

# The culture change imperative: Practice readiness through clinically focused active learning



**Purpose:** This report discusses the need to focus on clinical in all learning settings, and it investigates the implications of the Next Generation NCLEX® (NGN) as a measure of new graduate safety and readiness for nursing practice.

## Practice readiness and patient safety

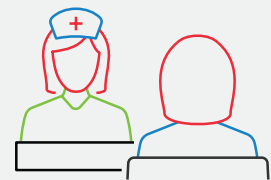
NGN was introduced to increase validity in clinical judgment measurement and ensure a competent nursing workforce. Key concerns related to new nurses' clinical judgment skills and capacity for safe practice include the inability to recognize changes in patient status and level of urgency (failure to recognize), leading to delays in treatment or failure to utilize effective management strategies (failure to respond) in emergent situations (failure to rescue) (Benner et al., 2010; Kavanaugh & Szweida, 2017).

## Next Generation NCLEX®

NGN aims to measure examinees' clinical judgment skills, aligning closely with the increased complexity of patient care contexts, and includes unfolding items to mirror real-life nursing practice. Although the advent of NGN was viewed with trepidation by nursing students and faculty, quarter 2 scores in 2023 represented the highest NCLEX® Registered Nurse (RN) scores in recent history (NCSBN, 2024). However, some "righting the ship" occurred in quarters 3 and 4 of 2023 when NCLEX® rates adjusted closer to expected values, but scores rose again in quarters 1 and 2 in 2024 to reveal higher than usual RN first-time pass rates for US-educated candidates (NCSBN, 2024). The rise in Practical Nurse (PN) scores mirror those of the RN scores.

The National Council of State Boards of Nursing attributed this rise to the greater affinity for completing these puzzle-type items, increases in clinical judgment related to teaching practices, typical seasonal increases in scores, an anticipated rise after the deep impact of COVID-19, the choice of repeat test takers (who often score lower) to take the exam prior to NGN, and polytomous scoring of NGN and traditional items (Betts, 2023). In addition, the inception of NGN brought forth items rich in context and details, emphasizing clinical judgment application in assessment and decision-making. Consequently, these test items may be more engaging and interesting to NCLEX® candidates than the previously "scrubbed" items. As such, students may think more deeply about all the items while engaging in a more enjoyable testing experience (V. Wangerin, personal communication, January 16, 2024).

Although NCLEX® candidates welcomed these higher scores, other stakeholders questioned the validity of these results as a true reflection of clinical judgment and the subsequent impact on client care and outcomes. The higher NCLEX® scores, which may or may not accurately and reliably reflect practice readiness, coincide with serious concerns about transition to practice, the high rate of nursing turnover, the dearth of nurses in practice, and the impact of these issues on client care. A prevalent concern notes that these higher NCLEX® scores may create a false sense of security among nursing students, candidates, and nursing educators. In contrast, these increased scores may warrant even more vigilance on the part of nurse educators and clinical agencies to diligently determine practice readiness. Cognizant of these concerns, NCSBN reiterated its commitment to public protection, emphasizing ongoing evaluation to ensure the NGN remains aligned with safe entry into nursing practice (NCSBN, 2024).



## Embarking on a clinical cultural change

Nurse educators should view NGN as one component of a larger framework, acknowledging that success on the exam alone does not guarantee safe practice. As the nursing landscape undergoes a significant transformation with increased need for nurses, the retirement of seasoned nurses, the shortage of nursing faculty, and the influx of novice educators, there is a distinct opportunity to reshape the culture of nursing education (Poindexter, 2022; Vardaman et al., 2024). Nursing education must recognize the challenges that novice nurses face when transitioning to practice and emphasize the focus on clinical applications in each learning setting (Huston et al., 2017). In essence, clinical must provide the foundation for all nursing education experiences, with teaching strategies designed to place students "at the bedside/client side."

## Additional strategies include

	<b>Supporting novice educators:</b> Provide structured role transition for novice educators including mentorship programs, one-to-one support from seasoned faculty, workshops, and ongoing professional development opportunities to ensure successful transition into the role, promote continuity, and encourage use of best practices in teaching, with an emphasis on realistic and authentic clinical application
	<b>Enhancing consistency in adjunct teaching:</b> Establish mentorship programs, collaborative learning communities, and regular check-ins to provide support, increase consistency, enhance adjunct faculty engagement, foster a sense of community, and contribute to a stable and reliable clinical faculty workforce.
	<b>Breaking down silos:</b> Theory and clinical faculty communication across courses and semesters is essential for continuity in nursing education. The implementation of regular interdisciplinary/full faculty meetings and joint planning sessions, while sharing learning resources, formative/summative assessments, and products, will promote collaboration and ensure a clinical focus in all learning settings.
	<b>Ensuring safety:</b> To ensure patient safety, nurse educators should recognize that some students are unable to meet the rigors of clinical practice. Nurse educators need confidence in their own evaluation skills, support from administration, and clarity in policies and procedures to ascribe failing grades to students who are unsafe or unsuccessful (Hughes et al., 2016).
	<b>Evolving admission standards:</b> Adopting holistic admission standards to reflect the changing landscape of healthcare is essential such that applicants are assessed on traits in addition to other academic achievements. Essays and evidence of extracurricular activities may reveal a potential for growth, resilience, and dedication to lifelong learning, along with academic aptitude.
	<b>Lesson planning and field support for clinical faculty/preceptors:</b> It is critical to develop lesson plans for clinical experiences and incorporate scaffolding techniques to guide the progressive development of clinical judgment. Clinical faculty should introduce innovative methods and examine educational practices to ensure they are effective for and acceptable to today's learners. Moreover, preceptor education programs must go beyond skills and task training and encompass effective teaching and assessment of clinical judgment. This field support for instructors and preceptors may include immediate assistance, guidance, and collaboration with experienced faculty or educational coordinators to effectively address challenges and support student growth.
	<b>Expanding clinical opportunities:</b> Ensure that time spent in clinical is valuable, meaningful, and engages students in active and independent clinical judgment and decision-making (Ironsides et al., 2014; Spector et al., 2020). Clinically focused cases and live, virtual screen-based and virtual reality simulation should be imbedded in curriculum to enhance independent thinking and personal accountability while developing decision-making, priority-setting, and clinical reasoning skills in realistic client scenarios (Kolcun et al., 2023). Nurse educator experts attest to the role of these activities in scaffolding live clinical experiences and paving the way for safe clinical practice (Kolcun et al., 2023; Nowell et al., 2023).

## Top three actions

- 1.** Focus on enhancing patient-centered teaching, realistic application, and clinical judgment in all learning settings through rich clinical rotations, clinically focused cases, Next Generation activities, and simulation (live, virtual reality, and virtual screen-based) to foster safe transition to practice.
- 2.** Cultivate collaborative efforts between education and practice that support preceptor education, enhanced clinical opportunities, mutual benefits of student affiliations, and increased communication.
- 3.** Educational settings may review admission standards, mentor new and adjunct faculty, support robust student remediation, and assess and foster student competency and clinical judgment across the curriculum.

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