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DR. JOANNE DISCH: The first reason was to standardize what they reported and also the process they use to report. We needed a standardized reporting mechanism


continued on page 3

“With the SSR tool in place, a school will have the ability to look at their report and compare themselves against the national data.”

“... it would validate the good work schools are doing, or suggest other strategies they might try as far as tracking, trending, preventing and mitigating the impact of errors.”

not just record it into a data dump, but to provide reports. With this common database and the ability to look at sources of frequent errors/near misses and share this information, it would validate the good work schools are doing, or suggest other strategies they might try as far as tracking, trending, preventing and mitigating the impact of errors.

We also think it creates a movement with forward-thinking schools who demonstrate a concern for quality and safety and who want to use data to improve how they teach students. We hope it becomes a prideful thing to become a part of this community, to show your school is on the cutting edge of doing whatever it can to improve not only the student learning experience, but also to develop safe practitioners



NCSBN is commemorating our 40th anniversary with many celebrations and surprises! One such surprise is a gift to all new graduates: we have published a first-ever booklet welcoming newly licensed



The 2018 Institute of Regulatory Excellence (IRE) Conference in San Francisco, Jan. 24–25, 2018, focused on “Using Data to Navigate the Future of Nursing.” In one of the sessions, an interactive panel discussed the leading issues in nursing education today and their impact on nursing education and nursing regulation. The future of nursing relies on the state of nursing education, and nursing education programs constantly face challenges educating nurses who will be prepared for the evolving regulatory landscape.

continued from page 6

the Pennsylvania commonwealth. This database supports the ability of prelicensure nursing education programs to timely identify clinical settings and to achieve prompt BON approval of the sites. These efforts arise from the fervent desire to provide essential, and quality, clinical learning experiences where nursing students could provide nursing care for actual patients.

In preparing future nurses to enter complex work environments, the system contains close to 4,000 clinical agencies where students are engaged in supervised clinical experiences, including ones in acute care, wellness clinics, school districts, neighborhood centers, inter-professional health care settings and housing projects. In addition, the use of simulation developed in accordance with established national standards augments clinical experiences.

The results of this study supported the establishment of a structured developmental program for graduate nursing students in the role of nurse faculty.

HOT TOPIC #2 – FACULTY SHORTAGE

Tammy Buchholz discussed an innovative approach implemented by the North Dakota Board of Nursing (ND BON) through a Faculty Developmental Program (FDP) that began in 2004-2005, and was enforced by legislation in 2011. The FDP permits the use of graduate students as baccalaureate-level nursing instructors in the clinical area. In order to gather evidence of the effectiveness of this model, the Nurse Faculty Intern (NFI), a pilot study was conducted by the ND BON from 2006–2009, and was funded by NCSBN's Center for Regulatory Excellence Grant Program. The results of this study supported the

continued on page 8

continued from page 7

Two strategies that were used in the development process that facilitated the bridge were (1) using data from practice to inform program approval processes, and (2) meaningful stakeholder engagement with the academic sector. Data were collected over five years and analyzed to determine the top five nursing standards that were breeched and were used to form the foundational standards for curriculum mapping. Initial engagement with practice representatives and academia, and later with students, nurses, practice leaders, and more academic leaders, resulted in gaining various perspectives and establishing effective professional relationships.

The goal of these strategies is to use the data to inform downstream processes (mandatory curriculum indicators) to affect upstream consequences and to see a decrease in breeches of the nursing standards by the new graduate nurses.

The regulator is perhaps best poised to develop strategies to build and strengthen the bridge across the gap.

HOT TOPIC #4 – CURRICULUM MODELS

Baroni described an emerging initiative in Washington state referred to as ACTION NOW. This initiative is sponsored by the Washington Nursing Care Quality Assurance Commis-

The eNLC has been implemented in 29 states as of April 2018, and it will be implemented in Kansas as of July 1, 2019.

Building on the existing Nurse Licensure Compact (NLC), the eNLC increases access to health care by allowing nurses to provide care in-person or via telehealth (and other state-of-the-art technologies) in other compact states. It also enhances patient safety by allowing other eNLC states to take action quickly on unsafe or incompetent nurses.

Licensure costs are reduced because nurses hold one multistate license in the state of residence and are able to practice in all eNLC states. This can benefit employers who bear the expense of multiple licenses for nurse employees. Likewise, the eNLC removes multiple and duplicate regulatory requirements, thus further cutting down on costs for nurses.

Additionally, recent disasters such as hurricanes in the south and southeast helped to raise awareness of interstate compacts for health care professionals. These compacts would allow providers to cross borders into states impacted by disasters and begin providing care immediately.

For educators, the eNLC allows faculty to teach distance education courses/content to students in other eNLC states without holding a separate license in those states. It is important for faculty to remember that providing education is









Paramount in NCSBN's approach to potential evolutionary transformation to its exam was the foundational tenet that any changes must be evidence-based.

[continued on page 16](#)



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