

# Impact of Using Commercially Prepared Specialty Exams as Clinical Course Final Exams

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# Disclosure

- Claudine Dufrene
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- Kristina Leyden
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  - None

# Learner Objectives

At the end of this activity, the learner will be able to:

- identify methods used to improve scores on standardized exams.
- compare the class means before and after implementation of the use of standardized exams as final exams.

# Introduction

- Commercially prepared exams are used
  - To determine eligibility for graduation
  - To determine readiness for NCLEX-RN
- Used as predictors for NCLEX-RN success
- Used for high stakes testing linked to progression

# Background

- Baccalaureate nursing program at private, faith-based university
- Multi-ethnic student population
- Commercially prepared standardized exams used in clinical courses
- Exams weighted at 5% - 10% of course grade
- Commercially prepared standardized exit exam in final semester
- Scores below expectations

# Methods

- Substitute instructor prepared final exams with commercially prepared standardized specialty exams
- Specialty exams weight increase to 25% of course grade
  - Consistency across clinical courses
- Exams administered twice
  - Allow 2 weeks for remediation

# Methods

- Higher conversion score recorded
- Pilot in Maternal health and Pediatric courses
- Followed by Fundamentals course next semester
- Benchmark for measurement score 850 or greater
  - Predictive score for NCLEX-RN success

# Results

## Exam means

	2015	2016	% increase
Pediatrics n=36	763	851	11.5
Maternal health n=36	790	908	14.9
Fundamentals n=38	765	870	13.7



# Results

## Percent score 850 or above

	2015 %	2016 %	% Change
Pediatrics n=36	21	54	157%
Maternal Health n=36	27	54	100%
Fundamentals n=38	31	63	103%

# Ethnicity

Group	White %	Black or African- American %	Hispanic %	Asian %	Not Specified %
2015 (n=36)	11	17	47	25	0
2016 (n=38)	26	8	50	8	8

# Age

Group	17 – 20 %	21 – 30 %	31 – 40 %	41 – 50 %	51 – 60 %
2015 (n=36)	13.8	66.7	16.7	2.7	0
2016 (n=38)	15.7	73.7	7.9	0	2.6

# Discussion

- Specialty exam means above national BSN mean after implementation
- Improvement of lower scores on second exam
- All students passed courses
- Exit standardized exam score required for graduation  $\geq 900$

# Exit scores $\geq$ 900

Group	First Attempt %	Second Attempt %	Total After 2 attempts %
Before	25.7	28.6	28.6
After	68.8	55.6	84.4

# Implications

- Cannot be generalized to a population
- Increased scores on specialty exams to impact comprehensive exit exam and NCLEX pass rate

# Conclusions

- Continue to have improved results
- Better performance on exit exam

# References

- Barton, L., Willson, P., Langford, R., and Schreiner, B. (2014). Standardized Predictive Testing: Practices, Policies, and Outcomes. *Administrative Issues Journal*, (4), 2, 68-76.
- Carr, S. M. (2011). NCLEX-RN Pass Rate Peril: One School's Journey Through Curriculum Revision, Standardized Testing, and Attitudinal Change. *Nursing Education Perspectives*, (32), 6, 384-388.
- Elsevier Education. (2016). *2016 Scientific evidence for Elsevier HESI exams and products*. Elsevier.
- Koestler, D. L. (2015). Improving NCLEX-RN First-Time Pass Rates with a Balanced Curriculum. *Nursing Education Perspectives*, (36), 1, 55-57.
- Sosa, M. and Sethares, K. A. (2015). An Integrative Review of the Use and Outcomes of HESI Testing in Baccalaureate Nursing Programs. *Nursing Education Perspectives*, (36), 4, 237-243.
- Zweighaft, E.L. (2013). Impact of HESI Specialty Exams: The Ninth HESI Exit Exam Validity Study. *Journal of Professional Nursing*, (29)2S, S10-S16.



# QUESTIONS?