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Annual Statewide Educators Meeting Minutes
October 12, 2006

Attendees:

Janet Alford, University of Phoenix/Tucson
Rebecca Anchando, Central Arizona College
Max Bishop, Estrella Mountain Community College/Southwest Skill Center
Sue Bond, Pima Community College CTD
Joyceen Boyle, University of Arizona
Melanie Brady, Baptist Health System
Ruth Carlson, Central Arizona College
Sharon Caves, Pima Medical Institute
Sue Clemans, Pima Community College
Paulette Compton, Mesa Community College/Boswell Center
Judi Crume, Estrella Mountain Community College/Southwest Skill Center
Ilene Decker, Northern Arizona University
Roni DeLao Kerns, Eastern Arizona College
Vivian Denson, Central Arizona College
Rose Dermody, Paradise Valley Community College
Sally Doshier, Northern Arizona University
Jo-Ann Draper, Eastern Arizona College
Caroline Ellermann, Northern Arizona University
Myrna Eshelman, Mesa Community College
Dina Faucher, Apollo College
Irene Fawcett, Phoenix College
Mary Francoeur, RN, MSN, Arizona Western College
Pam Fuller, University of Phoenix
Marie Gagnon, Baptist Health System
Shawn Harrell, Paradise Valley Community College/John C. Lincoln
Pat Harris, Maricopa Community Colleges
Michael Hughes, Central Arizona College
Star Jermyn, Cochise College
Donald Johnson, Coconino Community College
Beatrice Kastenbaum, Arizona State University
Mary Killeen, Arizona State University
Jennifer Lakosil, Cochise College
Barbara Laramie, Pima Community College CTD
Corazon Lawton, Ethel Bauer School of Nursing/IIA

Ela-Joy Lehrman, University of Phoenix
Sara Lemley, Eastern Arizona College
Gina Long, Northern Arizona University
Mary Lyday, Pima Community College
Lyn Maschner, Maricopa Skill Center
Marty Mayhew, Pima Community College
Carolyn McCormies, Eastern Arizona College
Debra McGinty, Northland Pioneer College
Anne McNamara, Rio Salado College
Lois Miracle, Central Arizona College
Brenda Morris, Arizona State University
Nellie Nelson, Scottsdale Community College
Annye Nichols, Ethel Bauer School of Nursing/IIA
Rita Norlin, Mayo Clinic Hospital
Barbara Nubile, Yavapai College
Dottie Pennington, Maricopa Skill Center
Marsha Ramstad, Grand Canyon University
Pamela Randolph, Arizona State Board of Nursing
Sharon Rayman, Grand Canyon University
Mary Rhona-Francoeur, Arizona Western College
Linda Riesdorph, Mohave Community College
Cheryl Roat, Grand Canyon University
M. Kitty Rogers
Betty Shockey, East Valley Institute of Technology
Mayuree Siripoon, Eastern Arizona College
Margaret E. Souders, GateWay Community College
Jon Stevens, Central Arizona College
Brian Stewart, Pima Community College CTD
David Sylvester, Arizona Western College
Sandra Truelove, Maricopa Integrated Health System
Barbara Winckler, RN, MS, MCCDNP Chandler-Gilbert Community College

Clinical Coordinators

Carol Mangold, University of Arizona (Tucson area)
Jane Werth, Maricopa Community College District (Maricopa County)

- I. Meeting was called to order by Pamela Randolph, AZBN Education Consultant. Randolph welcomed the following new program directors: Sue Bond, Pima Community College; Ruth Carlson, Central Arizona College; Jennifer Lakosil, Cochise College; Lyn Maschner, Maricopa Skill Center; Debra McGinty, Northland Pioneer; and Betty Shockey, East Valley Institute of Technology.

Attendees reviewed and accepted the 2005 Statewide Educators Meeting minutes without correction.

II. Education Consultant Report

A. NCLEX®

Randolph reviewed the 2005 NCLEX scores. Program representatives did not note any particular challenges for students preparing for NCLEX. Randolph noted that Central Arizona College had a 100% pass rate for 2005.

One attendee questioned how the Board was monitoring the low NCLEX pass rate posted by the University of Phoenix. Representatives from University of Phoenix were requested to respond and stated that in response to the low pass rate, the program has instituted the following measures: Elsevier NCLEX review; revised the curriculum; standardized testing; extra study sessions for students at risk; HESI exams; and a remediation program. Additionally, University of Phoenix representatives found that the clinical preceptor model did not work for their students and they have switched to a traditional clinical faculty model.

Attendees inquired about a new vendor for NCLEX reports through National Council. Randolph stated that a sample report is available online. NCLEX reports were reported to be a valuable tool by those program directors who subscribe to them. Randolph will obtain further information and share what she learns with educators.

B. Program Annual Report

Randolph discussed how Arizona nursing programs are responding to the nursing shortage. Data from the annual nursing program reports was reviewed in a PowerPoint presentation. The Annual Report is posted on the AZBN website, and all raw data submitted for the report is available upon request. Randolph will provide all programs with a copy of the PowerPoint presentation.

C. Clinical Utilization/Patient Care Hours

Randolph collected information from programs regarding the number of patient care hours in nursing programs. The original intent was to develop a mathematical model to predict clinical spaces based on need and available slots. Programs were requested to report patient care hours in nine specialty areas and three different types of facilities (acute care, other facility based, and community). The data does not include simulation hours, clinical laboratory time, or post-clinical conference hours, and is not an indicator of quality. Randolph presented the data in a PowerPoint presentation and provided access to a paper written on the topic.

Participants requested that data be collected again in three to four years, and include more clearly defined clinical situations. It was also requested that geriatric nursing not be separated from medical-surgical nursing.

Jane Werth replaced Dan Tetting as Clinical Coordinator for the central region of the state. Werth presented a clinical coordination update. Having been exposed to the growing crisis in clinical agencies in her capacity at Maricopa Skill Center, Werth presented a PowerPoint presentation on availability of clinical slots in psychiatric and pediatric settings. Werth reported that the clinical coordination project began in 2001 with 9 participating programs and sought to coordinate clinical placements through a cooperative model to facilitate smooth, efficient placement of students in clinical experiences. There are now 23 participating programs. Ten thousand clinical experiences were scheduled during the 2005-06 calendar year. Eighty-nine agencies are currently being utilized. Werth distributed charts displaying unused day and evening shifts in psychiatric and pediatric settings. Common concerns/complaints are as follows: fatigue of agencies; voluminous number of orientates; mismatched students; and uneven loading of days. Attendees expressed concern regarding consistent loading of staff nurses on evening shifts, and inquired as to whether or not agencies would be amenable to having the same start times for shifts. Werth will present the idea to agencies and report responses to the nursing programs.

Carol Mangold, Clinical Coordinator for the southern region of the state, stated that evening and weekend placements have increased significantly. In addition, the recent closure of an acute care hospital adversely affected placements. While there are two new hospitals in the region, challenges placing students in psychiatric and pediatric settings continue. Mangold expressed concern with regard to the Hospital Council of Southern Arizona's initiative to generate one hundred and ninety new nurses per year, stating that these students will need clinical rotations. The hospitals have partnered with Pima Community College, Rio Salado College, and Grand Canyon University. Mangold noted that historically when an agency partners with an institution, the institution's students are given priority for clinical placement. A representative from Central Arizona College (CAC) stated that students from CAC are doing pediatric rotations in Mexico. A Northern Arizona University representative offered that they have programs on reservations and are using school based clinics and special education patients in residential settings for clinical experiences. Challenges continue in the areas of utilizing scarce clinical resources, developing non-traditional clinical sites, and finding faculty willing to travel to remote areas or live in distant areas at least part-time.

Attendees discussed faculty, clinical placement, standard clinical hours, pros and cons of 12 hour shifts, increases in cost and travel, and alternate

venues including Mexico. In addition, participants shared their experiences with day and evening courses, and hiring faculty for evening courses. Randolph advised that clinical placements comply with rules, and noted that having clinical experiences at night may pose a risk of fatigue and unsafe conditions for patients, faculty, and students unless carefully planned.

A request to have a formal group meet and discuss clinical placement on an ongoing basis was made. Randolph suggested any sub-committee be a part of the Education Advisory Committee. Names of interested persons were collected.

C. Approved Programs/Out-of-State Programs/New Programs

Randolph reported the following:

Approved/New Programs: East Valley Institute of Technology has been granted provisional approval for an LPN program; Everett College has been granted proposal approval; Long Technical College had been granted proposal approval last year and did not submit an application for provisional approval. An updated application for proposal approval will have to be submitted to the Education Advisory Committee again; Summit College will be submitting an application for proposal approval

Out-of-State Programs: Excelsior College has been granted approval in the state of Arizona. In response to a notice of deficiency, Excelsior College will offer a 120 hour preceptorship after the Clinical Practice Nursing Exam (CPNE) exam to meet clinical requirements as outlined in the Arizona Nurse Practice Act.

Randolph shared that the University of Wisconsin (Oshkosh), pays preceptors a \$500 stipend. There have been less than five students placed in Arizona during the past academic year. Case Western Reserve sends students for clinical experiences, and faculty visit to check on student progress.

Randolph noted that a factor in the increase in program applications may be that clinical challenges experienced in Arizona have been reported to be less than in other states.

NCSBN's *Elements of Nursing Education Study* was included in the material shared with the attendees. Among other things, the study found that the population based nursing education appears to prepare students better for employment, and that faculty involvement is crucial in clinical experiences. Randolph encouraged attendees to read the study in its entirety.

III. Program Issues

A. Use of Standardized National Testing (Survey Results)

Based on survey responses, the most frequently used test among Arizona nursing programs is the Nurse Entrance Test (NET) for admission, and the Health Education Systems, Inc. (HESI) exam and Educational Resources, Inc. (ERI) exams for progression. Most programs have a cut score. The impact is variable depending on the type of program. Remediation ranges from self-remediation, to faculty directives and a formal review course. Advantages of testing include building confidence, encouraging critical thinking, review of concepts, providing statistics for evaluation, and increasing retention of students. Disadvantages included expense, faculty commitment, data management, technical problems, monitoring retakes, exam content not always being aligned with course content, and time consuming to administer to large groups. Most programs reported that testing has contributed to the improvement of NCLEX scores. Program representatives stated they found the survey results helpful.

Attendees discussed effective faculty remediation, retaining students that do not pass exams and the inclusion of the test plan in course syllabi. No formal grievances regarding testing policy were reported.

B. Clinical Simulation (Program Survey Results)

Randolph reported that the results of the Clinical Simulation survey indicate that it doesn't appear as if programs are defining simulation the same way.

Program representatives noted the importance of debriefing after the simulation experience.

C. Faculty Recruitment/Development/Sharing

Randolph reminded the programs that the Faculty Recruitment document is now on the AZBN website. The document should be reviewed to ascertain if the openings reported are still current. Changes should be emailed to Pamela Randolph. Once changes are submitted, the revised Faculty Recruitment document will be posted on the AZBN website under "latest news".

Strategies for attracting and recruiting faculty were discussed. Some programs report success in recruiting faculty through open house events. There appears to be a national trend to use clinical nurses from hospitals as adjunct faculty with joint appointments. This practice may be helpful

in that the faculty are clinically current but requires orientation to teaching as these faculty members do not have teaching experience or an educational background. Some programs find that some of these types of faculty members do not want to teach for more than one rotation.

D. Program Legal Issues/Student Concerns/Faculty Concerns

Program representatives discussed a range of issues involving inappropriate student behavior and students/potential students with legal issues. Randolph reminded the attendees that all programs should develop policies that address students with criminal, impairment, or conduct issues, and that the Board only has jurisdiction once the person becomes an applicant for certification or licensure. For potential chemical dependency concerns, the Board can provide a list of approved addictionologists that can evaluate the student. Some programs require drug screening prior to enrollment. Others have incorporated random drug screens prior to clinical rotations.

Beyond stating that a candidate is no longer eligible for consideration or a student is no longer eligible for readmission, Randolph recommended that all institutions consult with their respective legal departments to ascertain what types of action can be taken with students exhibiting inappropriate behavior within or outside of the program, etc., and whether a program may share information about a student or potential student with another institution.

E. Statewide Learning Resource Center

In response to a request to share clinical faculty or clinical facilities equipped with sophisticated mannequins, etc., Northern Arizona University (NAU) representatives stated that NAU has a resource center in Tucson that is available to other institutions.

F. Lag Between Program Completion and Graduation

Randolph discussed modification in the certificates of completion and requested that programs indicate if there is a lag between a student completing a nursing program and graduating. If it has been more than two years since the completion of the program the applicant will be required to take a refresher course upon passing NCLEX.

IV. Action Plan – Where do we go from here

Attendees requested that the Board sponsor an all day legal session or workshop with a legal expert to discuss policies, rules, etc.; a meeting with statewide healthcare agencies to ascertain how graduates are doing; opportunity to discuss

factors influencing the nursing shortage; Ms. Gagnon will act as a liaison with AZONE to coordinate a joint meeting with statewide educators.

Program was adjourned at 3:12 p.m.

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