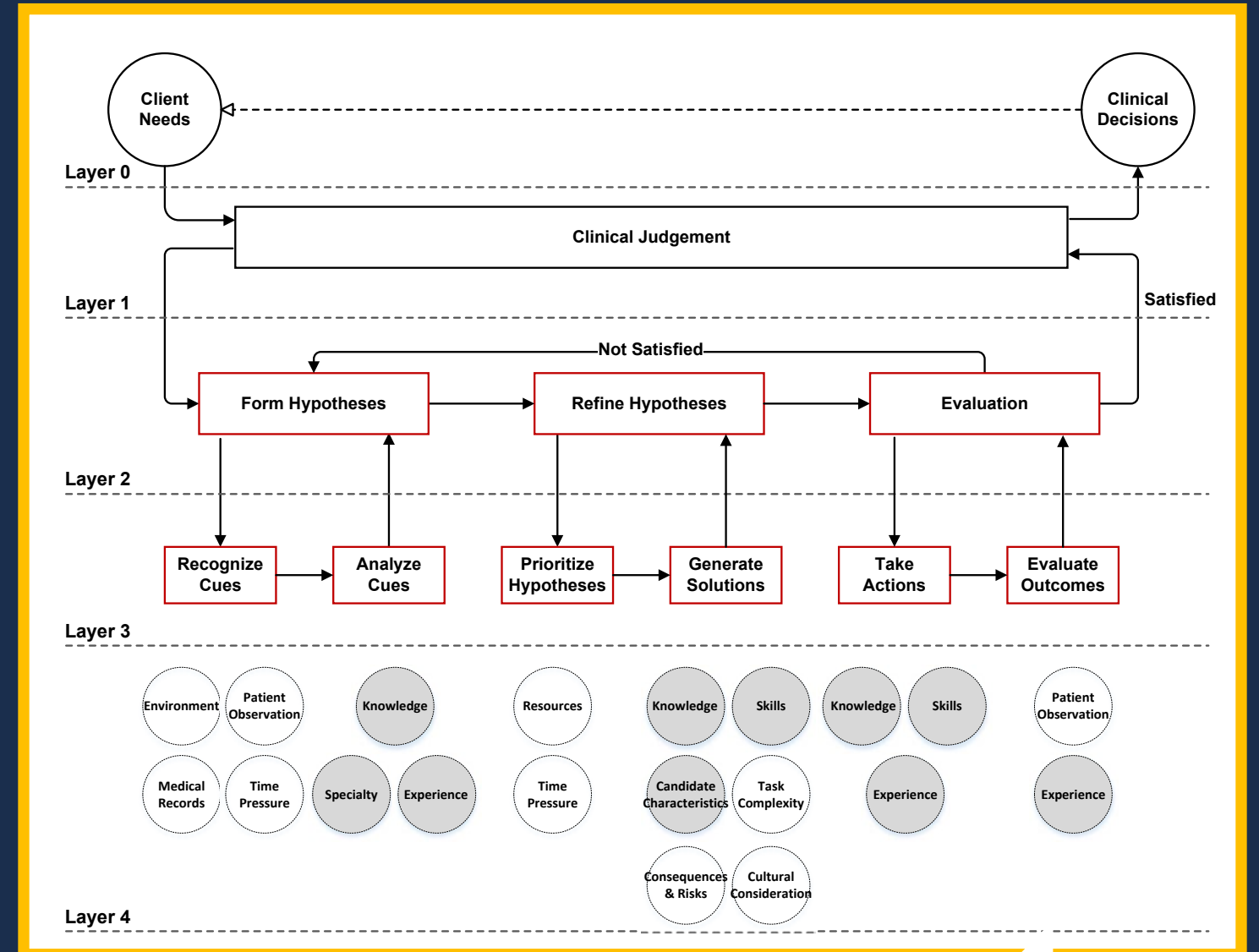


Figure 1

“Because we know that nurse client care and nurse errors can be improved by enhancing clinical judgment skills in novice nurses, it is imperative that we find a way to assess the degree to which NCLEX candidates possess clinical judgment. It is a critical component of the overall goal of ascertaining whether a nursing candidate is minimally competent.

This is a public protection issue.”

—Philip Dickison

“In addition to the exam being psychometrically sound and legally defensible, one more condition must be introduced as we move forward into the future – fidelity.

Does it look like what we do as nurses?”

–Philip Dickison

clinical judgment is more than just possessing nursing knowledge, NCSBN conducted a pilot study in 2016 (Muntean et al. 2016 AERA presentation). Results from this study found that while knowledge is essential, it is not enough to substantiate the clinical judgment essential to safe nursing practice. The study also indicated that the average ability of a nurse to demonstrate the different steps in the clinical judgment process (cue recognition, hypothesis generation, hypothesis evaluation, taking actions and evaluating outcomes) is progressive. Thus, a nurse’s ability to recognize cues, develop hypotheses and take appropriate actions does not guarantee the ability to evaluate the outcomes of the action taken. Ultimately, no single element of clinical judgment adequately predicts a nurse’s clinical judgment ability, rather it is the combination of all the elements that add validity and reliability to the measurement of a nurse’s clinical judgment ability. In short, having content knowledge does not always translate to having clinical judgment skills.

Armed with this knowledge, NCSBN chose to move forward with what is now called the [Next Generation NCLEX® \(NGN\) project](#). Bringing together experts from technology, content and measurement to imagine item prototypes that could measure clinical judgment, NCSBN worked on creating items that could be inserted as a Special Research Section in real candidate examinations. These new item prototypes that are being tested are those that have the possibility to measure the second, third and fourth layers of the CJM. Examples of the prototypes include: enhanced hot spots, enhanced multiple response and extended drag and drop.

The first set of these NGN prototypes were included as a voluntary component on the NCLEX exam beginning in July

2017. The Special Research Section is offered to select candidates taking the NCLEX-RN and takes approximately 30 minutes to complete. This section is administered following the regular exam and does not count as part of the NCLEX score. Candidates are making valuable contributions by their participation, and thus far a significant number have been willing to complete the section. That first data collection period has concluded but the Special Research Section will be included in the next three consecutive quarters in October 2017, January 2018 and April 2018. Data obtained will be used to ascertain which items accurately measure clinical judgment and nursing competence.

NCSBN plans to provide continual updates about this long-term research endeavor. One such mechanism is the new [Next Generation NCLEX® News](#) that will be published quarterly. As time goes on various other communications vehicles will be implemented.

NCSBN has ventured forth into the unknown with this ambitious and groundbreaking project. At this point, early indicators lead NCSBN to believe they are on the right road but because this project is rooted in research and dedicated to making evidence-based decisions, it will continue to move forward only if the results support doing so. ■ ■ ■ ■

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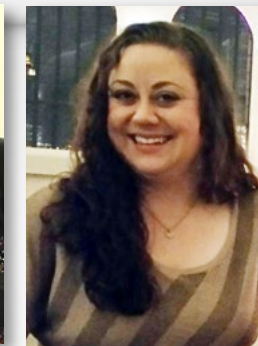
Muntean, W., Lindsay, M., Betts, J., Kim, D., Woo, A., Dickison, P. (2016, April). *Separating Assessment of Subject Matter Knowledge from Assessment of Higher-Order Cognitive Constructs*. Paper presented at American Educational Research Association Annual Meeting, Washington, D.C.



Howard



LaBonde (center)



Aguirre



Left to right: Baker, Blackwell and Glymph

Howard Receives Nightingale Award for Excellence

Wyoming State Board of Nursing, RN board member; Susan M. Howard, MSN, RN, BC (Campbell), has received the Nightingale Award for Excellence. This award is conferred on a Wyoming Nursing Association (WNA) member who has provided support to the values of the WNA and the profession of nursing in the state of Wyoming during their career.

LaBonde Receives President’s Award

Cynthia LaBonde, MN, RN, executive director of the Wyoming State Board of Nursing (WSBN), has received the Wyoming Nursing Association President’s Award. This award recognizes achievements of significance to the nursing profession, or special service to or on behalf of the Wyoming Nurses Association. This year’s award relates to Wyoming’s adoption of the enhanced Nurse Licensure Compact in 2016 and the efforts spearheaded by LaBonde and WSBN to get to that point.

Aguirre Receives Certifications

Kara Aguirre, legal assistant, Wyoming State Board of Nursing, has completed certified specialized training in Advanced Investigative Analysis, Advanced Investigative Report Development and Advanced Interviewing. Aguirre received the certifications through the Council on Licensure, Enforcement and Regulation.

Nursing Reps Participate in Controlled Substances Workgroup

Derrick Glymph, DNAP, CRNA, ARNP, COL, AN, USAR, RN, member, and Joe Baker, Jr, executive director, Florida Board of Nursing (FBN), represented the FBN at a multidisciplinary board fact-finding workgroup meeting on controlled substances on Nov. 3, 2017, in Orlando. Representatives from 12 health care regulatory boards and staff from the Florida Department of Health discussed strategies for the regulatory community to use in addressing the opioid crisis. Speakers reviewed pre and post-licensure education, prescribing

2017 NCSBN Year in Review



NCSBN Launches Transition to Practice Online e-learning Program

February

The program is designed to help new graduates apply nursing knowledge, learn new skills and think critically as they transition from newly licensed nurses to confident professionals.



eNLC Interstate Commission Sets 2018 Implementation Date

August

The Interstate Commission of Nurse Licensure Compact Administrators set Friday, Jan. 19, 2018, as the implementation date for the eNLC.

NCSBN CEO Benton Receives Honor from Spanish General Council of Nursing

May



David Benton, RGN, PhD, FFNF, FRCN, FAAN, received the Great Cross of Spanish Nursing in the Gold Category from the Spanish General Council of Nursing.

Nursys Database Welcomes Data from NBCRNA

July



The National Board of Certification and Recertification for Nurse Anesthetists began uploading their certification information into the Nursys database.

eNLC Enacted: A Modern Nurse Licensure Solution for the 21st Century

July

The signing of legislation by North Carolina Gov. Roy Cooper on July 20 triggered the landmark enactment of the eNLC, ushering in a new era of nurse licensure in the U.S.

NCSBN

NCSBN Considers Expanded Membership

August

At the 2017 Annual Meeting, the Delegate Assembly approved the new membership category of Exam User.

New Associate Members Approved

August

At the 2017 Delegate Assembly, member boards approved the College of Registered Psychiatric Nurses of Alberta, the College of Registered Psychiatric Nurses of Manitoba and the Registered Psychiatric Nurses Association of Saskatchewan as associate members of NCSBN.

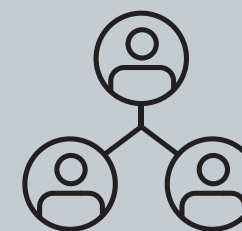


Professional Accountability & Legal Liability for Nurses Online Course Launches

July



NCSBN Learning Extension launched a major revision to this course, which addresses professional accountability and provides strategies for reducing the risk of legal liability.



Tri-Regulator Collaborative Release Position Statements on Electronic Health Records and Practitioner Burnout

September

The Tri-Regulator Collaborative drafted and approved two position statements that highlight the organizations' shared commitment to protecting public health.

continued from page 15



Left to right: Military and Veteran Policy Director of the Ohio Department of Veterans Services, Danny Eakin; Chief Master Sergeant Kandi Hughes; Ohio Board of Nursing Executive Director Betsy J. Houchen, RN, MS, JD; Master Sergeant Kristen Bandy; and Ohio Board of Nursing President Patricia A. Sharpnack, DNP, RN

Luo

and dispensing guidelines, and alternative treatment therapies. The group concluded its day with strategy development in the areas of collaboration, education and the regulatory structure.

Military Training and Education for Licensure as an LPN

As the result of collaborative work with the Ohio National Guard and the Ohio Department of Veterans Services (DVS), and based on the second NCSBN military gap analysis, the Ohio Board of Nursing (OBN) determined that the Air Force BMTCP 4N051 (5 Skill Level) training, and the education obtained through the applicable associate degree program of the Community College of the Air Force, meet the requirements for practical nurse licensure.

The OBN recognizes CMSgt. Kandi Hughes, MSgt. Kristen Bandy, Danny Eakin, Military and Veteran Policy Director of DVS, and NCSBN. Their combined knowledge and work assisted the OBN in determining equivalency in training. Eakin thanked the OBN members saying the OBN is recognized as a flagship for its work with veterans, service members and spouses.

Article Explores Alternative Stopping Rules for Computerized Adaptive Testing

Xiao Luo, PhD, psychometrician, Research & Development, Examinations, NCSBN, recently published his study, "Projection-Based Stopping Rules for Computerized Adaptive Testing in Licensure Testing," in *Applied Psychological Measurement (APM)*.

The article introduces a new stopping rule for computerized adaptive testing that bases the test termination decisions on the algorithmically projected ability estimate. Supported by empirical evidence, it was proven to be more efficient than the state-of-the-art algorithm. APM is one of the most influential and most viewed psychometric journals. It has led the measurement field in presenting cutting-edge methodologies and related empirical research. This publication is a great contribution by NCSBN to the psychometric community.

Have news to share? Send your **News & Notes** submissions via **email**.

Member Board Profiles

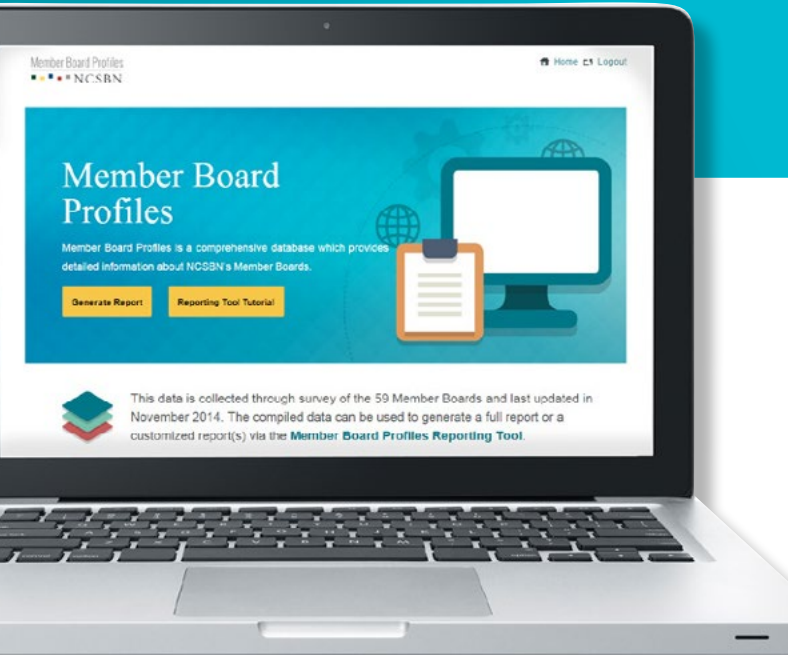
Our comprehensive database provides detailed information about NCSBN's Member Boards

NCSBN's helpful and informative Member Boards Profiles database contains data collected through surveys of NCSBN's 59 member boards. The compiled data are available to the public as a complete report in PDF form and to NCSBN members as a customized report via NCSBN's new [Member Board Profiles Reporting Tool](#) (login required). The information contained in the reports is subject to change in the intervening time between surveys of member boards. Specific verification of state data should be completed through a comparison with the [state nurse practice act and regulations](#) or by [contacting the state board of nursing](#).

The Member Board Profiles Reporting Tool

This reporting tool is a convenient and customizable way to access a snapshot of the member boards':

- Structure and Governance
- Licensure Requirements and Operations
- Education Requirements
- Discipline, Delegation, Telenursing
- Advanced Practice Registered Nurse Regulation
- Assistive Personnel Regulation



Users can customize their searches the following ways:

- Select from six surveys: Advanced Practice; Assistive Personnel; Board Structure; Discipline, Delegation, Telenursing; Education; Licensure.
- Select jurisdiction(s) individually or selected jurisdictions, or via five presets: all, RN boards, PN boards, umbrella boards or independent boards.
- Narrow results by selecting particular questions from the selected survey.
- Include maps and/or charts.

Users can then view results or export and save or print them in PDF format.

For questions, contact memberboardprofiles@ncsbn.org.

2017

Wishing you peace and happiness this holiday season

collaborating
for the
future of
regulation



NCSBN

National Council of State Boards of Nursing