

2018-2019 Pre-Licensure Clinical Placement Capacity Information Brief

Brief Summary: In 2011, HSCN engaged with schools of nursing and clinical education sites to launch the Centralized Clinical Placement System (CCPS) as a response to decreased access to clinical placements for students. The CCPS program has increased transparency in clinical placement requests amongst schools, increased accuracy of clinical facilities securing preceptors for RN students, and ensured nursing students clinical education sites since the initial implementation.

In 2018 the HSCN implemented a Clinical Placement Capacity Survey to identify potential changes to clinical placement availability among participating and non-participating partners. HSCN used the survey results, coupled with CCPS placement data, to forecast the 2019 placement availability.

HSCN forecasted the following changes for 2019 clinical placements;

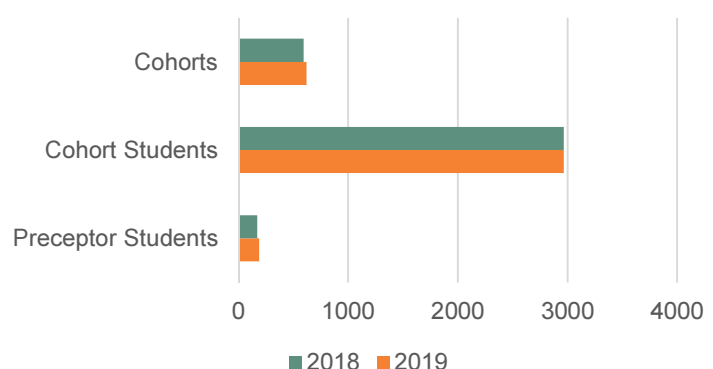
- ▼ A decrease of 178 total cohort type student placements.
- ▼ 55 students/~2% of cohort type placements due to unit closures.
- ▼ 135 student placements/~7% of cohort placements due to reductions in allowable cohort size.
- ▼ 67% of total placement loses expected in Medical Surgical (Med/Surg) departments.

2018-2019 Academic Year in Review: Overall clinical placements for pre-license nursing programs saw little change over the previous year for cohort type placements; ~2 students/0%. The largest changes occurred in the distribution of placements across the various department types. Changes to the placement landscape required schools and facilities to employ strategies to mitigate clinical placement loss.

Current Clinical Capacity:

- ▼ A 3 year review indicates student demands are stable with an increased demand in RN preceptors.
- ▼ Due to cohort size capitations and unit closures, the total number of cohort groups increased by 5% / 29 cohorts.

Clinical Placement Totals by Type



Clinical Placements by Department Summary: 2018-2019 AY

In 2019, clinical placements for cohort type student placements decreased by less than 1% /~2 cohort type students. Decreases in the availabilities of cohort type student placements were noted for Critical Care, Med/Surg, Post-Acute and Telemetry, totaling ~354 student placements. Increases in cohort type placements in Clinic, Psychiatry, Emergency and Pediatric departments were seen representing 334 student placement gains. Demand for preceptor type increased most notably in Med/Surg departments.

Table 1. Total Hawai'i CCPS Cohort Placement Types by Department.

Placements for Cohorts	2018 Actual		2019 Actual		Student Chg.	
	Students	Cohorts	Students	Cohorts	Amt.	% Chg
By Department Type						
Clinic	105	36	229	43	124	118%
Critical Care	38	7	16	0	-22	-58%
Emergency Dept.	6	3	8	2	2	33%
Medical/Surgical	1208	160	1023	108	-185	-15%
Obstetrics	564	69	583	100	19	3%
Pediatrics	432	66	483	74	51	12%
Post-Acute	318	40	242	31	-76	-24%
Psychiatry	138	18	295	45	157	114%
Specialty	0	0	0	0	0	0%
Telemetry	158	22	87	14	-71	-45%
TOTAL	2967	421	2966	417	-2	-0%

Key Findings

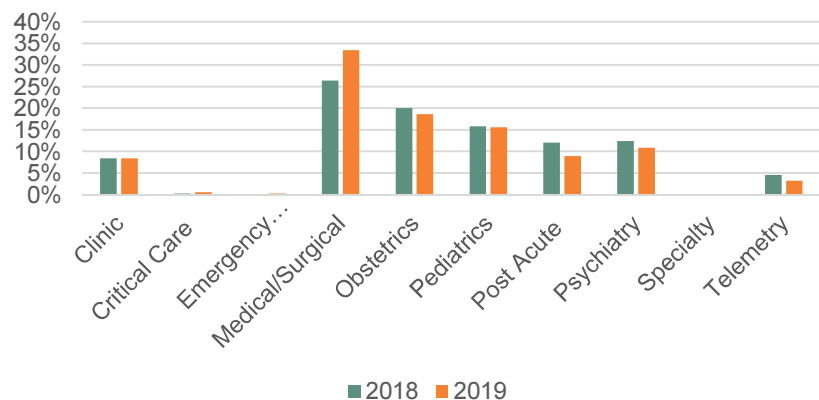
- ▼ Due to facility Med/Surg unit closures, 2019 saw a 15% reduction in cohort student placements.
- ▼ Clinical placements in Telemetry decreased by 45% overall largely due to low census and unit closures.
- ▼ Clinic and Psychiatry departments saw marked increases in 2019

Graph 2. Preceptor Placements by Department

Key Findings

- ▼ Preceptor placement demand in Med/Surg increased by 33% in 2019.
- ▼ Facilities continue to report preceptor preparation and availability as a constraints for clinical placements.

Percent of Preceptor Placements by Department Type



Clinical placements in non-participating facilities increased by 9% or 66 student placements in 2019.

2018-2019 Constraints to Meeting Clinical Placement Need: Clinical facilities are decreasing cohort sizes, primarily due to low census rates. The decrease impacts the number of cohorts needed to educate the same number of students, which adds faculty demands on the school, increases the demand for alternative cohort placements and creates a need for alternative cohort compositions.

Most Reported Constraints by Facilities

- ▼ Preceptor Preparation
- ▼ Preceptor Availability
- ▼ Unit Closures Due to Low Census Rates
- ▼ Staff Turnover

Most Reported Constraints by Schools

- ▼ Cohort Size Reductions
- ▼ Availability of Tele & Med/Surg Placements
- ▼ Preceptor Availability
- ▼ Imposition of Facility Student Fees

2018-2019 Reported Mitigation Strategies: To respond to recent changes in placement availability, the Hawai'i schools of nursing implemented new strategies and operational changes to ensure Hawai'i's nursing students were provided adequate clinical exposure. Long-term mitigation strategies will need to be developed if current trends of reduction continues.

Reduction in availability of departmental placements;

- 1) Two schools of Hawai'i's nursing reported undertaking contracting with new community health, home health and long-term care facilities to increase the overall availability of placements.
- 2) One school reported implementing small short-term cohort rotations into semester placement slots for various courses to ensure students received exposure, where placements were limited.
- 3) Two schools reported investigation into the capacity to increase simulation experience.

Difficulty Securing Preceptors/Meeting Preceptor Need;

- 1) One school reported increasing 1:1 preceptor type experiences to 2:1 ratio with the addition of faculty to ensure preceptor/mentor type placement experiences where preceptors were limited.
- 2) Two schools restructured historical placements and course models to enable the return of secured placements to the pool, to help fill gaps for other academic programs. Schools returned 8 preceptor placements.

Ongoing Clinical Placement Considerations:

Simulation: An NCSBN study** found that high-quality simulation experiences could be substituted for up to 50% of traditional clinical hours across the prelicensure nursing curriculum. 50% threshold now included in NCSBN Model Rules***. Nursing HAR* requires 120 semester credits for BSN, 64 for ADN, and 49 for GEPN pre-license, with at least 40% of the nursing credits shall be laboratory or clinical instruction.

Currently there are no State of Hawai'i Board of Nursing (BON) specialty clinical or didactic minimum requirements for current ADN/BSN programs. The BON is in process of identifying standards.

Nurse Residency Programs (NRPs): Two facilities reported an increase in new graduate hiring and an increase in the total number of new nurse graduates in NRP's. These facilities report a decrease in the availability of some clinical placement rotation opportunities due to overlap with NRP's operating in some departments.

New nurse graduate hiring fluctuates greatly between facilities and across time. Several factors effect institutional hiring, such as improvements in the economy and increases in nursing demand as patient acuity and population demographics shift. Comprehensive research on the long term effects of NRP competition on clinical placement availability for nursing students is scant. Further investigation into this topic may become necessary as more clinical facilities adopt NRP's into their operations.

BON Refresher Courses: Beginning on July 1, 2017 non-exempt licensed registered nurses and licensed practical nurses are required to complete an approved learning activity within the prior biennium to meet continuing competency requirements re-licensure standards. One of the Hawai'i Board of Nursing (BON) approved learning activity options is the completion of a refresher course, designed for practical or registered nurses returning to practice after more than five years****.

The BON refresher course standards requires sixty (60) hours of clinical practice in addition to (60) hours of didactic studies, which may increase clinical placements in Hawai'i facilities and create competition for clinical placements with pre-license nursing education programs. The demand for the BON refresher course is currently unknown. Further investigation is required to assess the potential impact on clinical placement availability. Currently, a BON approved refresher course is not offered locally.

*Hawai'i Administrative Rules
http://cca.hawaii.gov/pvl/boards/nursing/statute_rules/
HAR16-89-45- i (pg 89-22)

**NCSBN Model Rules (p13)
https://www.ncsbn.org/17_Model_Rules_0917.pdf

***Alexander, Maryann, Carol F. Durham, Janice I. Hooper, Pamela R. Jeffries, Nathan Goldman, Suzan "Suzie" Kardong-Edgren, Karen S. Kesten, et al. "NCSBN Simulation Guidelines for Prelicensure Nursing Programs." *Journal of Nursing Regulation* 6, no. 3 (October 2015): 39-42. [https://doi.org/10.1016/S2155-8256\(15\)30783-3](https://doi.org/10.1016/S2155-8256(15)30783-3).

**** Hawai'i Administrative Rules
http://cca.hawaii.gov/pvl/boards/nursing/statute_rules/
HAR 16-89-132