Preparing Students for the Next Generation of NCLEX (NGN) with Clinical Judgement

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Submit questions and comments via the Questions panel. To test out this feature enter the state or country you are joining us from.

**Note:** Today’s presentation is being recorded and will be available on the Sigma Repository in 48 hours.
Purpose

This webinar is designed to familiarize clinical faculty with the Next Generation of NCLEX licensing exam and to discuss instruction methods clinical faculty can use to promote student success in preparing for the NGN.
Poll: What is your role at your School of Nursing?

<table>
<thead>
<tr>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full time faculty</td>
</tr>
<tr>
<td>Part time faculty</td>
</tr>
<tr>
<td>Not a faculty member yet</td>
</tr>
</tbody>
</table>
Poll: What do you teach?

- Clinical courses
- Didactic courses
- Both clinical and didactic courses
- No direct student teaching at this time
About Dr. Hansbrough

- Colorado native. BSN from the University of Northern Colorado
- Clinical Expertise: Care of Burn Patients
- California State University San Marcos, School of Nursing
  - Interim Director
  - Committee chair: Program Evaluation & Assessment
  - Undergraduate Program Curriculum Revision Lead
Learning Objectives

- Recognize the rationale for the NGN.
- Relate the process for the development of the NGN.
- Describe the NCSBN Clinical Judgement Model.
- Describe clinical instruction methods to support the clinical judgement model.
Why do we need a next generation of NCLEX?

How was it developed?
A Brief History of Registered Nurse Licensing

Nightingale opens 1st nurse training school, St. Thomas Hospital

American Society of Superintendents of Training Schools for Nurses: NLN

1893

ANA Founded

1911

State Board Test Pool Exam
State set passing level

1944

Efforts to standardize nurse education requirements & registration

1978

All States using SBTPE

1950

1975: SBTPE: 2X/year, same days, all states

1982

National Council of State Boards of Nursing

June 24, 1860

Test Plans Reviewed Every 3 Years


NCLEX Evolution

- From normative (SBTPE) To criterion (NCLEX) referenced assessment
  - Normative Referenced:
    - Rank test takers (compared against each other)
    - Each state set its own benchmark for passing
  - Criterion Referenced:
    - Competency measured against a standard
- Nursing process based
- 1994: From pencil/paper to computer adaptive testing (CAT)
- 2003: Multiple question formats
- 2020: Next Generation and the Clinical Judgement Model
NCLEX Test Plan: 10/2020 to 3/2022

<table>
<thead>
<tr>
<th>Client Needs</th>
<th>Percentage of Items from Each Category/Subcategory</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safe and Effective Care Environment</td>
<td></td>
</tr>
<tr>
<td>- Management of Care</td>
<td>17–23%</td>
</tr>
<tr>
<td>- Safety and Infection Control</td>
<td>9–15%</td>
</tr>
<tr>
<td>Health Promotion and Maintenance</td>
<td>6–12%</td>
</tr>
<tr>
<td>Psychosocial Integrity</td>
<td>6–12%</td>
</tr>
<tr>
<td>Physiological Integrity</td>
<td></td>
</tr>
<tr>
<td>- Basic Care and Comfort</td>
<td>6–12%</td>
</tr>
<tr>
<td>- Pharmacological and Parenteral Therapies</td>
<td>12–18%</td>
</tr>
<tr>
<td>- Reduction of Risk Potential</td>
<td>9–15%</td>
</tr>
<tr>
<td>- Physiological Adaptation</td>
<td>11–17%</td>
</tr>
</tbody>
</table>

**Distribution of Content for the NCLEX-RN® Test Plan**

- Management of Care: 20%
- Safety and Infection Control: 12%
- Physiological Adaptation: 14%
- Reduction of Risk Potential: 12%
- Pharmacological and Parenteral Therapies: 15%
- Health Promotion and Maintenance: 9%
- Psychosocial Integrity: 9%
- Basic Care and Comfort: 9%
- Comfort: 9%

The percentage of test questions assigned to each Client Needs category and subcategory of the NCLEX-RN Test Plan is based on the results of the Report of Findings from the 2017 RN Practice Analysis: Linking the NCLEX-RN Examination to Practice (NCSBN, 2018) and expert judgment provided by members of the NCLEX Examination Committee.
The NCSBN Clinical Judgement Model.
Poll: How familiar are you with the Next Generation of NCLEX Clinical Judgement Model?

- Very familiar and using it in teaching.
- Familiar and beginning to use it.
- Somewhat familiar, but not using it yet.
- Just starting to learn about it.
1. Recognize Cues: what information is relevant? What is of concern? Most important?

2. Analyze Cues: What is the client’s condition related to cues? Why are the cues of concern? What else would be helpful to know?


3. Prioritize Hypothesis: Most likely explanation? Least likely? Most serious?


5. Take Action: Implement the intervention(s) that address the highest priority. How will intervention be done?


Poll: How familiar are you with the Next Generation of NCLEX case study question format?

Very familiar and using it in teaching.

Familiar and beginning to use it.

Somewhat familiar, but not using it yet.

Just starting to learn about it.
What student will see on NGN

What Matters Most? Recognize Cues

<table>
<thead>
<tr>
<th>Client Findings</th>
<th>Drag &amp; Drop Top 4 items that need follow-up</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item 1</td>
<td></td>
</tr>
<tr>
<td>Item 2</td>
<td></td>
</tr>
<tr>
<td>Item 3</td>
<td></td>
</tr>
<tr>
<td>Item 4</td>
<td></td>
</tr>
<tr>
<td>Item 5</td>
<td></td>
</tr>
<tr>
<td>Item 6</td>
<td></td>
</tr>
</tbody>
</table>

[https://www.ncsbn.org/NGN_Spring20_Eng_02.pdf](https://www.ncsbn.org/NGN_Spring20_Eng_02.pdf)
## Case Study

### What student will see on NGN

### What could it mean? Analyze Cues

<table>
<thead>
<tr>
<th>Client Findings</th>
<th>Disease Process 1</th>
<th>Disease Process 2</th>
<th>Disease Process 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment finding 1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assessment finding 2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assessment finding 3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assessment finding 4</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

https://www.ncsbn.org/NGN_Spring20_Eng_02.pdf
Where Do I Start? Develop a Hypothesis

Complete the following sentence by choosing from the list of options.

The client is at highest risk for developing ….. [pull down menu of disease] as evidenced by [pull down menu of assessment type].
## What student will see on NGN

### What can I do? Generate Solutions

<table>
<thead>
<tr>
<th>Potential Interventions</th>
<th>Indicated</th>
<th>Nonessential</th>
<th>Contraindicated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Action 1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Action 2</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Action 3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Action 4</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

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[https://www.ncsbn.org/NGN_Spring20_Eng_02.pdf](https://www.ncsbn.org/NGN_Spring20_Eng_02.pdf)
## What student will see on NGN

### Case Study Added Information

### What can I do? Generate Solutions

<table>
<thead>
<tr>
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<th>Indicated</th>
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<td>Action 1</td>
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[https://www.ncsbn.org/NGN_Spring20_Eng_02.pdf](https://www.ncsbn.org/NGN_Spring20_Eng_02.pdf)
Case Study

What student will see on NGN

Which will I do? Take Action

Physician orders received.

Highlight the 3 orders the nurse should perform now?

Order 1
Order 2
Order 3
Order 4
Order 5

https://www.ncsbn.org/NGN_Spring20_Eng_02.pdf
## Case Study

### What student will see on NGN

**Did it help? Evaluate Outcomes**

<table>
<thead>
<tr>
<th>Client Findings</th>
<th>Improved</th>
<th>No Change</th>
<th>Declined</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment finding 1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assessment finding 2</td>
<td></td>
<td></td>
<td></td>
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https://www.ncsbn.org/NGN_Spring20_Eng_02.pdf
Clinical instruction methods to support the clinical judgement model.
Terminology

Used when deconstructing situations, questioning outmoded practices, thinking about past events (critical reflection).

Thinking process at point of care; required before making a judgement.

Outcome of critical thinking and clinical reasoning. Influenced by nurse’s intuition. The decision to act, or not.

# 4 Shifts in thinking for Nurse Educators

<table>
<thead>
<tr>
<th>FROM</th>
<th>TO</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Covering decontextualized knowledge</td>
<td>- Teaching a sense of salience, situated cognition, &amp; action in clinical situations</td>
</tr>
<tr>
<td>- Sharp separation of classroom &amp; clinical teaching</td>
<td>- Integrative teaching in all settings</td>
</tr>
<tr>
<td>- Emphasis on critical thinking</td>
<td>- Clinical reasoning &amp; multiple ways of thinking</td>
</tr>
<tr>
<td>- Emphasis on socialization &amp; role taking (acting like a nurse)</td>
<td>- Emphasis on formation (becoming a nurse)</td>
</tr>
</tbody>
</table>

## Moving to the CJM

<table>
<thead>
<tr>
<th>Know</th>
<th>Use</th>
<th>Incorporate</th>
</tr>
</thead>
</table>
| Know and understand the model yourself. | Use the model throughout the curriculum.  
• Introduce it in fundamentals.  
• Emphasize its evidence base.  
• Consistently use it  
• Advertise it. | Incorporate it into your teaching.  
Develop the skill to do so. |
Instructive Techniques

Recognize the knowledge & experience level of the student.
A fundamental student may not be prepared to work through the model.

Step back from your own expert level thinking.
Break down the steps and guide students through the process.

Contextualize, Contextualize.
Paint a picture; Create active learning everywhere.

Make its use a habit.
Use some of it or all of it, depending on the situation.
Quick Tricks

- Give students a “One-Sentence Cue”, a statement they might hear from a patient that would indicate a problem (Recognize Cues)
  - I have 3 different doses of that pill at home.
  - I really like the food here. I don’t eat like this at home!
- Give students a brief patient situation (1 or 2 lines) and ask them to list the cues they might see (Recognize the Cues).
  - Take it a step further; ask them to analyze the cues
- Give students a scenario, a “quick report”, and walk them through the clinical judgment model. Use this during post conference.

Teach Thinking Steps

**Tailor teaching to the situation.**
- Taking the student through the entire model all at once may be overwhelming and not instructive.
- Build on steps through the day, as new cues are presented with changing patient conditions, as interventions are taken.
- It is a thinking tool, not a testing ground.

**Never miss an opportunity to use the model**
- Teaching skills; Lab competency stations
- Deconstruct a case, from the point of outcome evaluation
  - What actions were taken?
  - What solution were addressed?
  - Why was that solution the priority?
  - What cues were there, and why did they matter?
Clinical Judgment Model

A contextual thinking tool to support students’ attainment of a safe, effective, patient-centered nursing practice.

A powerful tool to advance your nurse educator practice.

Practice:
The condition of being proficient through systematic exercise.
References


Thank you for attending!

- We will send you an email in approximately 1 week that will include a link to the webinar recording and the process for completing the evaluation to obtain your CNE certificate.
- Questions? Email us at: education@sigmanursing.org
- Sign up for future webinars or view previously recorded webinars at: https://www.sigmanursing.org/learn-grow/education/sigma-webinars
And for whatever comes next, Sigma Marketplace offers several books and CNE to support you.
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