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Predicting NCLEX-RN Success Utilizing Standardized Testing

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Predicting NCLEX-RN Success Utilizing Standardized Testing

by

Michelle Jolly Dunn

A thesis submitted to the faculty of Gardner-Webb University School of Nursing in partial fulfillment of the requirements for the Degree of Master of Science in Nursing

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Submitted by: Michelle Jolly Dunn, RNC-OB, BSN

Approved by: Dr. Cindy Miller

Date

Date
Abstract

The purpose of this quantitative study was to determine if Assessment Technologies Institute’s (ATI) comprehensive predictor accurately predicts student results on the National Council Licensure Examination for Registered Nurses (NCLEX-RN) for graduates of an Associate Degree nurse program at a community college in the Northwestern part of North Carolina. The study was also used to determine the feasibility of the School of Nursing (SON) continuing to purchase the ATI standardized testing products for student use. This study evaluated the comprehensive predictor scores and first time pass/fail rates for graduates (N=285) from 2007 to 2011. All data was analyzed using IBM Statistical Package for the Social Sciences (SPSS) version 20 software, as well as a predictive accuracy spreadsheet provided by ATI to determine the overall predictive reliability. The mean on the predictor is significantly different for those who passed versus those who failed, which indicated that ATI’s comprehensive predictor is predictive of success or failure on the NCLEX-RN for graduates of the Associate Degree Nurse program at the college (p = 0.000 < α = 0.05). Further analysis with ATI’s Predictive Accuracy spreadsheet demonstrated an overall predictive reliability of only 78% for the population of students served by the SON at the college, which is less than the 87.5% predictive reliability reported by ATI. While 78% accuracy is high, it may not justify the cost of purchasing ATI’s standardized tests for this student population.
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Chapter I

Introduction

Standardized testing is experienced by students from third grade through college and is fraught with stress and anxiety for students and faculty alike. In a student’s early experience with standardized testing, educators use the results to determine student learning at their current level and readiness to progress to the next level of educational learning. In nursing education programs, faculty members strive to prepare students for competent practice as well as for the National Council Licensure Examination (NCLEX) (Davenport, 2007). Assessment Technologies Institute (ATI) provides many standardized tests, which are course or concept specific and designed to prepare students for taking the (NCLEX) at the completion of their nursing education program. ATI also provides a comprehensive predictor that provides a wealth of information for students and faculty alike. For students, the ATI comprehensive predictor reveals areas they are weak in and need to study prior to taking their NCLEX; faculty are able to evaluate a student’s readiness to test as well as identify areas of weakness and their probability of success on NCLEX (McKee, 2012). While students at a community college in the Northwestern part of North Carolina are required to participate in the comprehensive predictor, does the ATI comprehensive predictor accurately predict success on NCLEX-RN for students attending their Associate in Science Nursing Program?

In 2011, this community college had a three year average pass rate of 93%, which is higher than the reported national pass rate of 88% and the North Carolina pass rate of 84% (North Carolina Board of Nursing (NCBON), 2011). While 2011 graduates of this Associate in Science Nursing Program had a pass rate of 96%, they are preceded by some
less than exemplary years (NCBON, 2011). In 2010, the NCBON reported a three year average pass rate for this program as 84%, well below the three year national average of 88%. In response to these pass rates, this Associate Degree Program was placed on probationary status by the NCBON, and underwent an internal curriculum review in an effort to strengthen the program and improve student success on NCLEX-RN. In Fall 2009, the North Carolina Curriculum Improvement Project was adopted as the primary curriculum in the Associate Degree Program, and greater emphasis was placed on student performance on end of program comprehensive testing provided by Assessment Technologies Institute (ATI).

The primary goal of this study was to determine if the comprehensive predictor administered by Assessment Technologies Institute (ATI) is accurately predictive of success or failure on NCLEX-RN. The specific objective was to determine if a correlation exists between success on the comprehensive predictor and success on NCLEX-RN for this program’s population of students. General Systems Theory was utilized as a framework for thorough assessment of comprehensive predictor scores as they relate to the predicted probability of passing the NCLEX-RN. General Systems Theory “is regarded as a universal grand theory because of its unique relevancy and applicability” (Bielkiewicz, 2011). The guiding principles of General Systems Theory are based on the boundaries a system has, as well as communication and feedback mechanisms that allow exchange of information and resources into and out of the system that are essential for the system to function (Bielkiewicz, 2011). Any change in one part of the system produces a change in the entire system (Figure 1), but the system goal can be reached or achieved in different ways (Bielkiewicz, 2011, p. 254). Data from 2007-
2011 was obtained from Assessment Technologies Institute (ATI) and the North Carolina Board of Nursing and utilized to evaluate reliability of the currently used comprehensive predictor, and to guide future use of comprehensive predictor scores in remediation of at risk students.

Assessing a student’s readiness for a life changing exam, such as the National Council Licensure Examination (NCLEX), is a challenge that can be met in numerous ways. Frequently used interventions include “academic referral, commercial reviews, social support referrals, and computerized reviews” (Davenport, 2007, p. 31). The challenge for faculty continues to be finding the best way to increase student learning as well as their probability of success on NCLEX-RN. Students and faculty each experience a degree of anxiety in relation to success or failure on NCLEX-RN, and feel the results reflect upon them or their program in a personal way. If it is reliable, using a comprehensive predictor should take some of the anxiety out of the licensure process for student and faculty.
“Note. Nursing Education and Nursing Student Learning are interdependent systems in which teaching and learning outcomes are affected by a complex set of variables. The two systems are parallel and linked by the student's achievement of the learning outcome and the nurse educator's impact on this outcome by the teaching approach” (Carrick, 2011, p. 79).

**Figure 1:** Systems Diagrams of the Nursing Education and the Nursing Student Learning Systems
Chapter II
Review of the Literature

A literature review of 18 articles obtained through EBSCO Host was conducted to determine current practices and trends to evaluate and enhance student achievement on the National Council Licensure Examination (NCLEX) for registered nurse applicants. The literature review examines ways nursing education programs assess student readiness for the NCLEX-RN, predict success on NCLEX-RN, as well as what interventions have been successfully implemented to increase their probability of passing. Use of computerized, adaptive testing programs, specifically Assessment Technologies Institute’s (ATI) comprehensive predictor is evaluated for its probability of predicting NCLEX-RN success.

Using Systems Theory and the Student’s Approach to Learning (SAL), Carrick (2011) analyzed the process of teaching and learning in nursing education programs. Nursing curriculum is designed to prepare students to successfully complete the NCLEX-RN exam and then assume an entry level position in the profession of nursing (Carrick, 2011). Assessing student learning is one of the most important areas in nursing education. Implementing solutions, which raise academic rigor to address substandard outcomes, is likely to be ineffective in the long term if students are not adequately prepared to meet the higher expectation (Carrick, 2011). In order to improve a student’s performance on the NCLEX-RN, the researcher identifies a variety of products available to determine readiness or prepare for testing (Carrick, 2011). Review modules, practice questions, and proctored content tests are just a few of the multiple interventions that could be implemented to increase the probability of a student’s success on the NCLEX-RN exam.
Success on the NCLEX-RN is the goal and measurement of achievement for the nursing student as well as the nurse educator and the program for which they teach. Davenport (2007) reports how one Associate of Science in Nursing Program in the Midwest addresses the issue of preparing students for safe and competent practice as well as success on the NCLEX-RN. Utilizing the Assessment Technologies Institute (ATI) Comprehensive Assessment and Remediation Package, the program is able to identify “areas for remediation and content review” (Davenport, 2007, p. 32). The researcher reports preliminary findings from 259 students taking the NCLEX-RN for the first time, who also participated in the ATI Comprehensive Predictor exam (Davenport, 2007). These findings suggest the ATI Comprehensive Predictor differentiates between students who are successful on the NCLEX-RN the first time testing and those who fail on their first attempt (Davenport, 2007). The researcher reports that the validity of this study is limited due to the fact that as many as 13% of students who were successful on the NCLEX-RN the first time scored very low on the ATI Comprehensive Predictor exam (Davenport, 2007). The researcher concludes by emphasizing how important it is to begin working with students during the first semester of their nursing education and continuing throughout the program (Davenport, 2007).

Identifying and remediating students at risk of failing the NCLEX-RN using a commercially available end-of-program exam is the focus of a study conducted at a state supported institution (Sifford & McDaniel, 2007). The prepared exam was administered to 87 potential study participants at the conclusion of the spring semester of their junior year and again near the conclusion of the fall semester of their senior year (Sifford & McDaniel, 2007). Of those 87 potential participants, 47 failed to score at or above 850,
and became participants in this study (Sifford & McDaniel, 2007). These students were required to take part in a remediation course, in the final semester of their senior year, which focused on test taking strategies to reduce anxiety and better manage time to help improve student success (Sifford & McDaniel, 2007). The researcher surmised that interventions focusing on these key areas had a positive impact on student scores on the end-of-program test as well as the NCLEX-RN (Sifford & McDaniel, 2007).

Oermann, Saewert, Charasika, and Yarbrough (2009) conducted a quantitative study evaluating the grading and assessment practices of faculty in pre-nursing courses. In Fall 2007, a 29-item web-based survey was “sent as an email blast to 21,719 members in the [National League for Nursing] [(NLN)] database,” and after excluding educators from practical nurse programs, the final sample size was 1,573 (Oermann et al., 2009, p. 275). The survey asked for demographic data from each participant, then using single-response, multiple-response, and open-ended questions, inquired about evaluation methods used to determine learning across the cognitive, affective, and psychomotor domains (Oermann et al., 2009). The surveys also assessed how faculties choose the evaluation method used for their particular course grades, and most base their decision on NCLEX-RN pass rates over other equally important factors (Oermann et al., 2009).

Young (2008) uses diverse methodologies to study five of the multiple theories that ground nursing education and practice. Declining annual pass rates on the National Council Licensure Examination (NCLEX) have led faculty in nursing education to research what measures other educational programs are implementing to increase their students’ success on the NCLEX-RN (Young, 2008). The researcher explores empiric-analytic research, interpretive phenomenology, critical social theory, feminist research,
and postmodern discourse as they apply to nursing education and practice (Young, 2008). Each approach has applications to nursing research, and it can be said that no one approach applies to every question or can be classified as more beneficial than another (Young, 2008). Young concludes that the research method selected depends on the question to be answered, and the research itself should be conducted in various locations with diverse populations.

In an effort to boost performance on the NCLEX-RN, many nursing programs have implemented interventions to support and assist their graduates on the exam (Herrman & Johnson, 2009). In years past, completion of a two- to four-year nursing program was rigorous enough to prepare students for success on the NCLEX-RN exam (Herrman & Johnson, 2009). Due to higher standards that became effective in April 2007, graduate nurses were expected to perform at a higher level of knowledge and skill than their predecessors (Herrman & Johnson, 2009). Since that time, there has been increasing need for intense review and study prior to the NCLEX-RN (Herrman & Johnson, 2009). One school responded with a senior level residency program that immersed students in the clinical environment, and also included two seminar courses with the sole purpose of preparing students for their true final exam (Herrman & Johnson, 2009). These seminar courses are titled the Boot Camp initiative, and focus on study skills, content review with rationales for incorrect responses, as well as personal preparation for test day including stress management, total wellness, and confidence for students (Herrman & Johnson, 2009). Passing the licensure exam on the first attempt is one of the goals for students, and launches the student into a professional career in nursing (Herrman & Johnson, 2009).
According to Johnson, the Boot Camp initiative is designed to be used in the seven days just prior to the NCLEX-RN, with the primary goal of instilling “confidence among new graduates by helping them develop exceptional test-taking skills while managing all aspects of their personal health” (Johnson, 2009, p. 328). New graduates select a trainer to hold them accountable during the course of the program (Johnson, 2009). Students are required to complete 500 NCLEX-style questions per day, but they also must work toward an emotional and spiritual balance that incorporates play and prayer into their preparation (Johnson, 2009). On the day of their scheduled exam, students should be ready to incorporate all the principles learned in Boot Camp during the exam, including contacting their trainer for a pep talk before, and again after the exam for final instructions. The confidence and tools gained in Boot Camp are carried with the new nurse as they begin their professional career (Johnson, 2009).

Standardized testing has quickly become the norm in many nursing education programs, and will continue as long as the practice yields successful results. Most programs begin by requiring students to take “one test per semester in the third semester and increase to two or more in the last three semesters” (Richards & Stone, 2008, p. 363). One baccalaureate program initially provided the program free of charge and as an option for their students, but due to minimal participation students in subsequent cohorts were required to purchase the testing books, and benchmarks were set for student performance (Richards & Stone, 2008). Students falling below the benchmark on their first attempt were offered remediation with a nonproctored test, while students scoring at or above the benchmark “earned 100 percent for [five] percent of the course grade” while students who chose not to participate at all received a grade of zero (Richards & Stone, 2008, p.
The researchers utilized a convenience sample of 663 students who took one of the computerized tests during the spring semester 2006 (Richards & Stone, 2008). Results of the surveys were summarized by semester and identified the most common barriers experienced by students, as well as their perceptions of the benefits of the testing program (Richards & Stone, 2008). After reviewing the results of the student surveys and NCLEX-RN pass rates, this school has determined that the testing program will continue, but is working to address the barriers identified by students (Richards & Stone, 2008).

Preparation for the NCLEX-RN begins when students enter a nursing education program, but intensifies dramatically in the capstone or senior courses with the use of computerized comprehensive final assessments, remediation plans, and one-on-one study planning (March & Ambrose, 2010). March and Ambrose (2010) examined the process undertaken by one nursing education program after experiencing declining NCLEX-RN pass rates. The program in question for preceding semesters had offered NCLEX-RN review courses for their graduates, but due to low enrollment and lack of interest, the courses had to be cancelled (March & Ambrose, 2010). After reviewing several products available in computerized testing, a committee charged with identifying ways to improve student success on the NCLEX-RN decided on a computerized examination program that had been well-reviewed and reported to effectively predict student success on NCLEX-RN (March & Ambrose, 2010). In addition to completion of the comprehensive predictor exam, students were required to formulate an individual study plan that identified their strengths and weaknesses, as well as possible barriers during NCLEX-RN preparation and ways to address and overcome those barriers (March & Ambrose, 2010). Since
implementation of this computerized predictor, the faculty of this program has discovered a need for some curriculum adaptations that better meet the identified needs of students in the program and continues to work toward improvement (March & Ambrose, 2010).

The ACE Star Model of Knowledge Transformation is an evidence-based project implemented in a Baccalaureate Nursing Program in Wisconsin (Bonis, Taft, & Wendler, 2007). This model describes how knowledge is transformed through a cyclical process from discovery through evaluation (See Figure 2) (Bonis et al., 2007). This process began by gathering information from individual studies and using that data to conduct research on current trends in nursing education (Bonis et al., 2007). Using current evidence-based educational practices, this knowledge guided implementation of new practices to impact outcomes and improve NCLEX-RN pass rates (Bonis et al., 2007). The researchers concluded by making recommendations for students and faculty to implement, which included development of an individual study plan, use of available review materials including practice questions, and integrating these strategies for success earlier in the program (Bonis et al., 2007).
Using a convenience sample of 39 graduates of a North Carolina School of Nursing, Ukpabi, (2008) used discriminant analysis of adopted variables to determine which ones significantly predict success on the NCLEX-RN. The researcher found literature supporting a high grade point average (GPA), “success in nursing courses, and above average scores on standardized tests were predictors of success on the NCLEX-RN” (Ukpabi, 2008, p. 32). At the same time, the researcher found that while extensive research has been done, none has been able to determine one variable that efficiently predicts success on the NCLEX-RN (Ukpabi, 2008). After reviewing the data, Ukpabi (2008) concluded that while some standardized test scores were significant, the best predictor of NCLEX-RN success for graduates of this school of nursing was the grades obtained in curriculum courses.

Figure 2: ACE Star Model
Before a new graduate of a nursing education program can begin their professional career as a Registered Nurse, they must successfully pass the NCLEX-RN (Morris & Hancock, 2008). “The most public measure of an institution is the first time pass rate on the NCLEX-RN and while every nursing education program strives to prepare students for success, the methods for predicting that success vary” (Morris & Hancock, 2008, p. 20). One method that has shown a significant measure of reliability is the Evolve Reach Exit examination, which was formerly known as Health Education Systems Incorporated (HESI) (Morris & Hancock, 2008). Morris and Hancock (2008) evaluated data obtained from two groups of students in a large, urban university in the southeastern United States, to determine if a significant difference in exit examination results existed between the last cohort before curriculum revision and the first cohort after curriculum revision. Their findings did not reveal a significant difference between the two groups, but did determine a relationship between performance on the exit examination and first time pass rates on the NCLEX-RN (Morris & Hancock, 2008).

Assessment Technologies Institute (ATI) is another company that provides comprehensive end of program exams designed to predict success or failure on the NCLEX-RN, as well as guide remediation on the exam content that was missed (Kelley, 2009). For a sample of 1,771 students taking the 2007 version of the NCLEX-RN, ATI conducted a logistic regression procedure that revealed “a statistically significant relationship” between a student’s performance on the comprehensive exam and NCLEX-RN results (Kelley, 2009, p. 25).

In 2011, ATI reported that while evaluation of the comprehensive predictor is important, the overall predictive accuracy is of greater value in determining the
usefulness of any predictive tool (Assessment Technologies Institute, 2010). While ATI maintains statistics on their product, they report significant value in each school of nursing conducting their own studies to determine accuracy of the predictor (ATI, 2010). To that end, ATI provides the assessment tools needed for an accurate evaluation for those schools of nursing using their products (ATI, 2010). In addition to predicting NCLEX-RN success, ATI identifies remediation efforts as a secondary goal of their comprehensive predictor. To guide remediation a list of topics is provided that highlights missed items for both individual students and groups that will delineate areas of weakness allowing for more specific review (ATI, 2010). ATI also recommends that each program use the comprehensive predictor as an indication of a student’s readiness to take the NCLEX-RN, rather than using it to determine if the student will pass or fail.

There are many nursing programs available across the United States, and all seek to meet the needs of the specific population they serve. The objectives of any program are to prepare their students to pass the NCLEX-RN on their first attempt, attain a position as a novice nurse, and provide safe care to individuals across the lifespan. How individual programs reach their objectives can be vastly different and should be based on the needs of the student population they serve.
Chapter III

Methodology

The purpose of this study is to determine if the comprehensive predictor administered by Assessment Technologies Institute (ATI) is accurately predictive of success or failure on the National Council Licensure Examination for Registered Nurses (NCLEX-RN). The NCLEX-RN serves as the final test to determine competence to be licensed and begin practice as a novice nurse. While there are many products available that provide comprehensive assessment and NCLEX-RN preparation, the College has utilized ATI’s comprehensive predictor since 2005, and has traditionally purchased the product for each student enrolled in the school of nursing. Due to the expense associated with such a purchase and higher numbers of students being enrolled, this study will determine the validity of continuing to purchase these products to assess student readiness for such a comprehensive examination.

The framework for this quantitative study was based on General Systems Theory looking specifically at the relationship between ATI’s comprehensive predictor and NCLEX-RN pass/fail results at an Associate Degree Nurse Program at a community college located in Northwest North Carolina. Prior to collecting data, the researcher obtained permission from the Institutional Review Board (IRB) of the College and Gardner-Webb University, as well as permission from the Associate Dean of the School of Nursing to access individual student data. Since individual data is maintained by the School of Nursing, individual student consent was not obtained; however, the School of Nursing was given the opportunity to review the purpose of this study, any risks and
benefits of the study, and withdraw permission to utilize the data at any time during the study by notifying the researcher at the contact numbers provided on the IRB application.

The data utilized for this study is maintained by the College and ATI testing, and focuses on scores obtained during the five year period from January 2007 through December 2011. Individual student results (N=285) on the comprehensive predictor were obtained and arranged on a spreadsheet and then paired with first-time NCLEX-RN pass/fail results. All student identifiers were then replaced with numeric identifiers using a random number generator and entered into IBM SPSS version 20 software for statistical analysis.

Research reported by ATI in 2010 indicated an overall predictive reliability of 87.5%. This study was comprised of a random sample of 960 associate degree nurse students from 67 schools of nursing. Based on their findings ATI recommends that each of their client institutions test the accuracy of the comprehensive predictor for themselves. By comparing student scores on the comprehensive predictor to NCLEX-RN first time pass/fail rates, the researcher determined the overall predictive reliability for students at the College. Determination of the overall predictive reliability will guide the need for remediation of at risk students, as well as determine the feasibility of the School of Nursing continuing to purchase the ATI set of products for their students.
Chapter IV

Results

The data sample for this study included graduates of an associate degree nursing program (N=285) from a School of Nursing at a community college in Northwestern North Carolina. Comprehensive predictor scores for each student were paired with NCLEX-RN pass/fail results from January 2007 through December 2011, with student identifiers replaced with numeric identifiers using a random number generator (Appendix A). In addition to individual data, the researcher also examined group data based on batch identification numbers as provided by ATI.

Utilizing SPSS statistical software, the researcher first looked at the histogram (Figure 3) to determine overall distribution of individual results. The distribution for this group of students follows the normal pattern with a limited number of data that fell outside the curve.
Statistical significance was then determined using a t-test for Equality of Means (Table 1), which indicates a statistically significant difference in the mean, and suggests that ATI’s comprehensive predictor is predictive of success or failure on the NCLEX-RN (p = 0.000 < α = 0.05)

Figure 3: Distribution of Pass/Fail Results
Table 1:

*Independent Samples Test*

<table>
<thead>
<tr>
<th></th>
<th>Levene's Test for Equality of Variances</th>
<th>t-test for Equality of Means</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>F</td>
<td>Sig.</td>
</tr>
<tr>
<td>Equal variances</td>
<td>.563</td>
<td>.454</td>
</tr>
<tr>
<td>assumed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ATI Individual</td>
<td>6.397</td>
<td>64.927</td>
</tr>
<tr>
<td>Comprehensive</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Predictor Score</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Equal variances</td>
<td></td>
<td></td>
</tr>
<tr>
<td>not assumed</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The objectives of this study were to assist the researcher in identifying overall predictive reliability of the comprehensive predictor produced by ATI, and to evaluate feasibility of the School of Nursing continuing to purchase the ATI standardized testing products for their student population. Utilizing the formula reported by ATI, a Probability of Passing NCLEX-RN Expectancy Table was created utilizing data obtained from ATI and the School of Nursing at the College (Table 2).
Table 2:

*Probability of Passing NCLEX-RN Expectancy Table*

<table>
<thead>
<tr>
<th>Predicted and Actual NCLEX-RN Pass/Fail Outcomes</th>
<th>Predicted Fail</th>
<th>Predicted Pass</th>
<th>N</th>
<th>Predicted Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Actual Fail</td>
<td>4</td>
<td>39</td>
<td>43</td>
<td>15%</td>
</tr>
<tr>
<td>Actual Pass</td>
<td>24</td>
<td>218</td>
<td>242</td>
<td>85%</td>
</tr>
<tr>
<td>N</td>
<td>28</td>
<td>257</td>
<td>285</td>
<td></td>
</tr>
<tr>
<td>Correct Prediction Percentage</td>
<td>10%</td>
<td>90%</td>
<td></td>
<td>78%</td>
</tr>
</tbody>
</table>

The percentages in Table 2 were determined by using formulas that were defined by ATI for the express purpose of determining predictive reliability for any program using their comprehensive predictor. An overall predictive reliability for this population of students was determined by dividing the number of examinees predicted correctly by the number that actually passed or failed the NCLEX-RN or $222 \div 285 = 0.778$ or 78%.
Chapter V

Discussion

While initial statistical analysis of the data suggests the comprehensive predictor is an accurate assessment tool for this population of students, a closer look reveals 9.5% less accuracy than reported. While 78% accuracy sounds like a good number, it does not justify the cost of purchasing ATI’s standardized test which has historically been incurred by the School of Nursing. The graph below (Figure 4) gives a visual representation of the calculations from Table 2 and dramatically emphasizes the difference in predicted versus actual NCLEX-RN results. If the School of Nursing realized an overall predictive accuracy of 87.5% or greater, the purchase of this product would be reasonable.

![Figure 4: Probability of Passing NCLEX-RN Expectancy Graph](chart.png)
Utilization of predictive testing has become a common occurrence in nursing education, and there are many companies that offer standardized testing. Each institution must evaluate the needs of the student population they serve and select the product that will best meet those needs while continuing to be cost effective. After examination and consideration of the results of this study, faculty of this Associate Degree Nursing Program needs to explore other options available for standardized testing.

Assessment Technologies Institute (ATI) offers a wide variety of standardized testing products and outlines a plan of use for each of their standardized tests. The proposed testing plan coincides with the current curriculum being used in most schools of nursing in North Carolina. ATI also offers a comprehensive review based on the results of their comprehensive predictor that is individualized for each program. Further research is needed to determine if adherence to the plan outlined by ATI would increase overall predictive reliability for the student population in this study.


Appendix A

Student Data

May 2007 ADN Individual Report: Batch 204469

<table>
<thead>
<tr>
<th>Student Identifier</th>
<th>Predictor</th>
<th>NCLEX</th>
<th>Student Identifier</th>
<th>Predictor</th>
<th>NCLEX</th>
</tr>
</thead>
<tbody>
<tr>
<td>296357871</td>
<td>69.4</td>
<td>P</td>
<td>1529307772</td>
<td>67.2</td>
<td>F</td>
</tr>
<tr>
<td>188942600</td>
<td>61.7</td>
<td>P</td>
<td>1497964173</td>
<td>62.8</td>
<td>P</td>
</tr>
<tr>
<td>1347776550</td>
<td>59.4</td>
<td>P</td>
<td>341921770</td>
<td>66.1</td>
<td>F</td>
</tr>
<tr>
<td>1310236532</td>
<td>64.4</td>
<td>F</td>
<td>871587445</td>
<td>66.1</td>
<td>P</td>
</tr>
<tr>
<td>292890308</td>
<td>67.8</td>
<td>P</td>
<td>515141912</td>
<td>55</td>
<td>F</td>
</tr>
<tr>
<td>103592673</td>
<td>67.8</td>
<td>P</td>
<td>352590334</td>
<td>67.8</td>
<td>P</td>
</tr>
<tr>
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<td>73.9</td>
<td>P</td>
<td>154588616</td>
<td>73.9</td>
<td>P</td>
</tr>
<tr>
<td>486921357</td>
<td>68.3</td>
<td>P</td>
<td>537484952</td>
<td>63.3</td>
<td>P</td>
</tr>
<tr>
<td>181754019</td>
<td>66.7</td>
<td>P</td>
<td>142870257</td>
<td>77.8</td>
<td>P</td>
</tr>
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<td>339280132</td>
<td>58.9</td>
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<td>584949781</td>
<td>31.1</td>
<td>P</td>
</tr>
<tr>
<td>2036387744</td>
<td>68.3</td>
<td>P</td>
<td>1968921062</td>
<td>62.8</td>
<td>F</td>
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<tr>
<td>1275175372</td>
<td>61.7</td>
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<td>69.4</td>
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**May 2011 ADN Individual Report: Batch 1346432**

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**May 2011 LPN/RN Individual Report: Batch 1345711**

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