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REFRESHER COURSE SURVEY 2014--Draft

BACKGROUND

In 2003, the Arizona State Board of Nursing implemented a requirement for 960 hours of nursing practice within the previous 5 years (equivalent to 6 months full time) to renew an RN or LPN license. Renewing nurses are asked to sign a statement testifying that they practiced for this number of hours, at a minimum, and provide the practice setting. The Board interprets “practice” consistent with the statutory definitions of registered and practical nursing (A.R.S.§ 32-1601) which includes indirect patient care activities. Nurses engaged in consulting, recruiting nurses, teaching, coordinating care and supervision of nursing or nursing related services would meet the practice requirement. “Practice” also includes providing nursing services in a volunteer capacity and any employment where the license is required or recommended. If a nurse does not have the required hours of practice, the nurse may either inactivate the license or enroll in a refresher course. Arizona State Board of Nursing maintains a list of approved refresher courses, and these entities have been surveyed since 2006 to ascertain their contribution to the workforce.

In 2013, refresher program regulations were changed to require programs to ensure that they did not enroll students without the necessary clinical placements. This has resulted in many of the distance programs requiring students to obtain clinical placement prior to enrollment. Also in 2013-2014, programs reported increasing difficulty with “Board-ordered” refresher students related to the nurse’s practice problems. Difficulties included: disruptions in the class by the students, attitude issues on the part of the students, safety concerns for faculty and patients, difficulty securing insurance, and difficulty placing in clinical facilities. As a result, most Arizona-based programs are limiting enrollment of such students.

DATA COLLECTED

Refresher courses approved by the Arizona State Board of Nursing were asked to provide information regarding their courses for the calendar year. The information requested consisted of:

- The number of persons admitted into the refresher program
- The number of persons still enrolled from the previous year
- The number of graduates

- The number still enrolled into the next calendar year but progressing at the recommended pace
- The number of persons who failed or withdrew
- The number of persons continuing, but are repeating or lagging

In 2007 the data form was revised to separate RN and LPN enrollments. In 2014 programs were asked to report the number of students enrolled in the course solely as an “NCLEX Review” and did not participate in the clinical portion of the course.

Results 2014

Six RN and five LPN refresher programs reported enrollments in 2014. Reporting RN programs included: Pima Community College Center for Training and Development, GateWay Community College, Mesa Community College, Mohave Community College, Northland Pioneer College, South Dakota State University and MedStar Academy. Reporting LPN programs included: Pima Community College Center for Training and Development, GateWay Community College, Mohave Community College, Innovative Academic Solutions and South Dakota State University. SEVEN Academy closed in 2014 and put all records in storage. They provided an estimate of their students and graduates, which were added to the RN program numbers since the program could not specify the number of LPN students. The aggregate results are of all programs, including the estimate from SEVEN Academy are included below.

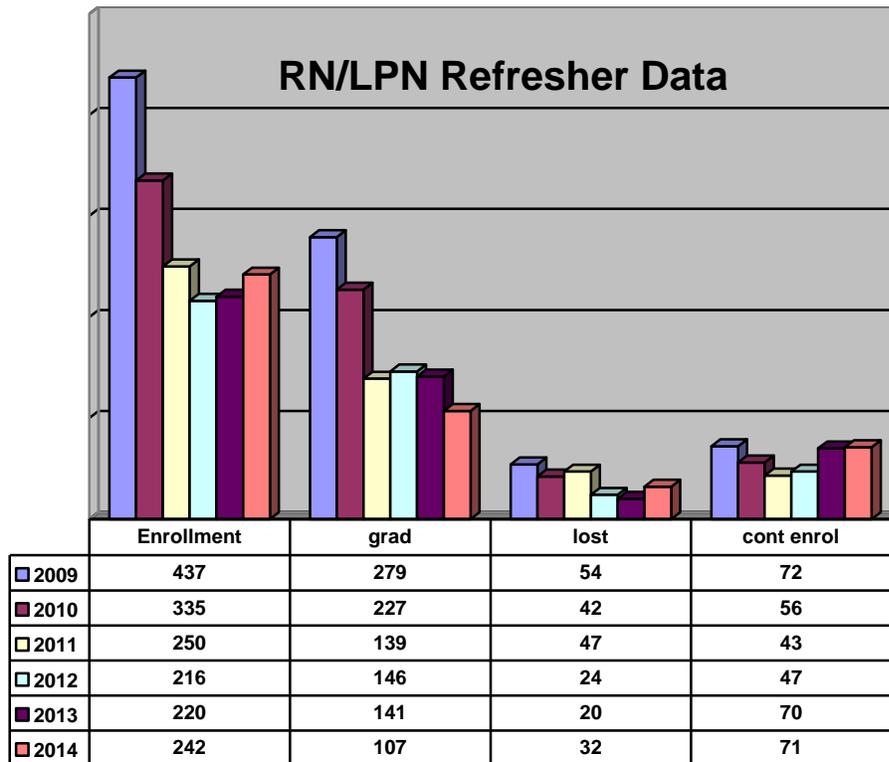
Enrollments and Graduation 2014

Number of Arizona RN refresher students admitted to the refresher program in 2014: TOTAL=168	Number of Arizona RN students admitted in 2012 who continued enrollment into 2014: TOTAL=55	Number of Arizona RNs who graduated from the program in 2014: TOTAL=95	Of those admitted in 2014, number of Arizona RNs continuing in the program into 2015 at the recommended pace (e.g. regular students): TOTAL=65	Number of Arizona RNs who failed or withdrew from the program in 2014: TOTAL=29	Number of Arizona RNs who remain in the program but are repeating or lagging due to failure or other reasons: TOTAL=6	RN NCLEX Review Students with no clinical in 2014: TOTAL=4
Number of Arizona PN refresher students admitted in 2014: TOTAL=16	Number of Arizona PN students admitted in 2013 who continued enrollment into 2014: TOTAL=3	Number of Arizona PN students who graduated from the program in 2014: TOTAL=12	Of those admitted in 2014 number of Arizona PNs continuing in the program into 2015 at the recommended pace (e.g. regular students): TOTAL=6	Number of Arizona PNs who failed or withdrew from the program in 2014: TOTAL=3	Number of Arizona PNs who remain in the program but are repeating or lagging due to failure or other reasons: TOTAL=0	PN NCLEX Review Students with no clinical in 2014: TOTAL=0

Combined Total Enrolled RN =168+55=223

Combined Total Enrolled LPN=16+3=19
Total Enrolled in any Refresher Course=242
Total Graduated=107
Graduated + continued enrollment=178

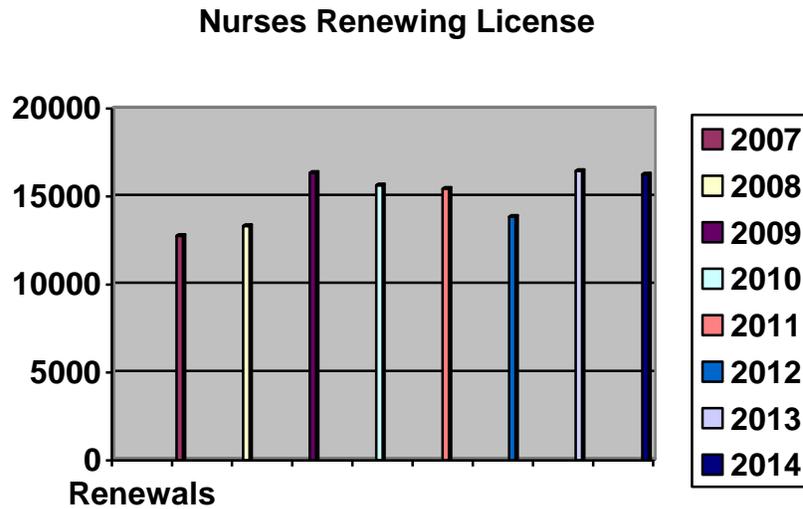
There were a total of 242 persons enrolled in a nurse refresher course in 2014. This represents a 10% increase from the 220 enrolled in 2013. One hundred and seven (107) students graduated in calendar year 2014 and 71 are continuing at the normal pace (184), indicating that 76% of students (184/242) students are either successful (graduated) or have the potential for success (still enrolled at the recommended pace). This is within the previous range of success rates but on the low end (76-96%). Thirty-two students (13%) were lost to a program either through failure or withdrawal. Six RN students are persisting in the program but lag behind the recommended pace. Trended data on the chart below reveals that for calendar year 2014 there were lower graduation rates than other periods of equivalent enrollment (2011-2013).



Programs were asked to report how they verified licensure prior to clinical experiences. All reported either using the Board of Nursing website or placing a copy of the license in the student's file. The Board requires either a temporary or permanent license to complete the clinical portion of the program.

Total Renewing Nurses and Refresher Course Enrollments

In fiscal year (FY) 2014, 16,258 nurses renewed their license, about the same number as renewed in FY 2013.



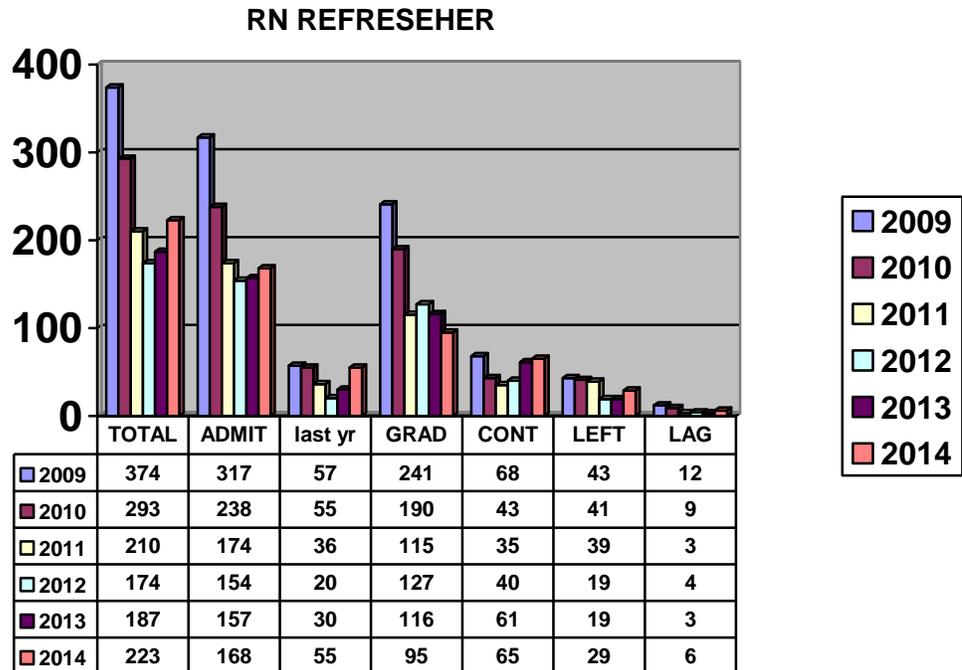
In FY 2014 only 43 “refresher course only” licenses were issued indicating that less than 20% of refresher enrollees are due to Board regulations. Nurses are not meeting the practice requirement. On April 9, 2015, at the Annual Refresher Course meeting, participants reported that a majority of enrollees are not mandated to take the course as a condition of renewal but chose to re-train for a new clinical role in nursing or for a less than 5 year lapse in practice.

RN Refresher Programs

The bulk of refresher program students are RN refreshers. The numbers of RN refresher students increased in 2014 from 187 to 223, a 16% increase. Of total enrollments 75% were admitted within the calendar year and 25% were continuing from 2013. This closely mirrors the proportion of admitted to continuing students in other years. In 2014, 95 (43%) of RN refreshers successfully completed within the calendar year, 13% (29 students) withdrew or failed, and 32% are continuing enrollment into 2014 with 2.7% lagging and 29% continuing at the optimal pace (numbers add to less than 100% most likely due to mis-reporting of drops and failures). This represents fewer graduates than previous years despite increased enrollments. Four RN students took the course as an NCLEX review only and did not complete the clinical portion.

At the Refresher Course meeting, participants reported the following observations:

- Elderly and sometimes frail nurses coming out of retirement are failing or failing to finish the course
- Younger nurses who delayed practice are doing well
- Older students have difficulty with computer skills
- If students pass the didactic portion, they do well in clinical (Minutes April 9, 2014 Refresher Course Meeting)

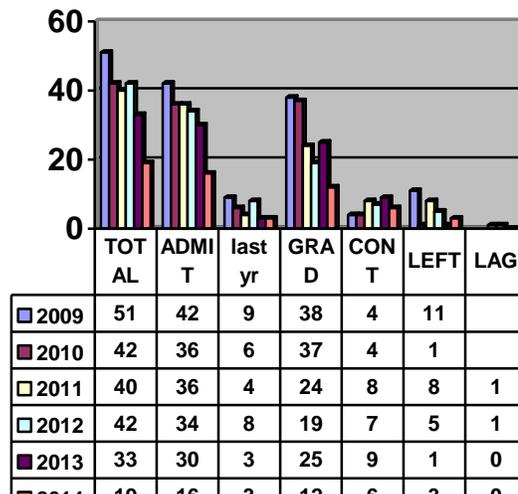


LPN Refresher Programs

LPN refresher program admissions decreased by approximately 42% in 2014 as compared to 2013. In 2014 there were 19 LPN refresher students as compared to 33 LPN

refresher students in 2013. Sixty-three percent of enrolled LPN students graduated in 2014 as compared to 45-88% in previous years. Three LPN students withdrew or failed and no students are lagging behind. No LPN student took the course as an NCLEX review.

LPN REFRESEHER



Board Discipline

Programs were also asked to report how many students enrolled as a result of a consent agreement or Board disciplinary order. There were two such students in 2014 compared to nine such students in 2013, 12 such students in 2012, and 17 such students in 2011. The two students enrolled in an out-of-state distance program.

CONCLUSIONS 2014

Based on the data provided by refresher programs, the following patterns were observed in 2014.

- There was an increase in enrollments in RN refresher programs from 2013, but a significant decrease in successful completers.
- Enrollment in an LPN refresher program decreased significantly, which may be partially due to inaccurate reporting.
- There are significantly fewer “Board ordered” refresher students in these courses, most likely due to denial of admission to such students on the part of many programs (see discussion 2014 below).
- Refresher students consist mainly of nurses who are internally motivated to take the course and not because of Board regulation.

DISCUSSION 2015

Refresher course providers met at the Board offices on April 9, 2015, and offered the following discussion points regarding refresher students and programs:

- It has helped to have the student secure the preceptor before enrollment—advise students to seek a place or area of potential employment
- One program changed the course to a combined theory/clinical course and has seen better completion rates; in Fall, students had to find their own preceptors; 87% completion rate;
- One program piloted a fast track program and was well received with 50% of students opting for the fast track;
- Programs developed partnerships with agencies with the goal of placing the student for clinical and possible future employment and find the facilities more welcoming than in the past
- Placement of a traditional clinical group has been problematic for one program
- Mohave Community College: It has helped to have the student secure the preceptor before enrollment—advise students to seek a place or area of potential employment
- Mesa Community College: Has changed the course to a combined theory/clinical course and has seen better completion rates; in Fall, students had to find their own preceptors; 87% completion rate; Piloted a fast track program and was well received with 50% of students opting for the fast track; has developed partnerships with agencies with the goal of placing the student for clinical and possible future employment. Is seeking to credential course as a “Gold Star” quality program.
- Gateway Community College: Has changed course to be similar to Mesa; has increased life span content by adding 2 credit co-requisite. Has some taking due to NCLEX failure and TOEFL failures. Discussion ensued re: Board policies regarding NCLEX and English language proficiency. Mohave Community College: It has helped to have the student secure the preceptor before enrollment—advise students to seek a place or area of potential employment
- Mesa Community College: Has changed the course to a combined theory/clinical course and has seen better completion rates; in Fall, students had to find their own preceptors; 87% completion rate; Piloted a fast track program and was well received with 50% of students opting for the fast track; has developed partnerships with agencies with the goal of placing the student for clinical and possible future employment. Is seeking to credential course as a “Gold Star” quality program.
- Programs agreed not to accept foreign graduates unless they have passed the English Language proficiency standards of the Board. Rationale: The Board will not authorize candidates to take NCLEX until English Language proficiency standards are met due to the high risk of NCLEX failure of these candidates.

DISCUSSION 2014

Refresher course providers met at the Board offices on March 24, 2014, and offered the following discussion points regarding refresher students and programs:

- Clinical placements in both acute and long term care are increasingly difficult to obtain. Reasons include a rapidly changing health care environment, the need to cross train existing staff, the difficulty for staff nurses to both do their job and teach a student, and facility “fatigue” from too many students. Placements in long-term care are also difficult as DHS rule requirements regarding student placements were recently interpreted to require extensive record keeping on the part of the facility.

- Programs may refer facilities to the Maricopa District Online Clinical Orientation (OCO) system so that their orientation can be placed on-line for all students to access; this will decrease the facility's burden for orientating students.
- Some programs also are restricted in clinically placing students because contract approval is a lengthy and cumbersome process—if a contract is not in place, the program cannot obtain one within a reasonable time frame for the students.
- Very few programs will accept Board ordered refresher students. (*Nurses on practice probation who are ordered by the Board to take a refresher*). Programs will continue to accept “Chemical Addiction Nurse Diversion Option” (CANDO) participants. Programs report that the behaviors of practice probation students are disruptive to the class and consume faculty time and attention to the extent that they are unable to attend to other students.
- Innovations in refresher education included: addition of optional specialty courses, increased use of web based learning, increased certification classes for LPNs, concurrent theory and clinical, obtaining electronic health record programs, decreasing the length of the program.

DISCUSSION 2013

Refresher course providers met at the Board offices on March 21, 2013, and offered the following discussion points regarding the report:

- Low enrollments are thought to be due to the economy and the difficult job market for refresher and new graduates
- Finding clinical sites is challenging for some programs especially in acute care and in the Phoenix area
- LPN placements are very difficult to secure
- Programs are enrolling fewer RN renewal nurses and more: internationally educated students, NCLEX failures who are not licensed in the 2 years after graduation, out of state endorsement nurses, and younger nurses
- Belief that most in-state nurses are aware of the 960 hour practice requirement and take care not to completely leave practice

DISCUSSION 2011

Refresher course providers met at the Board offices on June 1, 2013 and provided additional information regarding 2011 enrollments:

- There were decreased enrollment and observed fewer students referred by healthcare facilities for being out of practice for 6 months to a year.
- Nurse recruiters are screening applicants resumes and it's becoming more difficult to acquire employment.
- Former students are interested in review course because they didn't take their boards when they should have.
- Enrolling more international nurses trying to familiarize themselves with American nursing.
- There are fewer RNs available in long-term care (LTC) to supervise refresher students.
- Challenges with Board-ordered students' background checks
- Several attendees opined that future clinical scheduling may return to 8 hour shifts as older nurses are less interested in 12 hour shifts.

DISCUSSION 2010

The annual meeting of all refresher courses took place on April 19, 2011. Discussion focused on program innovations and challenges. Innovations included:

- Addition of a transition course for new graduates unable to obtain employment and refresher students incorporating 240 hours of clinical preceptorship
- Courses geared to those who do not pass NCLEX within 2 years of graduation
- One college acquired funding for technology to support pediatric, obstetric and specialty preparation for preceptorships
- Incorporation of an evidence-based project not only helped students with gathering evidence but improved computer skills.

Challenges experienced by program included:

- Finding clinical placements
- Older students lacking computer skills
- Internationally educated students experience difficulties adapting to the American health care culture and environment

DISCUSSION 2009

The annual meeting of all refresher courses took place on April 9, 2010. Discussion focused on evidence for success of refresher graduates and clinical placements.

Discussion included:

- Presentation of an offering for a transition course for currently practicing nurses seeking career moves to a new care setting; this course would not need Board approval and may also be suitable for new graduates who lack employment.
- One program is cutting back on refresher enrollments due to lack of clinical space
- Clinical space may be more available in dialysis units and the OR
- Programs are adding simulation to refresher courses and report the students are enjoying it
- The issue of Board referrals was discussed. Participants were asked to compile case studies of each Board referral including factors that contributed to their success or failure in the course.
- It was agreed that refresher programs would retain student records for a period of 3 years
- Bontrager provided an overview of licensure issues including a handout on the process to obtain a Temporary License for Refresher Course Only.

DISCUSSION 2008

At the annual refresher course provider meeting held in the Board offices on February 5, 2009. The following is a reflection of the discussion that took place at the meeting as categorized by issues facing refresher course providers.

Out of practice for extended periods

- Older nurses in their 60s and above are trying to come back into nursing; many are successful; nurses out of practice more than 15 years need extra attention that is not provided in a basic on-line refresher course;
- Those who have never worked need more structure than a basic on-line refresher course can provide; Instructed clinical has helped students who have been out more than 15 years;
- One program requires those nurses out more than 20 years to fill out a questionnaire and self evaluation; they are also directed to talk to nurses in health care facilities to ascertain the differences in practice over the past 2 decades; many potential students, realizing the obstacles, elect not to enroll, but 3 individuals did enroll, were successfully mentored and completed the course;

Computer Skills

- Refresher students need to obtain computer skills—many do not have e-mail or know how to attach a document;
- Refresher students are under the impression that an on-line program is easier despite not having computer skills

Clinical Preceptorships/Hiring

- It was the consensus of all programs that finding preceptors/clinical is very difficult
- Up to 30% in one program did not finish related to inability to find preceptor
- Facilities are reluctant to take precepted refreshers due to liability issues;
- It is “impossible” to obtain preceptors in Phoenix hospitals but some alternative placements are successfully obtained;
- One program has successfully placed students who subsequently were hired at Catholic Health Care West, Hacienda los Ninos, and other rehabilitation facilities; this program has also successfully placed every LPN;
- Most acute care facilities have a hiring freeze;
- There are too many new grads for acute care to consider refresher students as hires; in the past most refresher students were hired by the preceptor agency but that is not the case this year; even new LPN grads are having difficulty being hired in long-term care

Board Ordered Refresher Students

- Students under Board order for a refresher course are having difficulty obtaining insurance; this is usually only a problem if the nurse’s license was revoked or suspended; GateWay offered that such students would be covered under group insurance if they attended their program;
- Board ordered refreshers take a tremendous amount of time; one program stated that most board-ordered nurses in their program had significant behavior problems and dysfunction; if the problems stemmed from a medical problem, the program has been successful in teaching the student; if there are underlying psychological problems, the student requires intensive counseling.
- Students on Board order were reported to do better in a program where there is more traditional structure and instructed clinicals;
- CANDO students do very well;

Innovations

- Mesa CC received a grant from the DOE to pilot modules; their program will change to a series of core modules covering all of basic nursing and ½ credit of pharmacology; after completing the core modules, the student may choose a specialty path (med-surg, OB, peds) and take that module plus another ½ credit in pharmacology specific to the specialty; clinical would be in the area of choice
- GateWay changed their case studies to multi-system case studies and is incorporating evidence-based practice concepts; they require a final paper with 10 references; drug dosage calculation tests must be passed or the student will need to complete a math class; they have also added an additional 1 credit on-line class on medication errors and documentation. GateWay is starting an evening refresher program at the end of March for RNs only and is developing a live class on ethical decision making to start Fall '09.
- Pima Community College CTD is requiring a “shadow” experience the first week of the course; many students find this “scary” but some enjoy it so much that they elect to do multiple shadowing experiences; the student finds their own nurse to “shadow” and since no hands-on care is delivered, there is no need for insurance/agreement etc.
- Abrazo reported that they conducted clinical concurrent with didactic instruction matching patients to the module discussed; students seem to enjoy this;
- SEVEN Academy has received approval from the South Dakota Board of Nursing—is working with the Board to see if compact extends to refresher course license so nurse can complete clinical in South Dakota;

SUMMARY 2008

It was the consensus of the group that clinical placements and future employment is more difficult to obtain for refresher students in the current economic environment. Successful strategies for students out of practice 15 years or more include shadowing, pre-course interview, and structured class and clinical experiences. Board ordered students also appear to do better in a structured classroom and clinical environment. Innovations include tailoring the course to specialty areas of class, incorporating EBP, shadowing, and concurrent clinical reflecting didactic content. All participants agreed that the meeting was helpful and they enjoyed sharing their experiences.

CASE STUDY—2007

Nurse A graduated from nursing school over 25 years ago. She worked for less than a year as a nurse, then returned to school and earned a master’s degree in counseling. She has continuously worked as a counselor in a mental-health setting for 25 years. She sought licensure in AZ but did not qualify since she has not worked as a nurse for over 25 years. As required by the Board, she enrolled in a refresher course and requested a clinical experience in a psych-mental health clinic. Her performance in the didactic portion of the course was erratic with widely varying scores for tests and quizzes. She had difficulty with pharmacology and math calculations, but seemed to compensate and presented believable rationale for her performance. She was well liked by faculty and fellow students. She was placed in a psych

mental health clinical setting and her preceptor noted several deficiencies in her nursing care. The preceptor stated that it appeared that she never really practiced nursing. She could not appropriately draw blood or administer an IM injection despite repeated coaching and instruction. She also did not seem to be aware of her limitations. Although she was considered stellar in interviewing patients and mastered the psychosocial aspects of patient care, she could never adequately demonstrate the nursing skills expected. She subsequently failed her clinical experience and was offered another clinical experience in a long-term care setting where basic nursing skills could be honed. She attended for a brief period, then decided not to seek licensure and dropped the program. A complaint was filed against the program for poor preparation of the student for clinical. The program made several changes to their policies and the Board dismissed the complaint in light of the remediation instituted by the program.