

**Board of Nurse Examiners
for the State of Texas**

**Statewide Plan to Create Innovative Models for
Nursing Education To Increase RN Graduates in
Texas Professional Nursing Education Programs**



**Published by the Board of Nurse Examiners
For the State of Texas
333 Guadalupe, Suite 3-460
Austin, Texas 78701**

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Statewide Plan to Create Innovative Models for Nursing Education To Increase RN Graduates in Texas Professional Nursing Education Programs

Legislative Charge

This proposal is in response to a request by the Sunset Commission to the Board of Nurse Examiners (BNE) to create, in collaboration with nursing education stakeholders and the Texas Higher Education Coordinating Board (THECB)*, innovative models for nursing education that promote **increased enrollments** in Texas professional nursing programs. Drawing upon the THECB Report *Strategies to Increase the Number of Graduates from Initial RN Licensure Programs*, a response to the 79th Legislature, and responding to discussions with stakeholders, the BNE believes that a more comprehensive, outcome based plan is to create innovative models in order to **increase RN graduates** of nursing programs. The BNE met with representatives from stakeholder groups including a professional nursing association, Baccalaureate Degree and Associate Degree nursing program educator groups, employers, the Texas Center for Nursing Workforce Studies and the Texas Higher Education Coordinating Board.

Background

Increasing the number of RN graduates of Texas nursing education programs is only one part of the solution to the nursing shortage in the state. Other recommendations from the Texas Center for Nursing Workforce Studies are to increase retention of nurses in the nursing workforce and to delay retirement of older, experienced nurses from the workforce. Healthcare organizations and employers of nurses are encouraged to implement strategies to make positive changes in the work environment to retain the experienced nurses in the work settings.

The BNE believes that the charge to increase graduation rates is timely. The Board's authority to regulate nursing education, as well as its knowledge and experience in this area, put the Board in the best position to implement innovation in nursing education seamlessly and quickly. The current climate, highlighted by the Sunset Commission Staff Report, has already challenged both nursing regulators and nursing educators to think outside the box.

Current Educational Environment

In January 2007 the number of pre-RN licensure nursing programs approved by the BNE was:

- 2 Diploma Nursing Programs
- 57 Associate Degree Nursing Programs
- 26 Baccalaureate Degree Nursing Programs
- 1 Alternate Entry Master's Degree Nursing Program

* This proposal is presented by the BNE. THECB staff have given input to the plan but currently THECB has no official position on the plan.

Nursing education in Texas has followed national trends in moving nursing education from hospitals to institutions of higher education. In the 1960s nurses were predominantly educated in hospital diploma programs; but in 2006, only 2% of graduates were from Diploma programs. Factors which have required a higher level of education for nurses include:

- emerging high technology and complexity in health care
- the responsibility of coordinating care
- acuity of illness of hospitalized patients
- requirements for research-based nursing practice

Distribution of 2006 RN nursing program graduates, by type of pre-licensure program:

- Diploma programs 2.5%
- Associate degree programs 60.0%
- Baccalaureate degree programs 37.1%
- Alternate entry MSN program .3%

Nursing education programs have been working diligently to increase graduation rates. Special appropriations from the legislature for nursing education totaling **\$38.8 million from 2001 through 2006 has resulted in a substantial increase of 47.2% in the number of nursing graduates.**

Nursing education stakeholders have strongly reiterated to the BNE that to continue this rate of growth, professional nursing education programs will need to increase their use of fiscal resources and that without additional funding, programs will be unable to achieve additional program growth.

Assumptions

1. **Funding** outlined in the proposal is **essential** to increase RN graduates.
2. The Legislature expects **accountability** from nursing programs regarding funds.
3. The BNE has the **expertise** to monitor the programs' implementation of strategic plans to increase graduates.
4. The model is **NOT INTENDED TO PUNISH** programs that are not able to ultimately reach their targeted goals but to initiate models which will **stimulate innovation**.
5. Programs will be allowed the **discretion to choose** between strategies or create additional strategies. There are various ways to achieve the projected goals.
6. The overall goal is for a **45.5% increase** in the number of RN graduates above the 2006 number.
7. **Support** from institutions and public/private partnerships is essential.
8. The ultimate outcome of strategies is not known; therefore, the effectiveness of strategies will be evaluated and data will be collected to be used for future planning.

General Overview of the Model

The BNE recommends that the following statewide plan be adopted:

1. The Texas Legislature should provide appropriate funds for increasing the number of graduates of professional nursing education programs. \$39 million in funding should be allocated to increase enrollments and \$32 million should be allocated to increase current nursing faculty salaries. Once the funding is committed, the BNE and the THECB should collaborate in a statewide plan whereby professional nursing education programs are required to implement strategies to **increase initial RN licensure graduates from 6,674 in 2006 to 9,717 in 2010, showing another 45.5% increase.** ¹ This projection would result in the following increases:

¹The number 6,674 regarding 2006 graduates is derived from BNE reported data. The Texas Center for Nursing Workforce Studies utilized the U.S. Health Resources and Services Administration (HRSA) model to project the need for Texas graduates in 2010 to be 9,717. Interim projections are based on the 2010 need and patterns of student enrollment and retention.

FY 2008²: Targeted graduations will increase from 6,674 to 7,275 (increase of 9%).
FY 2009: Targeted graduations will increase to 8,199 (increase of 12.7%).
FY 2010: Targeted graduations will increase to 9,717 (increase of 18.5%).

The plan would require nursing programs to develop their own implementation plan for growth based upon suggested activities organized in three phases. Programs would develop individualized implementation plans which take into consideration environmental, geographical and internal issues which would impact implementation.

The focus of the three phases of activities would be based upon strategies for growth in professional nursing education programs, for retention of nursing students, and for graduate success on the licensing examination. The phases are not necessarily sequential or mutually exclusive and may be implemented and funded concurrently.

Rationale:

- Phase 1 would involve strategies that focus on student and faculty retention efforts.
 - Phase 2 will focus on refining previously tested instructional models with proposed strategies in course redesign and program adaptation to accommodate more students in nursing education and to maximize the use of qualified nursing faculty.
 - Phase 3 will focus on developing and testing new models of nursing instruction, including strategies for the use of interdisciplinary and inter-institutional instruction and program redesign.
2. The role of the BNE will include assisting programs in the development of the implementation plans based upon established guidelines and stated criteria. Each year the nursing programs would develop, implement and evaluate their own implementation plan to increase the number of graduates. Based on this review, the program would have the flexibility to prioritize strategies that work and eliminate strategies that do not work. The BNE will develop a streamlined process to gather this information from the programs and, working with the Texas Center for Nursing Workforce Studies, will monitor and evaluate targeted statewide graduation rates. The THECB would incorporate outcomes of success of the plans in funding formulas.
 3. Each institution with an initial RN licensure program will include in the plan a **Collaborative Instructional Model** based on a written agreement among the dean/director of the nursing program, the university/college administration, and the program's chief affiliating health (clinical) facilities to implement models for targeted graduation rates. Each agreement would have identified time frames and the needed resources to achieve identified targets. The agreement would also specify the roles, responsibilities and resources dedicated by each entity to meet graduation targets. The agreement would address at least three major issues for program expansion and productivity: the needed personnel, student retention, and new curricula models.

Rationale: The need for commitment, accountability and dedicated support from institutional administration, community stakeholders, and affiliating health institutions is vital to the success of the plan.

4. Following the establishment of the agreement, the nursing program will submit a three-phase implementation plan to the BNE. Every program will develop an

² Graduation numbers are reported to the BNE in the fall of each year, e.g., FY 2008 graduates are those who completed their program by September 1, 2008.

implementation plan to increase enrollments by selecting and implementing strategies most pertinent to the programs' unique resources and characteristics. It must be noted that some programs have had a higher rate of growth than others and may have a greater challenge in the future to reach projected goals for graduation rates. In addition, the implementation plan should be designed to balance public safety with innovative models to maintain quality nursing care for patients. The plan should include short-term and long-term goals and an evaluation plan for all identified strategies and outcomes.

Rationale: The implementation plan will follow the proposed three-phase Statewide Plan to Increase Initial RN Licensure Graduates based upon:

- initiatives to increase student and faculty retention,
- initiatives to test previous models, and
- initiatives to develop and test new models for nursing education.

Programs will identify their levels of progress within each phase and propose strategies to maintain their effectiveness while engaging in activities to meet their projected goals. Each plan spans an academic year and would target an increase in nursing graduates of 45.5% more than the 2006 reported number of RN graduates.

5. The BNE and the Texas Center for Nursing Workforce Studies will collect and analyze data from annual evaluations of the strategies from nursing programs and provide public information related to "best educational practices." The BNE will schedule an annual venue for professional nursing education programs to present successful strategies in recruiting successful professional nursing education students who graduate within a specified time period and who are successful on the licensing examination.

Rationale: An analysis of the effectiveness of strategies employed by all professional nursing education programs to achieve higher enrollments and retention of nursing students will provide "best practices" where common strategies produce the desired results. This information will be made available to all programs to encourage the use of evidence-based educational practices.

Goals and Objectives of the Model

1. Overall statewide success in meeting targeted graduation rates will be demonstrated.
2. Success of graduates on the licensing examination will be demonstrated.
3. Every nursing program will track completion/persistence rates based upon a standardized methodology that is utilized throughout the state.
4. The BNE and the Texas Center for Nursing Workforce Studies will standardize, compile and analyze any needed data sets used by initial licensure programs, e.g., student admissions, student evaluation, students who drop out of programs.
5. Regional collaborations will be implemented for shared processes and outcomes such as common instructional methods, interdisciplinary instruction, pooled or shared faculty, accelerated and alternate entry programs, and new clinical instructional models designed to maximize the use of existing resources and faculty.

Standard Components of the Model

Each nursing program will evaluate its enrollment capacity based on current fiscal and physical resources, and the program's potential for growth based upon additional support from new funding streams, the governing institution, public/private partnerships and anticipated innovative instructional models. The program will propose strategies to address the focus of each phase specifying the participant, identified as X, who is primarily

responsible for implementing the strategy. Each phase with suggested strategies is presented below:

Phase 1: Focus on Student and Faculty Retention Efforts

Principle Strategies	Principle Participant/Source of Funding			
	Program	Administration	Facilities	State
Refine admissions criteria	X			
Hire retention counselors (academic/personal)		X		
Develop work-study programs	X		X	
Increase financial aid			X	X
Retain existing faculty	X	X		
Recruit and train new faculty and other instructional personnel	X	X	X	

Phase 2: Focus on Refining Previously Tested Instructional Models

Principle Strategies	Principle Participant/Source of Funding			
	Program	Administration	Facilities	State
Redesign courses and instructional methods	X		X	
Develop and expand clinical simulation	X	X	X	
Advance use of preceptors	X		X	
Provide alternate entry programs	X		X	
Provide accelerated programs	X		X	X
Expand use of distance education		X	X	X
Advance student assistance programs		X		

Phase 3: Develop and Test New Models of Nursing Instruction

Principle Strategies	Principle Participant/Source of Funding			
	Program	Administration	Facilities	State
Advance interdisciplinary/inter-institutional instruction	X	X	X	
Evaluate and redesign curriculum as necessary	X	X		X
Advance work/study based programs	X		X	X
Extend use of non-traditional faculty	X	X	X	

Evaluation

At the end of each academic year, the programs will submit an evaluation of each of the implemented strategies, accompanied by appropriate data and analysis. In addition, the programs will submit an evaluation of combined strategies implemented under each phase. The BNE will collate and analyze data and, in conjunction with the Texas Center for Nursing Workforce Studies, will provide information to all programs via web reports and annual gatherings where “best practices” will be shared.

Suggestions for the evaluation of goals are presented below:

Phase 1 Evaluation

- Identifying the strength of association between each admission criteria and the success of the student in the program
- Evaluating the effectiveness of the use of retention counselors through comparison of retention rates of previous class
- Evaluating the value/effectiveness of techniques used by retention counselors to assist students progress toward graduation
- Determining the effectiveness of various work study programs on student retention
- Determining the level of financial aid most helpful in student retention
- Identifying most successful measures to retain nursing faculty
- Determining most successful recruitment activities to recruit nursing faculty
- Identifying successful training strategies for new faculty and other instructional personnel
- Evaluating the effectiveness of school-specific strategies
- Determining overall success rate of each strategy in Phase 1

Phase 2 Evaluation

- Evaluating the effectiveness of redesigned courses in promoting student success against previous models
- Evaluating the effectiveness of various instructional methods on student success
- Determining the effects of new or additional simulation experiences upon the skill level of students and their preparation for patient care
- Evaluating the effectiveness of increased use of clinical preceptors upon clinical numbers and student success
- Comparing student success in alternate entry programs and/or accelerated programs with the traditional program

- Comparing student success in programs with expanded use of distance education with previous model
- Comparing graduation rates where advanced student assistance programs are provided with previous model
- Evaluating the effectiveness of school-specific strategies
- Determining overall success rate of each strategy in Phase 2

Phase 3 Evaluation

- Evaluating cost effectiveness and success of students engaged in courses where advanced interdisciplinary and/or inter-institutional instruction is used
- Comparing student success following redesign of curriculum with previous model
- Comparing success of students involved in advanced work/study based programs with a control group of students
- Evaluating the effectiveness of extended use of adjunct faculty on student success
- Evaluating the effectiveness of school-specific strategies
- Determining overall success rate of each strategy in Phase 3

Implementation

Development of implementation plans should begin in March 2007 and be finalized in July 2007. Depending on funding methodologies, grant applications based on implementation plans could begin in August 2007. Nursing programs will not be funded additional monies unless they have submitted an implementation plan to the BNE. Awards would be made sometime during the October 2007 through December 2007 time frame.

Potential Impact

Unless there is appropriate funding which is implemented through a coordinated plan to increase RN graduations, it is unlikely that projections will be met. A statewide plan must be developed to identify targeted graduation rates, monitor progress in accomplishment of these rates and evaluate strategies that promote best practices.

Funding Requirements and Incentives

Funding is required for professional nursing education programs to implement strategies to increase the number of graduates of professional nursing programs to 9,717 by FY 2010. \$39 million in funding should be allocated to increase enrollments and \$32 million should be allocated to increase current nursing faculty salaries.