Nursing Regulation & Education Together

What is NCSBN?

The National Council of State Boards of Nursing (NCSBN) supports the 60 boards of nursing in the USA and its territories in providing leadership to advance regulatory excellence for public protection. It does this by providing information on key nursing and regulatory topics to keep its members and the public informed about the changing health care environment. The boards regulate RNs, LPN/VNs, or both.

The following lists some of the resources available from NCSBN. If you have questions or want more information, please visit our Web site at www.ncsbn.org or contact Nancy Spector, director of Education (nspector@ncsbn.org), who can answer your question or refer you to the correct person.

NCSBN Resources and Information

- Test Plans for the NCLEX® Examinations
- Model Nurse Practice Acts and Rules
- Trends in Nursing Practice, Regulation and Education
- Public Policy Information
- Nurse Licensure Models: Single State and Mutual Recognition
- Issues Surveys

NCSBN Products and Services

- NCLEX® Examinations
- Nursys[™] Licensure QuickConfirm (licensure verification system)
- NCSBN Learning Extension Online Courses

NCSBN Research

- Practice Analyses for RNs, LPN/VNs, **Nurse Aides**
- Licensure and Examination Statistics
- Practice and professional Issues
- Continuing Education Studies
- Employer Studies

Fast Facts

Nurse Licensure Compact

Mutual recognition, multistate licensure and interstate practice are all terms that refer to the same concept: allowing a nurse to obtain one state license that grants a multistate privilege to practice across state lines.



The Nurse Licensure Compact (NLC) refers to the legal agreement between states to recognize this privilege. Practice is defined as occurring where the client is, and refers to both physical and electronic nursing; it is also subject to each state's practice law and regulation. Under mutual recognition, a nurse may practice across state lines, unless otherwise restricted. Each state must enact legislation authorizing the Nurse Licensure Compact Act and adopt administrative rules and regulations for implementation. Compact states also designate an administrator.

Licensure is granted in the primary state of residence of the nurse, but multistate licensure privileges to extend practice in other party states. Each party state holds the nurse accountable for acceptable practice.

Benefits of the Nurse Licensure Compact

- The compact is one answer to the growing need for nursing practice to occur across state lines.
- Consumers have a growing need to access nurses across state lines.
- The compact allows for efficient and expedient authorization to practice which is important now with the nursing shortage in the U.S.
- The compact allows for more uniformity in both laws and approaches to new technology and practice modalities.
- The compact improves the marketability of nurses.

The RN and LPN/VN Nurse Licensure Compact began in 2000. In 2002, NCSBN's delegates approved model language for a licensure compact for advanced practice registered nurses.

A map of all participating states and territories can be accessed at www.ncbsn.org/nursing regulation/nurse licensure compacts.



How can I be active on

my board of nursing?

We invite your questions. Please send your questions to Nancy Spector, NCSBN's director of Education, at nspector@ncsbn.org, and we will call on our experts to answer them for you.

I applaud your desire to be active on your board of nursing! Participation in your state board will keep you updated on changes to your board's rules, regulations and practice act (a responsibility of every nurse). Interaction with your board can also be a valuable experience, not only for your professional growth, but also for the profession of nursing. Remember, the mission of all 60 boards of nursing is public protection. Your input will help shape the future of your board of nursing, and nursing in your state or territory. There are numerous ways to be active on your board of nursing, though it does vary from state to state. Here are some suggestions from Sharon Weisenbeck, the Executive Officer of the Kentucky Board of Nursing:

- Most boards of nursing publish newsletters that are distributed to licensees. If your state has a newsletter, be sure to read it; it will update you on changes or proposed changes in rules, regulations and the practice act as well as other pertinent initiatives.
- · Attend board of nursing meetings every so often. You can request an agenda to see if there is something that interests you.
- Some boards have open forums during board meetings where nurses can dialogue with the board.
- Read your board of nursing's Web site, as there is a variety of information provided by boards.
- · Check to see if your board's committee structure allows nonmembers to participate on committees and ask about the process if you're interested in doing this.
- Attend public hearings regarding the promulgation of new rules.

You might also consider being nominated as a board member on your board of nursing. A board member for a state board of nursing once told me that her experience with the board of nursing was the "pinnacle of her career" in education. This experience can be very rewarding as you can make and influence decisions about nursing. Each state or territory differs in its procedures for becoming a board member, although often the governor appoints board members with input from professional organizations.



Learn to Write NCLEX-Type Items that Assess Critical Thinking

Nursing educators who want to increase their assessment competencies learn directly from the experts in NCSBN's online course entitled Advanced Assessment Strategies. The course author is NCSBN staff member Lenore Harris, MSN, RN, AOCN, CNS, NCLEX® Content Associate, who manages the content and item writing process for the NCLEX-PN® and NCLEX-RN® examinations.

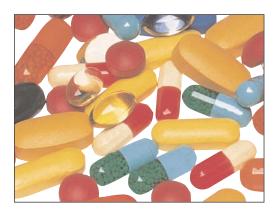
Experienced educators and participants who have completed the "Test Development & Item Writing" course will learn to write items that assess critical thinking. Participants are guided through the process of writing and converting items to higher-level items.

This six-week course offers 15.6 CEUs. It is asynchronous and self-paced; however, participants receive critique of their final exam exercises by the course faculty to ensure that course objectives are met. The fee is \$199 per participant.

Course Objectives

- 1 Demonstrate understanding of the foundation for writing higher-level items
- 2 Integrate assessment of critical thinking into course design
- 3 Utilize content classification/taxonomy criteria in item design
- 4 Judge components of a well-designed item
- 5 Apply criteria for the writing higher-level items
- **6** Develop ability to critique higher-level items
- 7 Use criteria for converting good items to higher-level items

To sign up and for complete details regarding the course, visit http://www.learningext.com or contact campusadministrator@ncsbn.org.

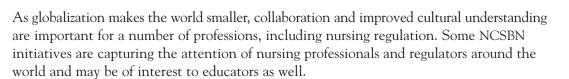


Medication Errors:

Detection & Prevention
is the latest continuing education
course from NCSBN Learning Extension.

Check it out at www.learningext.com.

NCSBN Initiatives Gain International Awareness



NCSBN's work on research-based indicators of quality nursing education programs as a method of improving practice, and in particular the pathway to developing these



indicators, was of particular interest to attendees at the 2nd International Conference of Evidence-Based Health Care for Teachers and Developers. Attendees were also interested in other NCSBN research that links nurses' reports of utilizing research findings to being competent in practice because it provides objective data in support of evidence-based practice. Through this conference, NCSBN has agreed to share its work on outcomes of transition programs with a group from Ireland that is identifying ways to prevent problems with transitioning nurses from education to practice.

These ongoing projects
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The 6th International Conference on the Regulation of Nursing and Midwifery provided attendees with a global perspective of issues in nursing, and evidenced-based outcomes were also a hot topic here. NCSBN representatives provided a regulatory viewpoint on a panel to discuss the impact of research on regulation and the need for evidence-based decisions by regulators.

A member of the NCSBN Board of Directors, Polly Johnson, MSN, RN,

executive director of the North Carolina Board of Nursing, discussed her board's work with the Practitioner Remediation Enhancement Partnership (PREP), sponsored by the Citizen Advocacy Center (CAC). PREP provides a nondisciplinary approach for addressing competence, nursing errors and remediation to improve practice by identifying health care system errors that can lead to problems in nursing practice.

NCSBN also had an opportunity to present preliminary findings from its Commitment to Ongoing Regulatory Excellence project, which incorporates internal and external data to identify best practices. These will improve regulatory practice by monitoring outcomes of regulatory activities. They will also provide a basis for strategic planning and performance improvement.

These ongoing projects have implications for the improvement of nursing practice and NCSBN looks forward to continued collaboration with representatives from practice and education on issues of global concern for solutions that will benefit patients all over the world.



NCLEX-RN®

Examination Passing Standard Revised for Public Safety

In December, NCSBN's Board of Directors voted to revise the passing standard for the NCLEX-RN® examination. The rationale for increasing the passing standard included changes in U.S. health care delivery and nursing practice, which have resulted in increased acuity of clients as seen by entry-level RNs. After considering all available information, it was determined that safe and effective entry-level RN practice requires a greater level of knowledge, skills and abilities than was required in 1998, when the current standard was established. The new passing standard will take effect April 1, 2004, in conjunction with the implementation of the new NCLEX-RN® Test Plan.

The Board of Directors used multiple sources of information to guide its discussion and evaluation of the passing standard. NCSBN convened an expert panel of nurses to perform a criterion-referenced standard-setting procedure. The nine-member panel represents the four NCSBN Areas, minorities, newly licensed RNs, clinical practice areas of newly licensed nurses, and faculty who supervise basic/undergraduate students in the clinical area. The panel's findings supported creation of a higher passing standard. NCSBN also considered the results of a national survey of nursing professionals including nursing educators, directors of nursing in acute care settings, and administrators of long-term care facilities.

The NCSBN Board of Directors evaluates the passing standard for the NCLEX-RN examination every three years to protect the public by ensuring minimal competence for entry-level RNs. NCSBN coordinates the passing standard analysis with the three-year cycle of test plan content evaluation, conducted using a practice analysis of entry-level RNs. This three-year cycle was developed to keep the test content and passing standard current with entry-level practice.

New NCSBN Study:

Regulatory Oversight of Chemically Dependent Nurses

A study entitled "Regulatory Oversight of Chemically Dependent Nurses," will be conducted in 2004 to identify the elements that are most effective in protecting the public for regulating chemically dependent nurses. A team of five people from the boards of nursing will serve as the principle researchers and will be supported by NCSBN staff in the departments of Research Services and Practice & Regulation.

Research identify answers to the following questions:

- What elements of the process of regulating chemically dependent nurses are most effective in protecting the public?
- How are alternative-to-discipline programs different than traditional discipline in:
 - monitoring practice during intervention/investigation.
 - preparation of the nurse to return to practice.
 - the type of follow-up conducted upon completion of the program/board action.

This two-year case study will use a cross-sequential design that incorporates aspects of cross-section and longitudinal formats. Data from chemically dependent nurses as well as case histories of discipline cases, will be collected from NCSBN jurisdictions with alternative programs and from those without such programs. Data from boards of nursing and alternative-to-discipline programs will also be used for data analysis. The results of this study will be valuable for boards to identify best practices in regulation.

Recently Published By NCSBN

2003 LPN/VN Practice Analysis: Linking the NCLEX-PN® to Practice

Describes practice characteristics and activities of newly licensed practical/ vocational nurses (LPN/VNs). The empirical findings are used to evaluate the 2005 NCLEX-PN® Test Plan.

Test Plan and Detailed Test Plan for NCLEX-RN®

The actual test plan used to construct each administration of the NCLEX-RN® examination, effective April 2004.

2002 Licensure and Examination Statistics

National and state summary data on board of nursing licensure activities, as well as data on candidate performance on NCLEX examinations.

Report of Findings from the Practice and Professional Issues Survey, Winter 2002

This study of newly licensed nurses covers care of pediatric patients, mathematical calculations performed, use of nursing diagnoses, RN educational preparation for selected competencies and characteristics of a typical work day.

2002 Profiles of Member Boards

Data on board of nursing structure, educational programs, entry into practice, licensure requirements, continued competency mechanisms, nurse aide competency evaluations and advanced practice. Data by jurisdiction.



Check out recently published articles by NCSBN staff on regulatory topics. For more information about NCSBN and its members featured in the news, visit www.ncsbn.org/news.

NCSBN has recently issued statements and information about taking the NCLEX exams for the VisaScreen, and on issues surrounding recently reported cases of health care serial killers.

Advance magazine will publish an article on this topic in March, written by Valerie Smith, MS, RN, associate director for Nursing Practice at the Arizona State Board of Nursing. She also chairs NCSBN's Discipline Resource Advisory Panel.

NCSBN's Nancy Spector wrote a book chapter in the recently published *Teaching Nursing:* The Art and Science by Caputi and Engelmann. And NCSBN's NCLEX Content Manager Anne Wendt, PhD, RN, CAE, was recently published in *Nurse Educator* on "The NCLEX-RN® Examination: Charting the course of nursing practice."



WHAT'S INSIDE

Information educators want at their fingertips

- NCLEX® passing standard changed
- Facts about the Nurse Licensure Compact
- NCSBN projects gain international attention



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Building a Sphere of

INFLUENCE

Kristin Hellquist, NCSBN's Associate Director of Policy and External Relations, has provided tips on becoming politically active.

Individuals and organizations involved in nursing regulation, education and practice can effectively increase their influence related to improving health care both nationally and internationally by following a few simple steps.

All too often diverse group

Get to know the players.

All too often people forget that relationship-building with many diverse groups and individuals is the most effective way to gain information, to be invited to participate, and to build your personal and organizational intellectual capital. Try inviting colleagues from other disciplines or organizations (especially those you'd like to get to know better) to breakfast or lunch or informational meetings.

Nursing regulators and educators would benefit from getting to know one another in an informal and collegial setting.

Who are the stakeholders for nursing?

- Nursing regulators, educators, and practice groups (trade).
- Other health care regulators, educators and practice groups (both professionals and settings of care).
- Elected and appointed lawmakers and policymakers (local, state, federal and international).
- Certifiers, accreditors and other standard-setting bodies of health care professionals and care settings.
- Consumer groups (especially patients).
- Patient safety groups.
- Coalitions and councils involved in health care.
- Others as identified.

Remember that nothing dilutes messages and prestige more than divisiveness on issues and ideas.

Nursing regulation and education should work to build and participate in coalitions, alliances and caucuses. Policymakers, elected officials and the public appreciate when the message from professionals is cohesive because this helps them key into the important points.

Materials and messages should be easy to understand and concise.

Those whose opinions you are seeking to influence will not be as interested in complaints as they will be in unique statistics, studies and perspectives regarding your individual or organizational issues. Method counts! Policymakers favor original letters rather than e-mail, faxes or form letters. Make sure you do not dilute your "ask" by tying in too many issues or unrelated issues. When communicating, make sure you include all those interested in your point of view, not just those you are seeking to directly influence.

Reach out to others to gain additional insight when your organization is dealing with large issues impacting multiple constituencies.

This is a simple principle based on treating others as you would like to be treated. Open and inclusive contact can help you make and retain valuable friends. When you reach out, other individuals and organizations feel valuable and, in turn, this builds goodwill that you can use now or later. Specialty organizations and nontraditional stakeholders will enrich your organization's breadth of knowledge. Be careful, however, not to encourage external involvement in initiatives that are reserved for the membership or defined bodies charged with disposition of specified matters.

Repeat, Repeat!

Nursing regulators and educators are only two of the numerous stakeholder groups that impact and value nursing, overall health care, and patient protection. Reaching out to a wider audience, again and again, can only benefit us all!

Making Rounds

Mark your calendar and look for us at conferences in 2004! NCSBN will have an exhibit booth with information on programs and services of interest to you at conferences of these organizations this year. Stop by to ask us questions or to find out more about the National Council of State Boards of Nursing.

- American Association of Critical Care Nurses March 27-30, Washington, DC
- National Student Nurses' Association Annual Convention March 31-April 4, Nashville, TN
- American Organization of Nurse Executives Annual Meeting April 17-21, Phoenix, AZ

