

The Road to NCLEX-RN Success

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Abstract

Using Malcom Knowles's adult learning theory as a guiding framework, this qualitative study explores and assesses accelerated nursing students' perceptions regarding factors that contributed to their first-time success on the National Council Licensure Examination (NCLEX-RN). The results of this research support, broaden, and provide additional knowledge and insight to a currently very limited body of literature on accelerated nursing students, while also outlining a programmatic foundation for success on the NCLEX-RN based on the precedent of students' success and perceptions. This unique research is one of a few studies in which accelerated nursing students are queried for their insights and feedback.

Keywords: accelerated nursing programs, accelerated nursing students, second-degree programs, accelerated nursing curriculum, NCLEX results

Introduction

This study set out to identify what factors are positively associated with NCLEX-RN success by examining the demographics of, and interviewing accelerated nursing students who passed the NCLEX-RN on their first attempt. For the purpose of this research, success is defined as passing the NCLEX-RN, New York State's licensing exam, on the first attempt. Knowledge gained about the characteristics of accelerated nursing students can assist nursing schools in tailoring admissions programs and progression policies, as well as in identifying at-risk students. One of the primary indicators of a nursing program's effectiveness is the pass rate of its graduates on the NCLEX-RN among first-time test takers. A substandard first-time pass rate on the NCLEX-RN can affect a school's funding, enrollment, reputation, and ultimately, its accreditation. Given the paucity of research on accelerated nursing students, this study offers invaluable insight into decision-making about the preparation of accelerated nursing students for professional nursing practice. If there is agreement

that the factors reported by accelerated nursing students in this study are, in fact, fundamental to success on the NCLEX-RN, nursing faculty will need to incorporate and integrate them into every stage of nursing education, beginning with the selection process for admission into accelerated programs, and including alterations of their pedagogical approaches and educational programming. In addition to the impact of these findings on accelerated nursing students, the findings of this study have implications for educational policy, universities, schools of nursing, and recruitment as it relates to target populations and curriculum strategies in accelerated nursing programs. Information gleaned from this study will help accelerated nursing program administrators reevaluate their admission criteria and modify the interview questions asked of those seeking admission to their programs. Nursing faculty will gain information to assist in developing better ways to support accelerated students and aid in their understanding of essential elements of accelerated programs, which in turn, can lead to better success for students.

Background and Significance

In December 2012, the National Council of State Boards of Nursing (NCSBN) Board of Directors voted to raise the passing standard for the NCLEX-RN. In December 2015, the NCSBN voted to uphold the passing standard for the NCLEX-RN. The passing standard was revised from -0.16 logits to 0.00 logit (NCSBN, 2015). A substandard, first-time passing rate on the NCLEX-RN can affect a school's funding, enrollment, reputation, and ultimately, its accreditation. For universities and nurses, considering the importance of the first-time passing rate, it behooves nursing programs to determine exactly what factors, measures, and/or resources best ensure

students' success in this regard.

The healthcare industry has been the topic of discussion in the industry and public media on a variety of fronts, one of the most pressing being the nursing shortage. It is expected that employment rates for RNs will surpass those of all other professions (USDH, USBLS, 2013). Currently, 16,935 students are enrolled in the nation's 293 accelerated entry-level baccalaureate programs, up from 14,124 in 2011 (AACN, 2015). This is in line with the fact that over the past two decades, the number of accelerated nursing programs has proliferated from 31 in 1990 to 293 in 2015 (AACN, 2015).

Research Questions

The research questions that guide and inform this study are as follows:

Research Question 1	What are the experiences and challenges of accelerated nursing students on their paths to success in passing the state licensing exam (NCLEX-RN) on their first attempt?
Research Question 2	Several factors that relate to students' success on the NCLEX-RN seem to emerge from the literature as important; how do students perceive how three of these (academic background, demographics, and program elements) influence their success on the NCLEX-RN?
Research Question 3	What factors do accelerated nursing students identify as the most critical to their success in passing the NCLEX-RN on their first attempt?

LITERATURE REVIEW
Predictors of Success

Although quite a number of research studies have compared accelerated and traditional nursing students, very few have compared the success rates of traditional students to accelerated students on the NCLEX-RN. One such study examined predictors of success and found a difference for accelerated students who held a previous science degree at the time of their NCLEX-RN testing (Abbott et al., 2008). Amy Abbott and colleagues (2008) found that students who already held a science degree were more likely to be successful on their first NCLEX-RN attempt. A 2013 Barbara Penprase and Meghan Harris study found that the completion of two mandatory courses offered in the accelerated curriculum, "Developmental Psychology" and "Health Assessment," was an accurate predictor of students' successful performance on the NCLEX-RN.

Of three additional studies comparing NCLEX-RN first-time pass rates between traditional and accelerated students, two found no statistically significant difference in NCLEX-RN first-time pass rates between the two student groups, but noted that accelerated students did score higher and had higher pass rates (McDonald, 1992; Mills et al., 1992). W. K. McDonald (1995) found that out of a total of 56 traditional and accelerated students, the 27 in the accelerated group scored higher on nursing performance and had a higher passing rate on the NCLEX-RN than the 27 traditional nursing students.

A. C. Mills and his colleagues (1992) found that by the end of the first semester, the model used in their research on the NCLEX-RN predicted the failure for 94% of those who failed, but it was less accurate in correctly predicting the success of those who passed. Their study identified variables that placed the accelerated student becoming at-risk, including, first-semester GPA, gender, and having had a foreign education. Lastly, Mills and colleagues (1992) found a positive correlation between each full letter grade increase in GPA and students' success in passing the NCLEX-RN. Their research suggests that a positive relationship exists between GPA and NCLEX-RN success.

Regina Bentley (2008) used a correlational design to compare accelerated with traditional students (N = 224) and their success on the NCLEX-RN. She found no statistically significant difference in the pass rates of the two groups, but found science GPAs to be significant determinants for passing the NCLEX-RN for both groups. The sample sizes of the two groups used in this study were disproportionate: 52 accelerated student participants and 172 traditional students. This disparity between the number of accelerated and traditional students is common—accelerated programs typically enroll fewer students due to a number of significant variables, including the shortage of nursing faculty available to teach.

In summary, Mills (1992) found cumulative GPA to be a predictor of NCLEX-RN success, while Bentley (2008) cited the grade on pre-admission science courses, the number of C grades on nursing clinical courses, and

scores on the Health Education Systems Incorporated (HESI) exit exam to be predictors of success. Fatma Youssef and Nancy Goodrich (1996) reported accelerated students had significantly higher GPAs ($M = 3.34$) than traditional students ($M = 2.85$). In contrast, McDonald (1995) determined that GPA had no impact on exam outcomes. In yet other research, it was found that accelerated students performed significantly higher according to every measure than did students in traditional programs. Age was not found to be predictive of success in either group (Korvick et al., 2008; McDonald, 1995).

L. M. Korvick and colleagues' (2008) research demonstrated that the science GPA of students were associated with academic performance employing a retrospective, quasi-experimental research design at a medium-sized, private, urban university in the Midwest. Under controlled conditions, their study compared 29 accelerated second-degree BSN and 32 traditional BSN students matched for identical instruction and performance measures. They examined class test scores, nationally standardized examination scores, laboratory skills performance, and final course grades. The results of the study revealed with statistical significance that the mean scores of the accelerated students exceeded the mean scores of the traditional students. More noteworthy among the results of the study was that science GPAs for accelerated students were consistently higher than those of the traditional students throughout the program, demonstrating that a higher science GPA is positively associated with academic performance. However, accelerated students' science GPAs had little variability as they related to the total points for the semester as compared to those of traditional students, who showed a moderate correlation to their total points for the semester (Korvick et al., 2008). The previous baccalaureate GPAs of both groups were minimally a 3.0–4.0, and all other requirements for admission were identical except for the accelerated students' requirement of at least one B in prerequisite science courses.

Though a number of studies have reported a positive relationship between GPA and NCLEX-RN success among both accelerated and traditional students, the most notable limitation of these studies are their small sample sizes, which may account for the studies' varying research conclusions.

Theoretical Framework

The theoretical framework that guided this study stemmed from Knowles's (1990) theory of andragogy. Knowles, who has widely explored and written on principles of adult learning, describes andragogy as the art and science of helping adults to learn. His theory of andragogy proposes that adult learners learn best when they learn experientially, understand why they need to learn a concept, learn in a problem-oriented manner, and when the concept can be applied immediately. Pamela Cangelosi's (2007a) research found that nursing faculty should listen to the voices of accelerated nursing students, thereby allowing individuals to learn nursing skills and concepts in a manner better suited to their respective styles and needs. The principles of adult learning theory must be incorporated into the teaching of accelerated nursing students. Cangelosi (2007b) points out that nursing faculty must incorporate and build upon accelerated students' backgrounds. Adult learning theory supports the self-direction of an adult learner (Knowles, 1990). Hence, the learning environment of adult accelerated nursing students needs to embrace Knowles's theory of andragogy.

Method

Following approval of the university's Institutional Review Board (IRB) every participant in this study signed an informed consent form, access was granted, and interviews began. To maintain confidentiality, all students' names were replaced by pseudonyms, and all collected data was coded to ensure anonymity. Participation in this study posed no anticipated risks or discomfort for any individuals, and participants were not coerced. No subjects in the study received any form of payment for their participation.

Due to the nature of the proposed question, "What are the factors identified by accelerated nursing students that affect their success in passing the NCLEX-RN on the first attempt?" a grounded theory approach informed this qualitative study. A grounded theory approach was used to spawn a general explanation that gives rise to predictive statements about individuals' experiences (Creswell, 2005). Anselm Strauss and Juliet Corbin (1998) have detailed the phases of grounded theory, starting with the collection of data, and ending with writing about the data. Using a grounded theory approach, the researcher gleaned themes from interviews with accelerated nursing students. Grounded theory lends itself to explaining a process by gathering information to develop a theory. A systematic design based in grounded theory was used, as it lent itself to formation of categories about the phenomenon being studied (Creswell, 2005). The purpose of this method is to describe, in detail, a particular phenomenon so that readers can appreciate the experience of participants. The research questions and grounded theory design enabled the researcher to holistically explore the experiences described by accelerated nursing students.

This study's subjects were drawn over a nine-month period from among students who had both completed the NCLEX-RN and graduated from a private, Mid-Atlantic university. Using the snowball technique, (a non-probability method, which relies on referrals from initial subjects to generate additional subjects [Vogt, 1999]), 12 participants were recruited. Eleven of the twelve participants were working as registered nurses in acute care hospital settings at the time of their interviews.

This study used semi-structured interviews to uncover the perspective of accelerated nursing students (Bogdan and Biklen, 2003). "Qualitative interviewing begins with the assumption that the perspective of others is meaningful, knowable, and able to be made explicit" (Patton 341). Twelve individual, face-to-face interviews that explored the participants' perceptions of their NCLEX-RN success were conducted over an eight-week period at a confidential site. Each semi-structured interview lasted between 60 and 90 minutes, and was audio-recorded. All interviews were held following the participants' completion of the NCLEX-RN.

The questions generated for the interviews were synthesized from current literature and the primary research question. All interview questions were open-ended, neutral, and woven into a conversational format. The researcher asked each question, with the order of some adjusted based on the participant's responses and/or the direction of the conversation; the researcher also ended discussion on all questions when no new information was being relayed. The researcher summarized the answers to all questions, and, when necessary, asked for further clarification before proceeding to the next question. The trajectory of the interview was directed by the questions asked by the researcher and replicated the tone of natural inquiry. Once data saturation was reached, the data was coded and analyzed, and categories were developed based on all the data that was collected. In the second phase of axial coding, the researcher selected one open-coded category as the core,

and then linked the other categories to it via a coding paradigm. Selective coding was the third phase, whereby the researcher developed and wrote the theory derived from the interrelationship of the categories in the axial coding.

In qualitative research, the researcher must verify that all data is valid. There are a number of methods for doing so. To improve the probability of producing credible data, Yvonna Lincoln and Egon Guba (1985) assert adherence to three behaviors: prolonged engagement, persistent observation, and triangulation. According to Frances Maggs-Rapport (2000), data is deemed trustworthy if one engages in persistent observation, prolonged engagement, and triangulation. Prolonged engagement offers the researcher the opportunity to earn and build the trust of participants. As triangulation necessitates the use of multiple methods, triangulation also improves the likelihood that interpretation will be accurate. Other qualitative researchers label the validation of data with differing nomenclature such as "member checking" (Creswell' 2005), and "trustworthiness" and "authenticity" (Lincoln and Guba, 1985). Janice Morse and colleagues (Morse et al., 2002) feel that the literature on validity has become muddled to the point of making it unrecognizable. To attain trustworthiness, they recommend the use of several strategies, including negative cases, peer debriefing, prolonged engagement,

persistent observation, audit trails, and member checks. Triangulation requires the researcher to corroborate evidence from different individuals, and to use a variety of types of data and data collection, such as notes and interviews (Creswell, 2005). According to John Creswell (2005), drawing data from multiple sources of information, various procedures, and a diversity of individuals ensures that the research will be accurate. Creswell (2005) also cites member checking as a means of enhancing the accuracy of the research. Member checking is the process by which the researcher involves participants in checking the accuracy of the researcher's accounts of the collected data. In member checking, findings are shared with the participants, who review them for accuracy. When all data is checked and verified, the researcher increases confidence in achieving validity.

For this qualitative research, issues of credibility were addressed with the following methods: (1) to explicate the researcher-participant relationship, field notes on actions, interactions, and body language during the interviews were collected immediately following each interview; (2) all students were asked to read excerpts from the data to confirm that it was meaningful, applicable, and accurately representative of their experiences; (3) a qualitative nurse researcher reviewed all the data and confirmed that the essence of the categories was accurate and true to the data.

Table 1. Demographics of Accelerated Nursing Students Interviewed

N = 11	FEMALE 9 White/Caucasian 2 Asian
N = 1	MALE 1 African American
Age Range	20-45 Years
Healthcare Experience	50% had previous healthcare experience
Bachelor's of Science Degree	58% held a Bachelor's of Science Degree
Children	25% had between 3-5 children while attending an accelerated nursing program

Results

The common and salient factors that emerged are presented in four major categories: (1) practicing NCLEX-RN questions; (2) partaking in nursing clinicals; (3) receiving support; (4) participating in an NCLEX-RN review course (see fig. 1).

Participants recalled the accelerated nursing program experience clearly and were eager to serve as interviewees. The demographics of the participants (N = 12) revealed that one participant was male, and that the participants ranged in age from 20-45 years old, with the majority (n = 8), being between 25-30 years of age. Five of the participants were married, with three having between two and five children, and one participant qualified as the head of household. Nine participants were white/Caucasian, two were Asian, and one was African-American. Half of all participants

had no healthcare experience prior to enrollment in the accelerated nursing program, and although all held a bachelor's degree, only seven were in science. All participants self-reported having earned a GPA of 3.0 or higher in their previous bachelor's programs, and 11 self-reported a science GPA of 3.0 or higher. Four participants entered the accelerated program eight or more years after earning their first bachelor's degree, and five had been out of school for four or five years. Nine participants were United States citizens, two were permanent residents, and one was enrolled on a work visa.

The summary of demographics of participants in this study is somewhat different from the characteristics of participants cited in current published studies; specifically, the number of children/dependents, and the extent of previous healthcare experience were greater in this group. Although small, the sample size of 12 provided a profile of the type of student in the accelerated nursing program.

Eleven of the twelve participants interviewed clearly stated that answering practice NCLEX-RN questions was the most crucial component of their success on the exam. Students in the accelerated program are exposed to NCLEX-RN-style questions throughout their course of study; as the program progresses, the cognitive level of the questions increases in difficulty, moving from knowledge and comprehension to analysis and evaluation, similar to Bloom's taxonomy. Some participants reported that sitting at the computer simulating a timed test session "was useful and made it like a 'real test'"; others corroborated, saying, "doing a full NCLEX-RN practice test" helped them to be successful. Another stated, "I think the questions and just taking a full test was beneficial."

After practicing NCLEX-RN questions and tests, the second most cited reason for success as perceived by participants were their clinical experiences: "clinical (experiences) made it real"; "as if the textbook came to life"; "what we learned in theory came to life" (in clinical); and "paramount to anything, the clinical experience is more valuable to me."

Most participants reported that their hands-on experiences in the clinical setting were instrumental to their success, and, in similar terms, most echoed the words of one student who commented that clinical experiences were "key to understanding the patient, their disease process, and retaining the skills learned in the lab." The importance of the application of theory in clinical settings cannot be understated, and other comments from participants illustrate how vital it is, not only for connecting theory, but also for contributing to students'

NCLEX-RN success. One stated, "You learn 85 percent through clinical," while another related, "Being able to touch it and see it in clinical really helped." Yet another said, "Theory came to life in my clinical experience, and the clinical experience definitely made it real and helped me wrap my head around the theory."

All of the participants spoke passionately about the support they received from their family, professors, and peers, and how this contributed to their NCLEX-RN success. Family members performed the mundane tasks of everyday life, thus enabling students to devote their time and attention to studies. Participants also spoke about the financial support they received from their families, but many also privately mentioned the fiscal strain of attending the accelerated nursing program. In the interviews, more than half of participants related that professor and peer support also played a significant role in their NCLEX-RN success, saying they gained "academic strength" from their classmates and professors. Professors who teach adult learners are cognizant of their students' academic and life workloads, and often provided the specialized support such students

needed. One participant recalled, "I could not have done it without the support of my classmates. . . . I think just knowing that so many people were supportive and were pulling for me to do it, whether it be my family or my classmates." The participants interviewed were part of a cohort group, which they felt contributed to their cohesiveness and success. Many participants also indicated that the NCLEX-RN review course they completed positively affected their success, saying that it "summed up all we did."

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THE ROAD TO NCLEX-RN SUCCESS

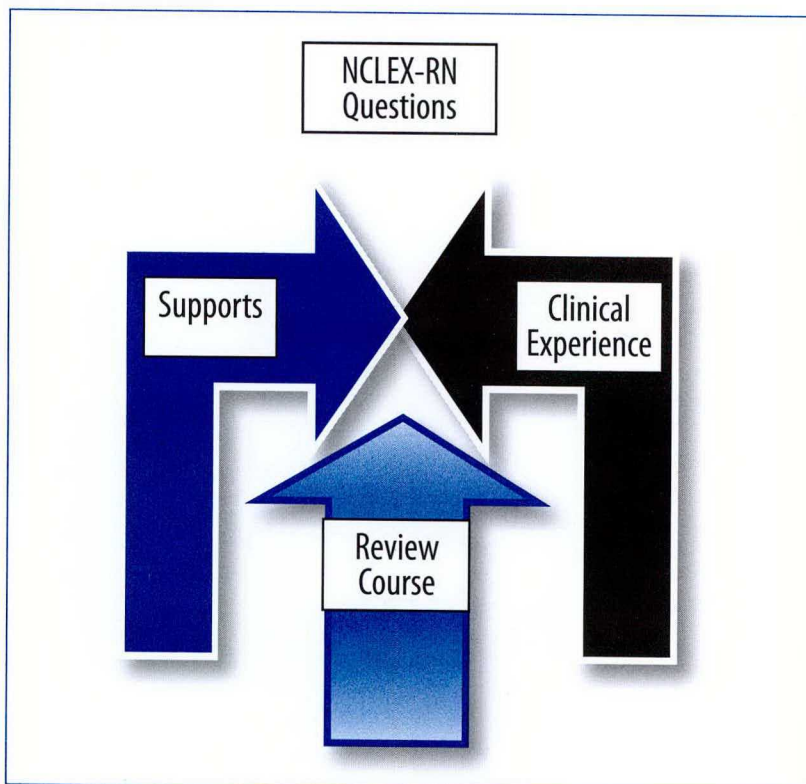


Figure 1. Reported factors contributing to NCLEX-RN success, using grounded theory methodology.

Conclusion

Accelerated nursing students already hold a bachelor's degree; they present with the need to learn nursing skills, theories, and concepts as an adult learner, and must do so in a condensed amount of time. As the participants in the study stated, the practicing of NCLEX-RN questions was the factor that most contributed to their success on the NCLEX-RN. In addition, participants related their clinical experiences as a contributing factor to their NCLEX-RN success, as well as support from family, faculty, and peers.

Recommendations for Future Research

Given the findings of this study, and as literature remains sparse in this area, additional research should be conducted on accelerated nursing

students. Although the study's small sample size limits generalizability, the rigor with which this study was conducted produces significance. Similar multisite studies should be conducted to ascertain accelerated nursing students' perspectives, ideas, and feedback. Studies that address the longevity of accelerated nurses and their commitment to the nursing profession should be explored. Future research should examine whether or not accelerated nursing graduates remain in nursing or if they transition to yet another career. All of these inquiries, and more, would help to further understanding of the long-term success of accelerated nursing programs and the endurance of graduates.

Demographic Questions

The following questions seek to capture basic demographic information. The information collected will not be used to personally identify you.

1. What is your gender? Male ☐ Female ☐

2. What was your age upon entering the accelerated program?
 20-25 years ☐ 25-30 years ☐ 31-35 years ☐ 36-40 years ☐ 41-45 years ☐ 45 and above ☐

3. Please select the category that best describes your ethnic background. American Indian or Alaska Native ☐
 African-American ☐ Asian ☐ Hawaiian/Pacific Islander ☐ Caucasian/White ☐
 Hispanic or Latino ☐ Other (Specify) _____

4. What is your marital status? Single ☐ Married ☐ Divorced ☐ Separated ☐

6. Including yourself, how many members are in your household? 0-1 ☐ 2-3 ☐ 4-5 ☐ 6 or more ☐

8. How many years of healthcare experience did you have prior to the start of the accelerated nursing program?
 None ☐ 1-2 years ☐ 3-5 years ☐ 6-8 years ☐ 9-10 years ☐ 11 years or more ☐

9. Which of the following best describes your bachelor's degree? Science degree ☐ Non-science degree ☐

10. More specifically, which of the following academic programs best describes your bachelor's degree? Biology ☐ Business ☐
 Communication ☐ Education ☐ Engineering ☐ Law ☐ Liberal Arts ☐ Mathematics ☐ Medicine ☐
 Psychology ☐ Science ☐ Other (Please specify) _____

11. What is the highest degree you have earned? First professional degree (e.g., MD, DDS) ☐ Doctoral degree (e.g., PhD, EdD) ☐
 Master's degree ☐ Bachelor's degree ☐ Associate degree ☐ Other (Specify) _____

12. Have you earned a master's degree? Yes ☐ (What field?) _____ No ☐

13. Based on a four-point scale, what was your overall GPA prior to entering the accelerated nursing program?
 2.0-2.4 ☐ 2.5-2.9 ☐ 3.0-3.4 ☐ 3.5-3.8 ☐ 3.8 and above ☐

14. Based on a four-point scale, what was your SCIENCE GPA prior to entering the accelerated nursing program?
 2.0-2.4 ☐ 2.5-2.9 ☐ 3.0-3.4 ☐ 3.5-3.8 ☐ 3.8 and above ☐

15. What is the number of years since you earned your first bachelor's degree and your enrollment into the accelerated nursing program?
 0-1 years ☐ 2-3 years ☐ 4-5 years ☐ 6-7 years ☐ 8 or more years ☐

16. What is your citizenship status? US citizen ☐ Naturalized citizen ☐
 Permanent resident (green card holder) ☐ Work visa ☐

Interview Guide

Tell me about your experience as an accelerated nursing student.

Tell me from your perspective what was the most important factor (or factors) that influenced your success on the NCLEX-RN?

Tell me about one incident that you experienced that you feel best prepared you for the NCLEX-RN.

In retrospect, what suggestions can you offer for enhancing the preparation of accelerated nursing students for the NCLEX-RN?

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