



Janice K. Brewer
Governor

Joey Ridenour
Executive Director

Arizona State Board of Nursing

4747 North 7th Street, Suite 200
Phoenix, AZ 85014-3655
Phone (602) 771-7800 Fax (602) 771-7888
E-Mail: arizona@azbn.gov
www.azbn.gov

REFRESHER COURSE SURVEY 2013

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 practice 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 non-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 approved refresher courses have been surveyed since 2006 regarding enrollments and completion.

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 consists 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.

Results 2013

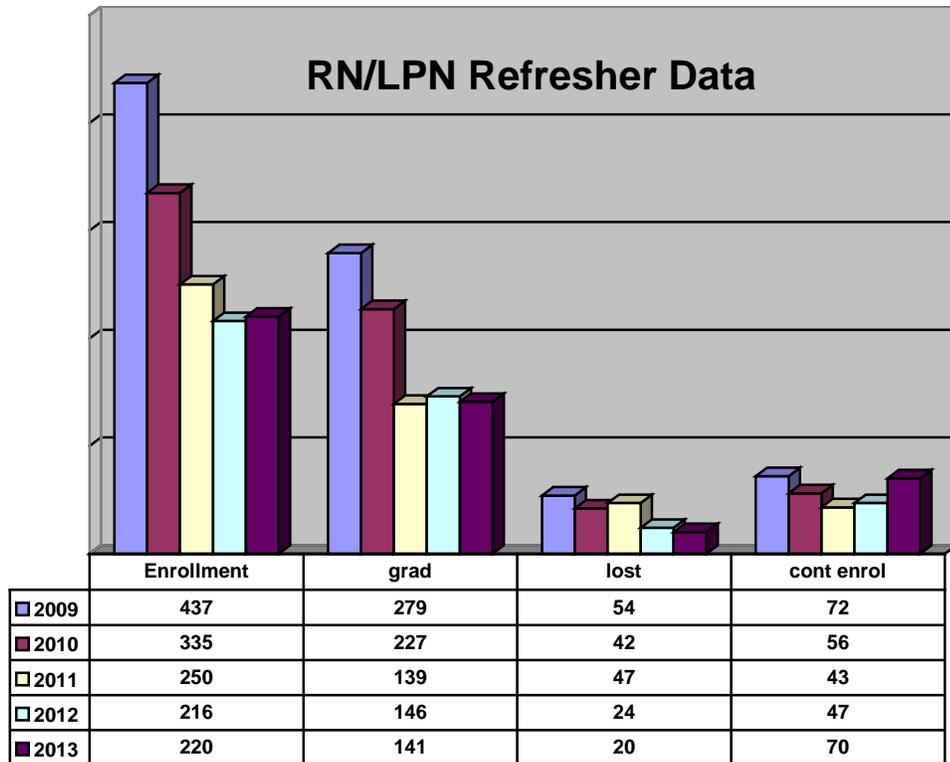
Seven RN and six LPN refresher programs reported enrollments in 2013. Reporting RN programs include: Pima Community College Center for Training and Development, GateWay Community College, Mesa Community College, Mohave Community College, Northland Pioneer College, South Dakota State University, SEVEN Academy and

MedStar Academy. Reporting LPN programs include: Pima Community College Center for Training and Development, GateWay Community College, Mohave Community College, Innovative Academic Solutions, South Dakota State University and SEVEN Academy. The aggregate results are included below.

Number of Arizona RN refresher students admitted to the refresher program in 2013: TOTAL=157	Number of Arizona RN students admitted in 2012 who continued enrollment into 2013: TOTAL=30	Number of Arizona RNs students who graduated from the program in 2013: TOTAL=116	Of those admitted in 2013, number of Arizona RNs continuing in the program into 2014 at the recommended pace (e.g. regular students): TOTAL=61	Number of Arizona RNs who failed or withdrew from the program in 2013: TOTAL=19	Number of Arizona RNs who remain in the program but are repeating or lagging due to failure or other reasons: TOTAL=3
Number of Arizona PN refresher students admitted in 2013: TOTAL=30	Number of Arizona PN students admitted in 2011 who continued enrollment into 2013: TOTAL=3	Number of Arizona PN students who graduated from the program in 2013: TOTAL=25	Of those admitted in 2013 number of Arizona PNs continuing in the program into 2013 at the recommended pace (e.g. regular students): TOTAL=9	Number of Arizona PNs who failed or withdrew from the program in 2013: TOTAL=1	Number of Arizona PNs who remain in the program but are repeating or lagging due to failure or other reasons: TOTAL=0

Combined Total Enrolled RN =187
Combined Total Enrolled LPN=33
Total Enrolled in any Refresher Course=220
Total Graduated=141
Graduated + continued enrollment=211

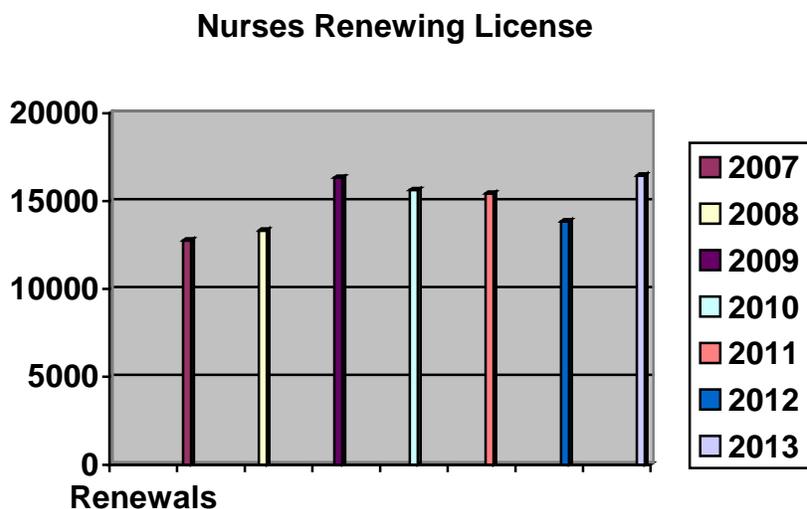
There were a total of 220 persons enrolled in a nurse refresher course in 2013. This represents a slight increase from the 216 enrolled in 2012. One hundred forty-one (141) students graduated in calendar year 2013 and 70 are continuing at the normal pace (211), indicating that 96% of students (211/220 students) are either successful or have the potential for success. This is a higher success rate than any previous reporting period (76-89%). Twenty students were lost to a program either through failure or withdrawal. Three RN students are persisting in the program but lag behind the recommended pace. Trended data on the chart below reveals that for calendar year 2013 there were higher overall enrollments and higher graduation and persistence rates.



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.

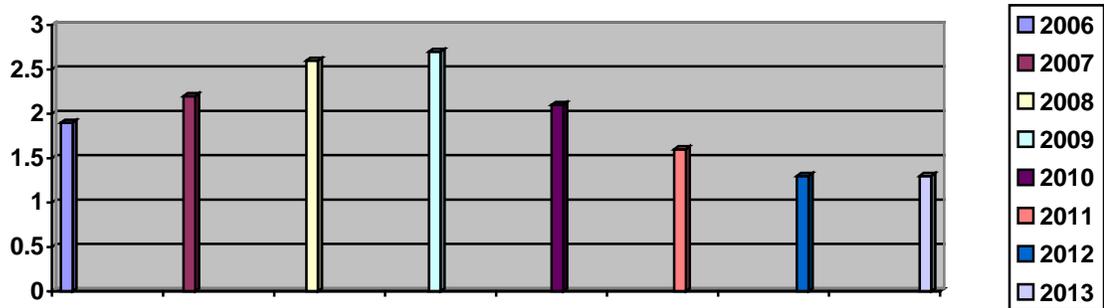
Total Renewing Nurses and Refresher Course Enrollments

In 2013, 16,451 nurses renewed their license, about 2600 fewer than in 2012.



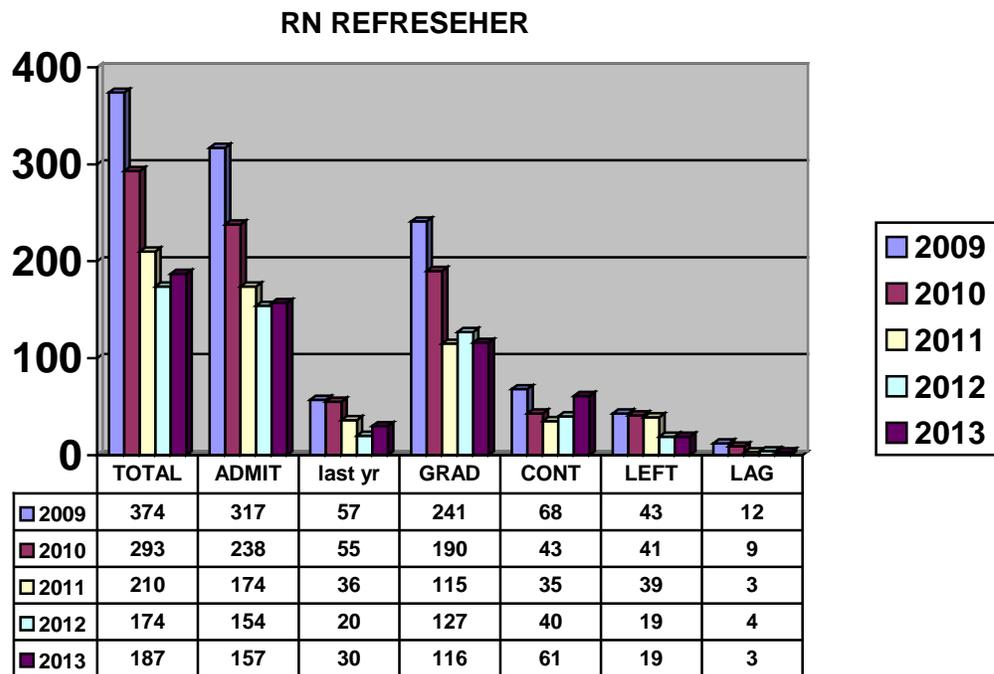
Enrollments in refresher courses represented 1.3% of all 2013 renewal applications. Enrollment figures may be slightly inflated due to the same person re-enrolling in a different course after withdrawal or failure. Refresher courses report that 10-30% of enrollees are not mandated to take the course as a condition of renewal but chose to re-train for a new clinical role in nursing.

Percent of renewing nurses enrolled in a refresher course



RN Refresher Programs

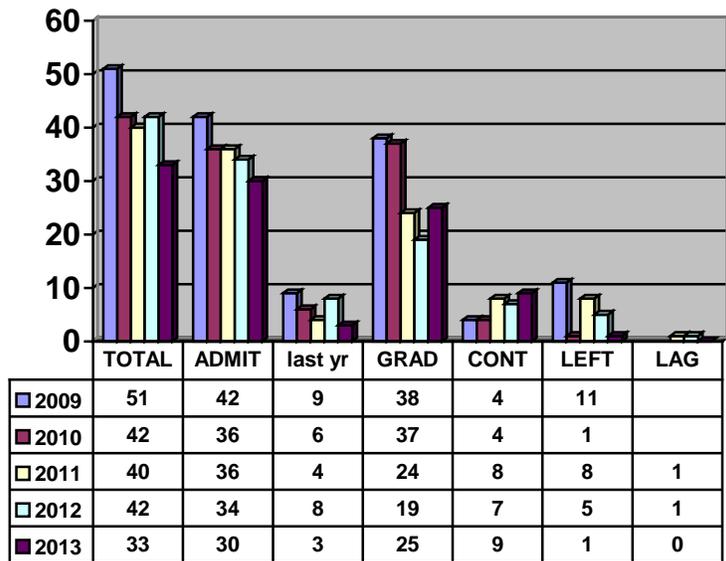
The bulk of refresher program students are RN refreshers. The numbers of RN refresher students increased slightly in 2013. Of total enrollments 84% were admitted within the calendar year and 16% were continuing from 2012. This closely mirrors the proportion of admitted to continuing students in other years. In 2013, 116 (62%) of refreshers successfully completed within the calendar year, 10% withdrew or failed, and 33% are continuing enrollment into 2014 (numbers add to more than 100% most likely due to mis-reporting). This represents fewer graduates during the year despite increased enrollments. It may be that nurses enrolled during the latter part of 2013, therefore were unable to finish within the calendar year. Three (1.6%) students are either lagging behind the recommended pace or repeating the course due to failure.



LPN Refresher Programs

LPN refresher program admissions decreased in 2013 as compared to other years. In 2013 there were 33 LPN refresher students as compared to 42 LPN refresher students in 2012. Seventy-five percent of enrolled LPN students graduated in 2013 as compared to 45-88% in previous years. Only one LPN student withdrew or failed and no students are lagging behind.

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 nine (4%) such students in 2013 compared to 12 such students in 2012 and 17 in 2011.

CONCLUSIONS 2013

Based on the data provided by refresher programs, the following patterns were observed in 2013.

- There was a slight increase in enrollments in RN refresher programs from 2012.
- A lesser proportion of enrolled students graduated from RN refresher courses.

DISCUSSION 2014

Refresher course providers met at the Board offices on March 25, 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 that 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.