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Progression and Remediation Policies for At-Risk Nursing Students

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Progression and Remediation Policies for At-Risk Nursing Students

by

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Bachelor of Arts, Concordia College, 2002

An Independent Study

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of the

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Abstract

The purpose of this independent project is to examine the efficacy of the implementation of progression and remediation policies in nursing students who are "at-risk" for failing the National Council Licensure Examination (NCLEX). Nursing educators can identify the at-risk student and determine which type of guidance would be appropriate to help them achieve success. Issues addressed consist of the severity of the nursing shortage, identifying what characteristics place a student at-risk, when and how to intervene by utilizing progression and remediation policies, and a review of five policies implemented in nursing schools in a tri-state area. An extensive review of literature forms the foundation of the project. This paper concludes with the expected implications for nursing and recommendations for further research.

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INTRODUCTION

Progression and remediation policies have been implemented into many nursing program's handbooks to better prepare "at-risk" nursing students to progress throughout the nursing curriculum and to successfully pass the National Council Licensure Examination (NCLEX). Five schools of nursing were interviewed regarding their progression and remediation policies and their similarity was minimal; however, after implementation of their individual policies, the students' pass rates increased (Morrison, Free, & Newman, 2002).

Ironically, there is not a universal definition of a progression and remediation policy. One study failed to show the significance of the effectiveness of progression and remediation policies for at-risk nursing students in passing the NCLEX. There have been many different policies that address different issues. Some may be more focused on weak academic areas, whereas others may be focusing on test-taking strategies, anxiety-related issues, time management, or study techniques. Remediation may vary based on the best interest of the individual student (Culleiton, 2009).

This independent study will address the nursing shortage, increased attrition rates, decreased NCLEX pass rate, identifying at-risk nursing students, and a literature review on the effects of the development and implementation of progression and remediation policies.

Statement of the Problem

The development and implementation of effective progression and remediation policies will allow nursing students to be aware of the program's expectations and what to anticipate if they are at-risk for failure. When an at-risk student is identified, these

policies can be implemented early on to facilitate success. But with the development of numerous policies throughout the United States, each nursing program needs to determine which policy is suitable for their program and for each individual utilizing it. Ultimately, patient safety is the main concern. Nursing faculty have the responsibility to train competent and compassionate nurses.

Purpose of the Project

The purpose of this project is to educate nurse educators by reviewing the literature and developing a manuscript for a scholarly nursing journal. The development of progression and remediation policies has been studied for the past decade and there have been few similarities between each nursing programs' policies (Culleiton, 2009). At-risk nursing students would complete educational interventions before progressing onto the next semester and/or taking the NCLEX examination.

Theoretical Framework

The Facilitation Theory (the humanist approach), created by Carl Rogers, is suitable for this project. The idea of Rogers' theory is that "learning will occur by the educator acting as a facilitator, that is by establishing an atmosphere in which learners feel comfortable to consider new ideas and are not threatened by external factors" (Dunn, 2000, p. 2). This is very important to take into account because there are many barriers that students encounter such as "inadequate finances, poor social integration, institutional insensitivity to student needs, lack of learning and motivational strategies, and self-management skills" (Peter, 2005, p. 159).

The theory is composed of three characteristics. The first characteristic states that an individual is willing to learn and is enthusiastic about learning. The second

characteristic is that it may be difficult for an individual to give up previously learned information. Lastly, changing the concept of oneself is necessary for continued learning (Dunn, 2000).

Rogers provided certain characteristics relating to “facilitative teachers” and “learners” that are incorporated into the theory. Facilitative teachers are more apt to accept others’ beliefs, thus allowing for more flexibility than other teachers. They believe that there may be more than one answer to a question. Facilitative teachers are more in touch with their feelings and the learners’ feelings, making them better listeners. Facilitative teachers realize that the course content is as important as their relationship with the learners. They also encourage constructive criticism from their audience and use it to improve their teaching (Dunn, 2000).

One way of learning is indirectly. The educator provides the resources, allows the learners to browse through them and this will initiate and promote conversation between the learners. The teacher is there to guide the conversation but not lead it. The teacher will provide them with ideas but does not want to influence their own thinking (Rogers, 1989). Not all learners are successful with this approach; some feel that the teacher should lead the group and provide 100% of the information.

Rogers stated that learners need to be accountable for their own learning. Learners can contribute valuable information based on their past experiences and ideas. Rogers also stated that learners realize the importance of self-evaluation and that “learning needs to focus on factors that contribute to solving significant problems or achieving significant results” (Dunn, 2000, p. 3).

The Facilitation Theory is appropriate for this project because there are many factors that determine whether a student will be successful in a nursing program. The focus will be on the facilitator and the learner. The educator's role "facilitates the development of the whole person" (Smith, 1999, Orientations to learning, ¶ 20). The educator will consider that any insight from the learner is positive. This insight will be viewed as an eagerness to learn by the student. If the student makes an incorrect statement, the educator will correct him/her in such a way that allows self-growth (Dunn, 2000). Rogers states that "if I can provide a certain type of relationship, the other person will discover within himself the capacity to use that relationship for growth, and change and personal develop will occur" (1989, p.33).

A student will achieve success by self-directed, but facilitated learning (Smith, 1999). If a student fails to meet the ATI (Assessment Technologies Institute) examination benchmark, which is a standardized pre-NCLEX testing students' comprehension of material learned, the student should review their scores with their advisor and evaluate which areas should be focused on. The student needs to be accountable for his/her own learning; however, faculty members need to provide the students with the resources in order for them to be successful (Peter, 2005).

Definitions

The terminology of seven words will be defined in order to clarify their use in this paper.

1. Nursing students- Students who are enrolled in a nursing program with the goal of obtaining a degree in nursing. The focus is nursing students who are enrolled in an undergraduate nursing program.

2. At-risk students- Students who have an increased chance of failing to progress forward through the nursing program as well as an increased chance of failing the NCLEX on their first attempt.
3. Attrition- The unsuccessful departure from a nursing program.
4. Progression- The student will advance into the next nursing class after achieving a satisfactory grade. It is also defined as the successful completion of the required courses to be allowed to sit for the NCLEX by meeting that institution's requirements.
5. Remediation- The process in which the nursing student takes to progress forward (by repeating a class, taking a NCLEX review course, repeating a standardized pre-NCLEX test, etc.) in the nursing program after failing or at-risk for failing to meet program requirements.
6. Success- Meeting all the necessary requirements to progress onto the next level in the nursing program and/or passing the NCLEX.
7. Standardized testing- Testing that is nationally-normed and have reported highly accurate predictions in NCLEX success.

Significance of the Project

The nursing shortage is not a new topic to healthcare professionals. The nursing shortage will continue to worsen as the baby boomers get older, the creation of new healthcare areas are requiring qualified nurses, and qualified students are being denied acceptance into nursing programs due to limited availability (Rosseter, 2005). Although

the recession has eased the nursing shortage, the United States continues to expect a shortage of 260,000 registered nurses by 2025 (AACN, 2009).

Facilities that are experiencing this nursing shortage anticipate that nursing programs will provide them with more graduates to help alleviate this problem (Hindshaw, 2001). Taking this information into consideration, nursing faculty need to monitor students' progress throughout the nursing program in order to optimize a successful outcome. Accepting at-risk students increases the incidence of attrition and may decrease a successful outcome of passing the NCLEX. By identifying students who are at-risk for failing the NCLEX early on, progression and remediation policies can be implemented sooner (Higgins, 2005).

The NCLEX pass rate is often used as an indicator that potential students look at when deciding on a particular nursing program. The NCLEX pass rate is taken into consideration when discussing a nursing program's accreditation status by each state's Board of Nursing. Funding, enrollment, and reputation can also be affected by a school's pass rate (Higgins, 2005; Norton et al., 2006).

The significance of this project is to avoid NCLEX failure and the negative consequences for the student, faculty, and nursing program. A decrease in the NCLEX pass rate may affect recruitment of future students. Application and admission rates may also decrease if potential students see a program's low pass rate, resulting in a loss of program revenue. This loss of program revenue will have an impact on students completing the nursing program by losing money that could provide extra assistance when needed in order to pass the NCLEX. Avoiding NCLEX failure will alleviate the lessening of students' self esteem and the financial burden by having to retake the

NCLEX. It will also help to ensure that accreditation is not affected (Higgins, 2005; Seldomridge & DiBartolo, 2004). Healthcare will also be positively influenced by this project by decreasing the nursing shortage, ensuring patient safety and a competent workforce.

The significance of this project is to identify strategies in progression and remediation policies that are effective. This will help to decrease nursing program and student costs, decrease student and faculty frustration, and decrease time on both the parts of student and faculty. There is also importance placed on supporting at-risk students who would contribute to workplace diversity and deliver culturally competent care.

Section Summary

This section discussed the importance of identifying at-risk nursing students and the development and the implementation of a progression and remediation in those students who are at-risk for NCLEX failure. The purpose is to educate nurse educators by reviewing the literature on which strategies are effective and why this is significant. A few words/phrases are defined to prevent any misconceptions.

The Facilitation Theory was selected due to the ever changing world of education. The educator will act as facilitator and will educate according to the needs of the students. Learners will be comfortable in their environment and be allowed to share and listen to others' experience in order to promote self-growth.

It is essential that nursing programs develop progression and remediation policies which will assist nursing students to achieve success throughout the program to alleviate the nursing shortage. Identifying at-risk nursing students without delay is also important to provide them with extra assistance, thus passing the NCLEX on the first attempt. This

will maintain or improve a college's reputation, which will attract potential students into their nursing program.

REVIEW OF LITERATURE

The review of literature will provide information regarding the nursing shortage, nursing schools' attrition rates, the decrease in NCLEX pass rates, and the identification of at-risk nursing students. It will also discuss nursing schools' development and implementation of progression and remediation policies, issues related to policies in Associate Degree in Nursing (ADN) and Bachelor of Science in Nursing (BSN) programs, and review five policies implemented within a tri-state area.

Nursing Shortage

The availability of nursing position openings in the United States is a problem that is not going to disappear in the near future. An estimated 260,000 registered nursing positions will be vacant in 2025 in the US (AACN, 2009). The Health Resources and Services Administration (HRSA) stated that the number of graduates from nursing programs has been declining since 1998. In 1999, there were 76,000 nursing graduates compared to 83,000 graduates in 1998. And the numbers have continued to decline into 2000 (HRSA, 2004b). What is more startling is that the average age of a Registered Nurse (RN) was 46.8 years old in 2004, compared to 42.3 years old in 1996, according to the HRSA (2004a).

An area to consider is where licensed and registered nurses are working. There are currently 3,210,456 licensed registered nurses in the United States, but only 82% are employed in a related nursing field (Stuenkel, 2006). What are the remaining 18% of licensed registered nurses doing? Why aren't they working in the nursing field? Recent

research by the HRSA has shown that the workforce has provided women with expanded job opportunities beyond nursing, teaching, and secretarial duties. Women see the working conditions as less than pleasant and the pay being "stagnant" (HRSA, 2004b).

However, Johnson and Johnson's Campaign for Nursing's Future has taken a stand to promote nursing in a positive light. They have raised more than \$25 million to support and encourage males and females to enter into the nursing profession. They have provided nursing programs with scholarships, retention programs in the hospitals and nursing homes, and increased assistance with obtaining continuing education requirements (Johnson & Johnson, 2006). Although this has helped, it is not enough to alleviate the nursing shortage.

Due to the nursing shortage, it will be a critical time to recruit and retain the at-risk nursing students. This will also include students who speak English as a Second Language (ESL), rural students, and students of different ethnicities. Morton (2006) discussed the benefit of the Structured Learning Assistance (SLA) program throughout the article and is a good option in retaining at-risk students.

Attrition Rates

The attrition rate is a factor that nursing schools review often. The application process for nursing education is competitive in many schools, leading to many students being turned away. Nursing programs could increase the amount of students accepted into the program. But this isn't always possible because there is also a shortage of nursing faculty, limited resources, and too few clinical sites. The Southern Regional Education Board recognized that there was a shortage of 432 nursing faculty at the end of the 2000-2001 school year (Higgins, 2005).

There are restrictions on the number of students that can be enrolled in each nursing program. Students have great expectations that nursing programs will help them succeed; if they don't succeed it will jeopardize the current nursing shortage even further (Higgins, 2004; Jeffreys, 2006). When thirty students are enrolled into a program, it does not mean that thirty new nurses will enter the workforce. There is a big dilemma regarding attrition in nursing programs worldwide. Students today are less likely to attend school full-time for consecutive semesters, and more likely to be married, have children, and work during their education (Jeffreys, 2006). Thus, students today are less likely to complete their nursing education within the program's defined timeline than in previous years.

In a study conducted by Jeffreys (2006), student characteristics were assessed from entry into nursing programs through completion, such as: (a) prenursing GPA; (b) the number of stopouts; (c) age; and (d) specific nursing course grades. It was stated that educational programs need to be conscious of nontraditional students and provide support as needed. "Traditional" students are defined as students who take classes in consecutive semesters until program completion. "Nontraditional" students are those who attend college part-time and it generally takes them longer to complete a program; they often "stopout" for reasons such as pregnancy, childcare issues, illness in the family, financial hardship, and work issues. The study concluded, using a *t*-test ($p < 0.05$), that there was statistical significance in the successful completion of the nursing program found in: (a) age, with graduates being 5 years younger than non-graduates; (b) higher Medical-Surgical 1 course grade; and (c) fewer transferred credits.

A study conducted by Higgins (2005), investigated which strategies other community colleges in Texas were using to lower attrition rates and increase NCLEX pass rates. Some colleges are making it more difficult for students to be accepted into the nursing programs by increasing their admission requirements. The intent of this action is to try and lower the attrition rate. For example, some programs have increased preadmission grade point average (GPA) from 2.50 to 2.75, increased the number of prerequisites required, and restricted the number of times a person can reapply for the program after stepping out. A statistically significant difference was found using an alpha level for rejection of 0.05, Anatomy & Physiology II ($r=0.152$) and Microbiology ($r=0.191$) and completing the nursing program. A statistically significant difference was also found between Anatomy and Physiology I ($r=0.171$) and passing the NCLEX (Higgins, 2005).

A Decrease in NCLEX Pass Rates

From 1997 to 2001 there was a steady decline, 87.8% to 82% respectively, in the first-time pass rate in students taking the NCLEX-RN (Daley, Kirkpatrick, Frazier, Chung, & Moser, 2003). Since then, the pass rate has increased. Currently in 2009, the first-time pass rate for Registered Nurses was 88.42% and 85.72% for Licensed Practical Nurses (NCSBN, 2009). The National Council of State Boards of Nursing (NCSBN) has reevaluated what the passing NCLEX score should be. The studies stated that graduate level nurses were expected to take care of a higher acuity level of patients (Morrison, Free, & Newman, 2002). At the December 5-7, 2006 NCSBN meeting, it was voted to increase the passing standard, which took effect on April 1, 2007 (NCSBN, 2006).

Furthermore, there will be an additional increase in the NCLEX passing standard beginning April 1, 2010 (Malaysian Journal of Nursing Online News Portal, 2010).

A decrease in the NCLEX pass rates can affect a program's reputation, enrollment, funding, program quality, and also accreditation (Daley et al., 2003; Norton et al., 2006). Some students make their decision to attend a certain nursing program based on the pass rates of previous graduates. In addition, the well-being of the students who have failed the NCLEX, is also affected. They may suffer adverse effects, both emotionally and financially (Daley et al., 2003).

Many studies have been conducted to see what variables correlate with an increased likelihood of passing the NCLEX exam. Admission requirements such as: (a) preadmission GPA; (b) final grades in certain courses, particularly the sciences; (c) the number of courses taken prior to admission; and (d) SAT/ACT scores draw a parallel to whether or not students succeed in passing the NCLEX (Daley et al., 2003; Higgins, 2005; Nibert et al., 2002; Stuenkel, 2006). However, no statistical significance was found between English, Chemistry, and Psychology courses in relation to passing the NCLEX exam (Higgins, 2005). Final course grades from junior and senior level Medical/Surgical Nursing, Anatomy and Physiology, Microbiology, and nursing GPA have been linked to NCLEX success (Daley et al., 2003; Higgins, 2005; Nibert et al., 2002; Stuenkel, 2006). If students are lacking in any of these areas, faculty needs to closely monitor their performance.

Identifying At-Risk Students

Some nursing students need to be given additional assistance in order to succeed. By identifying students who are at-risk of failing the NCLEX, faculty can intervene and implement progression and remediation policies (Daley et al., 2003).

Nursing programs need to define the "at-risk" student. Higgins stated that predictors of at-risk students are as follows: "poor verbal and written communication skills, poor reading comprehension, poor math skills, poor study and test taking skills, difficulty managing anxiety, and lack of understanding of American professional culture" (2005, p. 542).

Waterhouse et al. (1993) stated that many variables are useful to identify an at-risk student. When a student is readmitted to a program due to insufficient progress in the academic or clinical setting, they may need to be monitored closely in order to ensure successful completion of the program (Higgins, 2005). Stuenkel (2006) and Talarczyk (1989) stated that SAT scores, prenursing GPA, prerequisite science grades, HESI exam scores, and even high school rank and science grades correlate with NCLEX success. If a student doesn't meet the criteria specified for that particular nursing program, then progression and remediation policies should be followed. Jeffreys (2006) stated that an at-risk student is one who obtains equal to or less than a C plus (C+) grade in their first Medical/Surgical Nursing course. As stated above, there are many variables that will help indicate if a student is at-risk.

However, academic factors may not be the only concern that may lead a student towards failure. Nonacademic factors also need to be identified. Variables such as family demands, pregnancy, family illness, multiple role responsibilities, dissatisfaction,

and working more than 20 hours per week all need to be monitored (Daley et al., 2003; Jeffreys, 2006). Language also needs to be considered. Research has shown that nurses who speak English as a second language have an increased risk of NCLEX failure than their counterparts (Daley et al., 2003; Higgins, 2005).

It can be very difficult and unrealistic to expect faculty to track all of these different variables.

A number of studies have shown that the Health Education System, Inc. (HESI) is an accurate predictor of NCLEX success. Four consecutive studies were conducted annually by Lauchner, Newman, and Britt (1999), Newman, Lauchner, and Britt (2000), Nibert and Young (2001), and Nibert, Young, and Adamson (2002) to research the validity of using the HESI exam to predict NCLEX success. All of the studies found that the HESI is very accurate in predicting a successful outcome in regards to taking the state board examination, with results testifying that the success rate is in the high 90th percentile when students take the practice comprehensive examination.

Development of Progression and Remediation Policies

There are a variety of progression and remediation policies that nursing education programs have implemented. As stated above, progression is when the student advances into the next nursing class after achieving a satisfactory grade. Obtaining permission from the nursing school to be eligible to take the NCLEX by meeting that institution's requirements is also a form of progression (Heroff, 2009). Remediation is a process of steps taken by a nursing student to progress forward in the nursing program after failing or at-risk for failing to meet program requirements: repeating a class, taking a NCLEX review course, repeating a standardized pre-NCLEX test, etc (Culleiton, 2009).

After defining who the at-risk student is, faculty will develop the progression and remediation policy. This development is important because nurse educators want to produce and send out safe, competent nurses into the workforce to help alleviate the nursing shortage. Nurse educators must identify these students early in order to provide them with the assistance they need to succeed, even if it means the implementation of a progression and remediation policy (Daley et al., 2003). With all of the literature available regarding strategies that have worked well for nursing programs in the past, this type of policy needs to be personalized to the institution.

A number of successful strategies were identified in the literature and will be discussed in the following paragraphs. A study performed at Georgetown University developed a plan that students must pass the ATI exam prior to graduation. The ATI is a comprehensive predictor exam that has proven to be over 95% accurate in predicting the probability of passing the state boards examination. Georgetown has also implemented the policy that requires at-risk students to: (a) take weekly practice exams and submit monthly results to faculty; (b) take a mandatory remedial tutorial program that is offered as a one credit class to practice critical thinking; and (c) review case studies. Although information regarding the past years' pass rates was not provided, it stated that after the development of these events, there was a significant increase in the first time pass rate. Following implementation, all sixty-two graduates passed the NCLEX on their first attempt, which demonstrates the efficacy of these policies (Norton et al., 2006).

English and Gordon (2004) conducted a study where nine out of an unknown number of students in a baccalaureate nursing program failed the HESI exam two times. These students attended review sessions presented by faculty, which were developed

based on areas of student weakness for three hours per week for four weeks. They also discussed test taking strategies, learned about positive visualization and guided imagery, and strategies to improve critical thinking. After these students completed the review course, all passed the HESI exam while attributing it to the remediation process.

Other studies described remediation plans that were less structured, without the formal classroom sessions recommended by Morton (2006) and English and Gordon (2004). These studies suggested that the at-risk student meet with the department chair to review HESI scores and determine what areas need to be reviewed and what materials will be utilized in that process. The student also needs to submit a written plan of study to the faculty presenting obtainable, measurable goals to achieve within a specific timeframe (Daley et al., 2003; Gallant, MacDonald, and Smith Higuchi, 2006; Morrison et al., 2002). The written plan of study seems to blend in well with Carl Roger's Facilitation Theory. The student has a voice in what one needs to learn in order to facilitate learning (Rogers, 1989).

Morton (2006) discussed the use of Structured Learning Assistance (SLA) weekly workshops for progression and remediation. In this method, problem areas were identified in which extra instructional time was led by faculty. Students reviewed study guides of past lecture topics, received help with homework, and prepared for tests. Again, issues about time management, how to study, and test taking strategies were reviewed. Within two years of implementing this remediation policy, the pass rate significantly increased from 65% to 92%.

Determining Which Strategies are Most Effective

From the information supplied above, there are a variety of ways to intervene and assist a student toward success. There isn't a right or wrong strategy, but it is important to be aware of the significance that faculty assistance and guidance have provided in remediating at-risk students. Each strategy described in the studies exhibits effectiveness in its own way. They discuss the positive results the policies have created by retaking a standardized pre-NCLEX, an independent review of areas in which there was student weakness, or attending a formal review course, just to name a few. When a nursing school develops their own progression and remediation policy and implements it, they may need to revise it as needed to meet their students' and nursing programs' needs.

When discussing the development of progression and remediation policies, it will require a balancing act between resources, both financially and with faculty time. With the faculty shortage affecting nursing programs and adding assignments to their already overloaded work load, this may cause concern and certainly some burnout (Hindshaw, 2001). Ironically, the literature does not specifically discuss when faculty should "give up" on the at-risk students. Educators are taught how to make students accountable for their own learning, provide opportunities for additional or alternative learning methods, and to motivate and coach; yet, still some students will fail (Peter, 2005; Rogers, 1989). Educators need to realize that they can only do so much to help a student succeed.

Depending on where the weakness is with the at-risk student, there are many strategies that may guide them to success. Having an independent review in areas that are difficult for the student would definitely be advantageous as the student would be able to learn exactly what they are struggling with, but would be costly for the nursing

program and time consuming for faculty. A review course would be another effective strategy as this can help the student identify weak areas to focus on, but again costly for the student and it may be difficult to find someone to lead it. For many students, time management and anxiety are issues that they struggle with due to their outside obligations. A written plan of study, guided by the student's insight and ideas, seems to facilitate effective learning according to Rogers (1989). Having seminars to help them tackle these issues would benefit these students, but cost and time may be an issue for those putting on the seminars. There seems to be a theme with the disadvantages with these strategies: cost, time, and finding appropriate faculty to lead these events.

Implementing the Progression and Remediation Policies

When faculty makes a decision about what should be included in the progression and remediation policies, the approval and implementation process begins. Morrison et al. (2002) suggested that legal council review the progression and remediation policy to determine if it is appropriate. A student may file a grievance if he/she believes fair treatment was not given. If all guidelines are followed and approval was sought by legal council, the policy should paint a black and white picture stating which students will be involved and what their expectations are to progress and remediate. Considerations need to be made as to the timing of the policies as well. The policy may state that it will become effective after failure of a course, failing at mid-semester, or following standardized testing. Consistency between courses is vital. These policies should also be published in the student handbook and discussed in the course syllabi.

Issues Related to Policies in ADN and BSN Nursing Programs

The original intent of this Independent Study was to compare and contrast issues related to progression and remediation policies in ADN and BSN nursing programs; however, no literature was found reflecting these issues between policies implemented into these two levels of nursing programs.

Higgins (2005) and Jeffreys (2006) both discussed plans assessing and looking for ways to increase student retention and ways to successfully pass the NCLEX. Lauchner, Newman, and Britt (1999), Newman, Britt, and Lauchner (2000), Nibert and Young (2001), and Nibert, Young, and Adamson (2002) discussed how the HESI exam is an accurate indicator of NCLEX success in both Practical Nursing (PN) and RN nursing programs, including both ADN and BSN. Different approaches for remediation were discussed in the studies by Norton et al. (2006), Daley et al. (2003) and English and Gordon (2004), related to BSN programs.

Regardless of which degree students are seeking, faculty need to monitor each student closely to determine if they are at-risk for failing to progress onto the next semester or failing the NCLEX. If a student is at risk, they should follow the progression and remediation policy that their institution has placed into effect.

There is not only a lack of literature, but there are also gaps in the literature as this isn't a topic being readily researched. There has been limited research completed to support which strategies were statistically significant. Despite the different duration of the ADN and BSN nursing programs, the policies didn't differ much. Each program and each study seemed to research it differently. The research had a large span and some programs chose to base progression primarily on pre-nursing grades whereas others based

progression based on the final comprehensive practice exam. I expected more of a similarity between the two types of programs. Although the literature didn't elaborate on the reasoning behind their research and the policies they implemented, it may be due to different budgets and limited resources in developing the policies.

Progression and Remediation Policy Review

A review of five progression and/or remediation policies implemented in nursing programs was completed within Minnesota, North Dakota, and South Dakota in both ADN and BSN programs. There wasn't any significant similarity in the size of the colleges reviewed. At the time of review, it was challenging to find nursing programs that had progression and remediation policies in place. This review was conducted to determine how the nursing programs policies compared to what was found in the review of literature. Many different reactions were received when asking nursing faculty to provide this information, ranging from apprehensiveness to disclosing this information to enthusiasm and excitement, wanting to learn more about what was found in the literature reviewed.

The five policies had some elements that were similar. Each nursing program had its own individualized progression policy; some using GPA as an indicator for progression while others used certain pre-NCLEX assessment exams. Ironically, not one nursing program had a specific remediation policy. If remediation is required of the student, this information was combined in the progression policy and left to the discretion of faculty.

Concordia College and Minot State University use assessment exams such as ATI and Educational Resources Inc., (ERI) in order to determine further progression into the

nursing program after their junior year. If student scores are not above the minimum required, remediation is coordinated with faculty (Concordia College, 2006; Minot State University, 2006).

Progression is based on individual course grade and GPA at Minnesota State University-Moorhead. At least a C minus (C-) must be achieved in each nursing course in order to advance further into the nursing program. Not only does the student have to achieve satisfactory course grades, but also has to attain a minimum GPA of 2.75. A student may be dismissed from the nursing program with a GPA less than 2.75 even if all nursing courses were completed successfully (Minnesota State University-Moorhead, 2006). Progression is also based on GPA at Dickinson State University for both the Associate in Applied Science in Practical Nursing (AASPN) and the Bachelors in Science in Nursing (BSN) programs. In each program, a 2.0 ("C") or greater or a Satisfactory (S) grade (when applicable) is required to progress into the next course in the nursing program sequence or a necessary prerequisite (Dickinson State University, 2006). Neither university mentions remediation in their policies.

In the AASPN program at North Dakota State College of Science, progression is also based on course grades. Not only is a minimum of a "C" grade (77% or greater) required in nursing courses and prerequisites, but general education classes as well. If a student fails to meet this grade throughout the semester or for various other reasons, he/she may be placed on probation. Faculty members then decide what type of remediation needs to be enforced. If a student fails to meet these criteria at the end of the scheduled date, it may lead to dismissal from the program (North Dakota State College of Science, 2009).

The Associate in Science in Nursing (ASN) program at North Dakota State College of Science is unique in that their policy requires both satisfactory grades in assessment testing and course grades in order to progress into the next semester. A minimum of a "C" grade (77% or greater) is needed in nursing courses. A proficiency level 2 is required of ATI Content Mastery RN exam. If that score is not obtained, the student will complete remediation and can repeat the exam two times. After the third failed testing, the student will meet with the instructor for advisement to discuss program progression (North Dakota State College of Science, 2009).

There isn't a correlation with the type of policy based on if the program is an ADN or BSN program. Some base progression on grades, whereas others base it on standardized exams scores. Remediation is established by faculty decision.

Section Summary

Because there is a nursing shortage in the healthcare system, more pressure is put on nursing faculty to provide the necessary tools to students so they can succeed; incorporating student accountability is also crucial in this process. Strategies that have effectively increased the NCLEX pass rate include using policies that state a student must maintain a certain GPA, complete additional review courses, and complete courses on test taking strategies and/or anxiety control. After reviewing five policies incorporated in nursing programs in a tri-state area, different strategies were used. GPA was used in the determination of progression, whereas others chose to base progression on standardized practice exams.

Nursing programs need to decide if this is right for their institution. At-risk students need to be identified and a progression and remediation policy needs to be developed, approved, and implemented.

METHODS

This project was developed to help educate nurse educators, my target audience, to develop and implement effective progression and remediation policies to help at-risk students succeed and pass their NCLEX on the first attempt. Key words used during the article search were "at-risk students" and "progression and remediation policy."

PubMed, CINAHL, and the internet guided my research. Limits were also set to only include full-text and the use of the English language. A submission of my manuscript to *Nurse Educator* is the ultimate goal to disseminate my research.

IMPLICATIONS FOR NURSING

It is essential that nursing faculty identify students who are at-risk for failure early in their educational pathway. This early identification will allow faculty to intervene and present an appropriate remediation plan to increase the likelihood of success (Daley et al., 2003). However, the literature does not define "early." Some research discussed that early intervention should be based on pre-nursing grades whereas others stated early intervention should be based on failure after the first year nursing courses. Early identification is not only important to the nursing program and faculty/students involved, but also to the institutions dealing with the nursing shortage. Increasing one's knowledge and awareness of the nursing shortage, at-risk students, and the implementation of progression and remediation policies will provide information on how it may affect nursing practice, nursing policy, nursing education, and nursing research. The

importance of faculty of nursing programs to produce competent, safe nurses who can think critically and operate in a very demanding healthcare environment is imperative. Also refer to the manuscript included (See Appendix).

Practice

The expected implications this project will provide for nursing practice, is to explain the importance of progression and remediation policies to faculty of nursing programs. This will accentuate the significance of the utilization of these policies, therefore, increasing the NCLEX pass rate on the first attempt which will improve the nursing shortage. Since the NCLEX first-time pass rate was increased, this will hopefully help at-risk nursing students become more confident, competent, and involved in their nursing thought processes (NCSBN, 2006). So many of the students who are at-risk are the non-traditional students such as ESL, rural, varying ethnic and cultural backgrounds, and the older than average student. These individuals add importance due to the increasing minority groups living within the United States and the ever-changing generation gap.

Policy

The importance of the development and incorporation of a progression and remediation policy into each nursing program needs to be stressed to nursing faculty. This will help facilitate success for those students at-risk for failing the NCLEX.

Government policymakers and institutional policymakers will also be affected. The American Association of State Colleges and Universities stated that people at all levels must support programs that build capacity and produce nursing graduates (Higher Education's Role, 2005). This could be done by increasing grant offers or offering low

interest rate loans to help individuals financially pursue an education in nursing. This will allow the student to concentrate more on their academics and less on finances.

In addition, policymakers could provide better resources to help ease faculty shortage. Again, grant offers to ease the financial burden on educators pursuing an advanced degree would be beneficial. Grants offered to provide current educators a continuing education course and the resources to develop program policies would also be beneficial.

Education

Education will be affected greatly by this project. Educators need to meet the needs of many different types of students who have different learning styles and have multiple role responsibilities. However, students need to be accountable for their own learning as well, as discussed in Carl Roger's Facilitation Theory (Rogers, 1989). By incorporating progression and remediation policies, students will know exactly what is required in order to progress into the next class and can receive the assistance they may need to help them succeed. Successful implementation of these policies will decrease attrition and wasted resources, determine the best use of resources, and assist faculty in identifying the best strategy to guide at-risk students to succeed.

Research

The major implication of the results of this Independent Study for nursing research is that isn't only one strategy that has been shown to be successful. Each nursing program has developed a policy based on their individual needs.

Nursing research should continue to follow this topic because the population and characteristics of nurses continues to change. Demographic and academic variables

change with each group of students that are admitted into a nursing program. There is not 100% consistency regarding the variables affecting pass rates from study to study.

RECOMMENDATIONS FOR FURTHER STUDIES NEEDED

Each nursing cohort can display many diverse characteristics, making it difficult to compare whether identical progression and remediation policies are effective in nursing programs. Even if such is true, the nursing profession would benefit from a comparison of a few different variations of policies utilized in areas around the United States. It may also be beneficial to see a comparison between the outcomes of identical remediation used with at-risk students in both BSN/ADN programs. Or do different programs require different policies?

It is also recommended that more consideration be placed on AASPN programs since the literature reviewed focused primarily on remediation in BSN programs. This may be because faculty tend to be more likely to possess a doctorate degree teaching at the baccalaureate level as compared to the associate level. Part of their job description with a doctorate degree may then be to conduct research and their focus would understandably be at the BSN level.

Ongoing NCLEX research on what the passing score is and if this is the best way to determine the safety and competence of an entry-level nurse would be another appropriate study, as well as the ongoing research of standardized testing. It would be of value to research how to support and promote and importance of a diverse student population, those who are of different culture or use ESL, in particular.

SUMMARY

This paper examines many factors associated with the nursing shortage including the great attrition rates in nursing programs, a decrease in NCLEX pass rates, identifying at-risk students, and how to guide them towards success. Due to the changing and demanding healthcare environment, it is the duty of nurse educators to prepare and educate the students to provide safe and competent care to their patients. Educators need to identify those who are at-risk for failing early on to implement progression and remediation policies to help the student to better achieve success. As Rogers stated, it is not only learning the facts. It is also the behavior of the learner, the path one chooses to take, and in one's attitude and personality. One learns to be a "fluid, changing, learning person" (Rogers, 1989, p. 285).

This study also reviewed policies utilized in the tri-state area and how they are similar to the ones discussed in the review of literature. All are different but unique in their own way to help guide a student towards success. Hopefully, the manuscript (See Appendix) provided and this study will increase the awareness to nursing educators about the importance of the integration of these policies and/or improvement of their current policies in their nursing programs, as well as further research looking for the most effective strategies for assisting at-risk students.

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Appendix

Progression and Remediation Policies for At-Risk Nursing Students

Abstract

Nurse educators need to examine the usefulness of progression and remediation policies for nursing students who are "at-risk" for failing a nursing course and/or the National Council Licensure Examination (NCLEX). This article emphasizes the current evidence regarding the importance of determining which students are at-risk and what type of guidance is beneficial. Progression and remediation policies have been successfully implemented into nursing programs around the United States (US) to help students achieve success.

Scenario I

Imagine the following situation nurse educators often encounter. Tina is a nursing student in an Associate in Applied Science in Practical Nursing (AASPN) program who is involved in several extracurricular activities. She also returns home each weekend to work 16 hours at a nursing home to assist with paying for the "necessities," such as a brand new car, cell phone, and the current fashion trends.

Tina received her midterm nursing grade and was stunned to see that she was failing. Her grades are as follows: (a) tests-67%, (b) classroom assignments-74%, (c) lab-86%, and (d) clinicals-90%.

The progression policy developed for Tina's nursing program states that in order to progress onto the next semester, each student needs to attain an average of 80% in both didactic and clinicals. If this is not met, remediation will be at the discretion of the faculty. If Tina continues to fail the course at the end of the remediation period, this could lead to program dismissal. Clinically, Tina is doing very well; however, she scores poorly on exams, which may be due to test anxiety, and has several incomplete assignments.

Scenario II

Bill is in his last semester preparing to receive his Associate in Science in Nursing (ASN) degree. Bill is currently enrolled as a full-time student as well as working full-time as a Licensed Practical Nurse (LPN).

He is married and has three children. His wife is a homemaker; therefore, they rely on Bill's income to support their family.

Bill has been under a significant amount of stress having to work and go to school full-time in addition to feeling extremely guilty by the lack of time spent with his family. In order to compensate for this, he has cut back on studying. He feels he is comfortable enough with the material and that he will do fine during Assessment Technologies Institute (ATI) testing even though his nursing grade is currently at a 79%.

The nursing program's progression and remediation policy states that a 77% or greater is needed to successfully pass each nursing course. In addition to this, each student must pass the ATI comprehensive exam with a score that indicates a .92 or higher predicted probability. If students do not meet these conditions, they must remediate according to faculty discretion and will have the opportunity to retake the ATI exam one time.

Progression and Remediation Policies

Imagine the emotions that a nurse educator may experience after having to remove a student from their nursing program because he/she couldn't achieve the required grade to continue on: sadness, frustration, disappointment, and maybe even a sense of defeat. The educator may have invested increased effort by implementing a progression and remediation policy to assist the student to avoid failure.

When the student is reevaluated and no improvement has been shown, the nurse educator will likely feel disappointment in the student and oneself. Were the goals unrealistic? Did the remediation fail to meet the student's individual needs? What more could have been done?

But as nurse educators are aware, there are two sides to every story. Imagine the emotions that a nursing student may feel after being told that he/she is failing a course and is at-risk for program dismissal: scared, panicked, stressed, and feeling like a failure.

Nursing Shortage

There is no doubt that the nursing shortage has affected health care facilities as well as the care patients receive. The advertisements for nursing professionals do not seem to diminish. It is estimated that there will be a shortfall of 260,000 nurses by the year 2025 in the US (1).

The average age of the registered nurse (RN) is also rising. By 2012, the average age of the RN is estimated to be 44.5 years (2). To reduce the nursing shortage, nurse educators need to provide at-risk students with effective resources in order to achieve success.

Another factor affecting the nursing shortage may be that the National Council of State Boards of Nursing (NCSBN) increased the passing standard in April 2007 (3). Furthermore, there will be an additional increase in the NCLEX passing standard beginning April 1, 2010 (4). The knowledge and skill level of the entry level nurse has increased and will continue to do so as healthcare changes (5). Educators also have the obligation to keep the nursing program standards high. Not only that, but it is their duty to produce safe and competent nurses that are motivated, can think critically, and can adapt to the demanding and changing environment.

Attrition Rates

The attrition rate is also a factor contributing to the nursing shortage. There are an increasing number of nontraditional students. "Traditional students" are defined as those students who attend school full-time in consecutive semesters until completion. "Nontraditional" students can be described as those who attend part-time, may not complete their degree in consecutive semesters, married or single parents, and hold down a job to support themselves. They may need to "stopout" for reasons such as financial hardship, illness, pregnancy, childcare and/or work issues (6).

How do nursing programs decrease their attrition rate? Some programs are making it more difficult to be accepted by increasing admission requirements such as increasing preadmission grade point average (GPA), increasing the number of prerequisites, and limiting the number of times an individual can reapply

to the program after stepping out (7, 8). Adequate research has not been conducted to show that increasing the admission requirements have been effective in decreasing attrition rates.

Several student characteristics have been identified in the literature to be associated with successful program completion. The variables of (a) younger age, with graduates being 5 years younger than non-graduates; (b) higher Medical-Surgical I course grade; and (c) fewer transferred credits were found to be significant predictors of successful completion (6). Statistical significance was found with better course grades in Anatomy and Physiology I/II and Microbiology and passing the NCLEX (7).

Identifying At-Risk Students

Nurse educators need to identify students who are at-risk for failing a required course or the NCLEX early in their nursing career. Students can be identified during advisor advisement, by examining student grades regularly, and by monitoring their clinical experiences. By identifying at-risk students early on, faculty can intervene and implement progression and remediation policies (9).

What characteristics determine if a student may be at-risk for failure? Academic factors such as low SAT scores, prenursing GPA, prerequisite science grades, and Health Education System, Inc. (HESI) exam scores are all indicators that correlate with NCLEX outcome (10, 11). Another study confirmed that receiving less than or equal to a C plus grade in the first Medical/Surgical nursing course is indicative of an at-risk student (6).

Nonacademic factors may also determine who an at-risk student will be. Family demands, working more than 20 hours per week, pregnancy, family illness, dissatisfaction, and multiple role responsibilities are all variables that need to be discussed (9, 6). Students who speak English as a second language also have an increased risk for NCLEX failure (9, 7).

Developing Progression and Remediation Policies

Many research studies have been conducted to determine which strategies are most effective. Several policies were investigated and each had unique characteristics. All were shown to have successful outcomes for at-risk nursing students. Realizing this information, this type of policy needs to be individualized to each institution.

Georgetown University developed a policy that requires students to pass the ATI exam, which is a standardized pre-NCLEX assessment of students' comprehension of material learned, similar to the HESI exam. Students who are identified as at-risk need to take weekly practice exams, participate in a remedial tutorial program, and review case studies. After the development of this policy, there was a significant increase in the first-time pass rate (12).

A study similar to this at a rural community college had a first-time NCLEX pass rate of 78% with the requirement being 80%. Prior to taking the proctored exam, students were required to pass two non-proctored exams with a passing score of 90%. If the proctored exam was unsuccessful, faculty reviewed their profile and developed a plan for remediation. Resources were provided for self-directed learning. After implementation of this policy, the first-time pass rate increased to 93% (13).

In a study where nine students failed the HESI exam two times, remediation was required by attending review sessions conducted by faculty based on areas of student weakness for three hours per week for four weeks. Test taking strategies, positive visualization, guided imagery, and strategies to improve critical thinking were also discussed. After completion of this review course, all nine students passed the HESI exam. Each student attributed success to the remediation process (14).

Structured Learning Assistance (SLA) is a weekly workshop that is also used for progression and remediation. The students are able to review study guides from previous content discussed, receive help with homework, and prepare for tests. They also review test taking strategies, tips for studying, and learn about

time management. The pass rate increased significantly from 65% to 92% within two years of implementing this remediation policy (15).

Other studies that were less structured involved a meeting with the instructor and student discussing midterm grades and/or HESI scores to determine areas of weakness and what resources should be used to remediate. They discussed the utilization of a written plan created by the student presenting obtainable, measurable goals to achieve within a specific timeframe in order to progress on in the nursing program. This was found to be quite beneficial (9, 16, 15).

Potential Policies

In a perfect world in the discussion of progression and remediation policies, there would be no concerns of having adequate faculty and funding; however, in reality nurse educators know that having enough faculty and funding for any endeavor is often a challenge. It was discussed that faculty be paid for remediation services and a grant could be obtained for funding. But time is of essence. Faculty discussed the concern that events that take them away from teaching limited how they could have better met the students' needs (7). If evidence-based remediation strategies have shown to be effective for at-risk students, then they should be developed and implemented, regardless of the cost. On the contrary, there is a faculty shortage and many nursing programs cannot afford to spend extra money on students who may be unable or unwilling to meet the objectives.

Not all nursing programs have identical policies; furthermore, not all faculty agree on the policies that are currently in place. Each nursing school needs to develop a progression and remediation policy that will be most effective for their students and modify it as needed.

Five progression and remediation policies from randomly selected schools were reviewed in a tri-state area to compare how they related to those discussed in the literature. Each nursing school individualized their progression policy; although all had common elements. Some used GPA as an indicator for progression, while others used pre-NCLEX assessment exams. Oddly enough, after reading the literature where nursing

schools included both progression and remediation policies, not one nursing program had a separate policy discussing remediation. If remediation was required, this was included in the progression policy and left to faculty discretion.

Policy Implementation and Outcomes

Recalling the two hypothetical scenarios presented at the beginning of this article, the plan will be discussed to assist the student towards success based on the literature and the author's experience.

Scenario I Policy and Outcome

In Tina's scenario, faculty are becoming very frustrated with the lack of effort shown on Tina's part. After several occasions of reminding Tina of missing assignments, she still has yet to turn in anything. Tina states that after evening activities, she is too tired to study and finish assignments, and weekends are spent working.

A meeting has been set up with Tina to enforce the progression and remediation process. It is important to implement this policy in a timely manner of advising the student and help her receive the resources needed to be successful (13, 17).

The faculty presented the facts to Tina and emphasized the need for improvement in order to succeed. Many questions were raised to Tina during the meeting. Does she really want to become a nurse? What are her priorities? Does she need to cut back on extracurricular activities? How much time is allocated for studying? Can she cut back her hours at work?

Tina has wanted to become a nurse ever since she was a little girl and will do anything to reach her goal. She states that her priorities are a little "backwards" right now, studying only 4 hours per week. She realizes that she needs to put more time into nursing so she is going to take a break from her extracurricular activities. Tina has also decided to limit her shopping to cut back the need to work.

It sounds like Tina is on the right track. Tina and her instructor come up with a written plan (18). The contract reads as follows:

At midterm (October 22), Tina's grades are substandard. At present, Tina received 67% in test scores and 74% in classroom assignments, which averages to 70.5%. The other components to this nursing course are adequate with 86% in lab and 90% in clinicals. In order to fulfill the requirements of this course, Tina will complete the following:

1. Tina will dedicate six hours each week studying nursing lecture material.
2. Tina will attend review sessions prior to each exam.
3. Tina will meet with the lab assistant for two hours each week to discuss areas of weakness.
4. Tina will attend a 1-hour workshop on overcoming test anxiety.
5. Tina will meet with instructor once every two weeks to assess progress and reevaluate.
6. Tina will achieve $\geq 80\%$ in didactic as well as maintain $\geq 80\%$ in lab and clinicals.

Tina will have these requirements completed by the end of the semester (December 10). Failure to complete these guidelines may result in a failing grade for this course in addition to dismissal from the nursing program.

After Tina and the instructor review this, each person shall sign at the bottom stating understanding.

During this remediation time, Tina met with her instructor every two weeks as required. She attended the test anxiety workshop, stating that she wished she would have attended that right when she began college. She admitted that her time studying varies from 2 to 4 hours per week. Tina has missed 2 scheduled times with the lab assistant without notifying anyone. After much encouragement from faculty to follow her plan of study, Tina could not fulfill the agreement. She was dismissed from the nursing program.

Scenario II Policy and Outcome

Bill's cumulative ATI score indicated that he had a .82 probability for passing the NCLEX. Because this score did not meet the nursing program's requirement to pass the course, Bill will need to remediate. Bill met with his advisor and agreed on a plan that will facilitate a successful outcome.

Prior to retaking the ATI exam, Bill will complete the following: (a) spend 10 hours independently studying the areas that he scored poorly in, (b) meet with the lab assistant for additional instruction for a minimum of two hours; the lab assistant will offer test taking strategies and provide scenarios to promote critical thinking, and (c) provide documentation that he passed three practice exams. Prior to taking the NCLEX, Bill will also be required to take a NCLEX review course at his expense (13, 6, 19, 12).

Bill was angry that he was required to complete these things in order to retest and attempt to pass the class. He felt that because he had a bad day testing, he is being singled out. "My instructor never liked me anyway." He was also upset that he was being "forced" to attend and pay for a review class when he can study perfectly fine on his own.

After Bill calmed down and thought things through, he realized he needed to take some accountability and study so he could successfully pass the nursing course and ultimately pass the NCLEX. He spent several hours with the lab assistant asking questions regarding content that he didn't understand, reviewed case studies that improved critical thinking, and discussed valuable test taking strategies. Bill studied well over ten hours and passed three practice exams. He attended a NCLEX review course and was surprised how much he learned. Bill went on to pass his re-take ATI exam as well as pass the NCLEX on his first attempt. He came to the conclusion that this progression and remediation process was very effective for him and thanked the faculty for working so closely with him in order to help him succeed.

Conclusion

Studies have shown that progression and remediation policies can guide students toward success. It is a matter of what works for the individual nursing faculty and program. It also depends on meeting the individual needs of the student (13). Hopefully, this will increase the awareness to nurse educators about the importance of the integration of these policies or improvement of their current policies in their nursing program. Furthermore, it may also expand research to find the most effective strategies for providing assistance to at-risk students.

When a student has not successfully achieved course requirements, it seems most effective to have the advisor and student meet to create a contract for remediation. This way both the voice of the student and faculty is heard and the student is held accountable for their own success.

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