






Elite Learning Podcast

The Evolution of Nursing Education

From nightingale lamps to NGN—buckle up for the nursing education time machine! ✨

 **Listen time:** ~65 minutes •  **Audience:** Nursing educators, students, RNs, APRNs, nurse leaders •  **Listen now:** elitelearning.com/ce-podcasts



Featured Voices

Host: Dr. Candace Pierce, DNP, RN, CNE, COI
Faculty with Elite Learning by Colibri Healthcare, nurse educator, and advocate passionate about transforming nursing education

Guest: Dr. Mackenzie Butler, DNP
Nurse educator, simulation expert, and clinical faculty with hands-on experience reshaping student learning



What You'll Learn

- How nursing education evolved from apprenticeships to academia
- The hidden impact of the 'industrialized education model' on nursing
- Why critical thinking ≠ clinical reasoning (and why it matters)
- How competency-based education (CBE) is reshaping curricula
- What the Next Gen NCLEX really measures—and how to prepare
- The role of simulation and the power of debriefing
- Creative solutions to the clinical placement crisis



Key Takeaways

- The shift from hospital diploma programs (80% in 1965) to college-based education brought scientific rigor—but also gaps in hands-on experience.
- Today's new grads have 700-900 clinical hours vs. thousands in apprenticeship models.
- The 'factory model' of education doesn't fit nursing—we need personalized, competency-based learning.
- Clinical reasoning requires pattern recognition ('illness scripts') built through repeated exposure.
- COVID accelerated innovations: hybrid learning works, simulation can replace up to 50% of clinical hours (when done well), and flexibility improves retention.
- The Next Gen NCLEX shifted the game—partial credit doesn't exist, and it measures real-world clinical judgment.
- Debriefing = 60% of simulation learning. Don't skip it!

Fast Facts That'll Make You Think

- In 2020, 14-17% of new RNs failed NCLEX on first attempt—roughly 1 in 6
- Only 55% of new grad nurses were rated 'practice ready' by employers (2021)
- Hospital patient complexity increased 17% from 1997-2002; most complex patients surged 144%
- Hospital turnover rate: 22.7%. Cost per nurse lost: \$40K-\$64K
- 17.5% of new RNs leave their first job within a year; 1/3 leave within two years
- In 2022, 91,000 qualified applicants were turned away from nursing programs—mostly due to lack of clinical sites
- 74% of healthcare orgs are implementing AI tools, but only 39% of nursing programs teach informatics adequately

Do This Next

- ☐ Map one of your courses to the AACN Essentials domains
- ☐ Try a 'flipped classroom' approach in your next lecture
- ☐ Incorporate bow-tie or trend items into your NGN prep
- ☐ Schedule a debriefing training for your sim team
- ☐ Explore academic-practice partnerships in your area
- ☐ Reflect: Are you teaching for seat time or competency?

Educator Spotlight

Competency-Based Education (CBE): Shift from time-based to mastery-based progression. Students demonstrate competence before moving forward—no more 'one size fits all.'

AACN Essentials (2021): Integrated framework spanning entry → advanced → doctorate. 10 domains spiral across all levels (e.g., person-centered care deepens from BSN to DNP).

Clinical Judgment Measurement Model: 6 steps: Recognize cues → Analyze → Prioritize hypothesis → Generate solutions → Take action → Evaluate outcomes.

Simulation Best Practices: Use for high-risk/low-incidence events, deteriorating patients, sensitive situations. Debrief immediately and meaningfully.

Conversation Starter

'If you could redesign one aspect of nursing education overnight, what would it be—and why?'

Resources & Links

AACN Essentials (2021) Framework: <https://www.aacnnursing.org/essentials>

NCSBN CJMM: <https://www.ncsbn.org/publications/integrating-the-ncsbn-ncmm-into-nursing-educational-frameworks>

Next Gen NCLEX prep: <https://www.nclex.com/prepare.page>

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