

## CHARACTERISTICS OF VOCATIONAL NURSING PROGRAMS

This update presents data for the 84 vocational nursing (VN) programs and the one military-based VN program<sup>1</sup> in Texas during the 2024 reporting year, including:

- 80 generic programs
- 4 Multiple Entry/Exit Programs (MEEPs)

The Texas Center for Nursing Workforce Studies (TCNWS) collected data using the 2024 Board of Nursing's (BON) Nursing Education Program Information Survey (NEPIS) that was available online as of October 2, 2024. The reporting period was academic year (AY) 2023-2024 (September 1, 2023 – August 31, 2024) unless otherwise noted. TCNWS collaborated with the BON in the design and dissemination of the survey.

<sup>1</sup> Data collected from the military-based VN program were analyzed separately. Information about this program can be found on page 6.

### Geographic Location and Program Setting of Vocational Nursing Programs

Table 1 summarizes the location of the 84 VN programs by setting and geographic designation. Figure 1 presents the geographic locations of the 84 VN program main campuses in Texas by metropolitan and border county designation.

- 51 (60.7%) VN programs were located in a metropolitan, non-border area.
- 24 (28.6%) VN programs were located in a non-metropolitan, non-border area.

The 84 VN programs operating in Texas were classified as follows<sup>2</sup>:

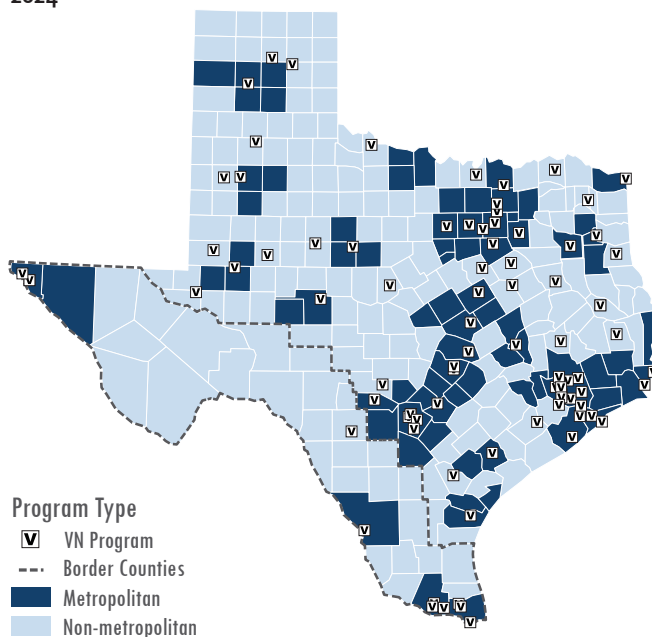
- 68 (81.0%) community, state, and technical colleges.
- 16 (19.0%) private/independent institutions for higher education.

**Table 1. Geographic Designation of Main Campuses by Program Setting, 2024**

Program Setting	Geographic Designation				Total
	Metro Border	Metro Non-Border	Non-Metro Border	Non-Metro Non-Border	
Community, State, or Technical College	5	39	1	23	68
Private/Independent Institutions for Higher Education	3	12	0	1	16
<b>Total</b>	<b>8</b>	<b>51</b>	<b>1</b>	<b>24</b>	<b>84</b>

- These were mutually exclusive categories.
- The number of community, state, and technical colleges decreased by 4 while the number of private/independent institutions increased by 2 between 2023 and 2024.

**Figure 1. Geographic Location of Vocational Nursing Programs, 2024**



<sup>2</sup> Institution types come from the Texas Higher Education Coordinating Board (<https://apps.highered.texas.gov/program-inventory/>)

## Changes in the Number of Vocational Nursing Programs

Table 2 shows the number of newly opened, closed, and total VN programs by year.

- There were 4 program closures between 2023 and 2024, and 2 new programs opened.
- In the past 10 years, there has been a net reduction of 7 programs.

**Table 2. Changes in the Number of Vocational Nursing Programs, 2015-2024**

Year	Newly Opened Programs	Closed Programs	Total Programs
2015	1	2	91
2016	0	3	88
2017	3	1	90
2018	0	1	89 <sup>3</sup>
2019	1	5	85 <sup>3</sup>
2020	1	0	86
2021	2	3	85
2022	3	1	87
2023	1	2	86
2024	2	4	84

<sup>3</sup>One program was approved to conduct a teach-out for VN students who were near graduation but attended a VN program that closed in 2016.

## Length of Curriculum in Vocational Nursing Programs

- In the 2024 NEPIS, programs were asked to report the length of their VN curriculum in months.
- Length of curriculum ranged from 9 months (3 VN programs) to 18 months (1 VN program).
- 71 (84.5%) VN programs were 12 months in length.
- 6 (7.1%) programs had a curriculum longer than 12 months, and 7 programs (8.3%) reported a curriculum less than 12 months in length.

## Online Availability of Vocational Nursing Programs<sup>4</sup>

44 of 84 (52.4%) VN education programs indicated that they offered nursing courses via online technology:

- 0 programs offered the entire didactic portion online in 2024, the same as in 2023.
- 23 (27.4%) programs offered only select nursing courses entirely online, a decrease from 25 in 2023.
- 36 (42.9%) programs offered hybrid courses (greater than 50% but less than 85% online)<sup>4</sup>, an increase from 34 in 2023.

<sup>4</sup>Please note that these are not mutually exclusive categories, and programs may offer select courses entirely online and select courses as hybrids. Also note that all programs, whether or not they offered any portion of their program online, offered hands-on, face-to-face clinical experiences. Didactic curriculum is defined as including actual hours of classroom instruction in nursing and non-nursing Board-required courses/content.

<sup>5</sup>As per BON rule 214.9(b)(3) "Faculty must have documented competencies specific to online education". Programs were able to list more than one requirement.

<sup>6</sup>Learning Management Systems include Canvas, Blackboard Ultra.

<sup>7</sup>Other trainings include, but are not limited to, school-wide internal trainings used for all faculty and external trainings/certifications not related to the Learning Management System used by the program.

BON rule 214.9(b)(3) states that faculty have documented competencies specific to online education<sup>5</sup>. Table 3 summarizes requirements programs have of faculty teaching online courses.

**Table 3. Program Requirements for Faculty Teaching Online Courses, 2024 (n=51)**

Requirement	Number of programs
Completing a training on learning management system	24
Completing a course on online or distance learning provided by educational institution	14
Showing proof of continuing professional development or education hours on online learning	7
Online teaching certification	6
Other	5

Note: This was an open-ended question, programs could provide more than one requirement.

## Curriculum and Program Hours in Vocational Nursing Programs

### Curriculum

Programs were asked what type of curriculum they used.

- 56 (66.7%) reported using a block curriculum,<sup>8</sup> 14 (16.7%) used an integrated curriculum,<sup>9</sup> and 8 (9.5%) used a concept-based curriculum.<sup>10</sup>
- 2 programs (2.4%) reported using a traditional curriculum<sup>11</sup>.
- Lastly, 4 (4.8%) programs used a Texas model of concept-based curriculum<sup>12</sup>.

If programs implemented permanent curriculum changes<sup>13</sup> during AY 2023-2024, they were asked to select which changes were implemented (Table 4).

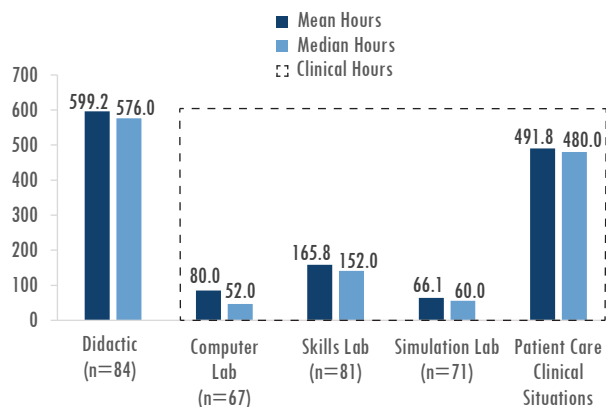
- Programs could select more than one type of change. 63 (75.0%) programs did not implement a permanent curriculum change.
- The 8 programs that selected “other curriculum change” did not specify what changes they made.

### Program Hours

Programs were asked to report the total number of hours students were required to participate in didactic and clinical portions of the program of study. The clinical portion is the sum of computer lab, skills lab, simulation lab, and patient care clinical situation hours.

Figure 2 reports the mean and median number of contact hours (didactic and clinical) reported by VN programs. Clinical hours are further broken down by computer lab, skills lab, simulation lab, and patient care clinical situation hours.

**Figure 2. Mean and Median Didactic and Clinical Contact Hours Reported by Vocational Nursing Programs, 2024**



Note: n is the number of programs reporting more than zero hours for that type of activity.

**Table 4. Types of Permanent Curriculum Changes Implemented, 2024**

Type of Curriculum Change	# of programs	% of programs
No permanent change	63	75.0%
A minor change (editorial changes, moving content, hours between courses)	12	14.3%
Changes in clinical hours	10	11.9%
Adding and removing courses	4	4.8%
A total revision of curriculum	1	1.2%
Online delivery (more didactic online, moving to hybrid courses)	0	0.0%
A change in program objectives, major concepts	0	0.0%
Other	8	9.5%

### Didactic Contact Hours

The didactic contact hours included face-to-face or online delivery of classroom instruction. The mean number of didactic hours reported by VN programs was 599.2 hours. The median number of hours was 576.

### Computer Lab

Computer lab was an optional component of clinical hours that included interactive tutorials and learning modules. The mean and median hours reported by 67 VN programs for computer lab were 80.0 and 52 hours, respectively.

### Nursing Skills Lab (low- and moderate-fidelity simulations and task training)

Skills lab was defined as low- and medium-fidelity simulations and task training. The mean and median hours reported by 81 programs were 165.8 and 152 hours, respectively.

### High-Fidelity Simulation Lab

Simulation lab was defined as high-fidelity situations including orientation, learning objectives, simulation experience, debriefing, and evaluation. The mean and median hours reported by 71 programs for simulation lab were 66.1 and 60 hours, respectively.

### Patient Care Clinical Situations

Patient care clinical situations were hands-on clinical practice with actual patients in a clinical setting, including

all faculty-supervised activities in the clinical setting, observational experiences, and clinical conferences. Hours on patient care clinical situations was obtained from 83 out of 84 programs. The mean and median number of hours reported for patient care clinical situations were 491.8 and 480 hours, respectively. This was about the same as the mean and median hours reported in 2023 (490.4, 480).

Table 5 displays the difference in mean contact hours by type from 2023 to 2024.

- Didactic contact hours and simulation lab hours increased from 2023.
- Computer lab hours and nursing skills lab hours decreased from 2023.
- Patient care clinical hours stayed about the same from 2023.

Total Clinical Contact Hours

The mean and median total clinical contact hours reported by VN programs were 764.7 and 786.5 hours, respectively.

Table 5. Mean Contact Hours, 2023 vs 2024

Contact Type	2023	2024
Didactic	587.7	599.2
Computer Lab	85.3	80.0
Nursing Skills Lab	177.4	165.8
Simulation Lab	63.9	66.1
Patient Care Clinical Situations	490.4	491.8

The highest number of hours reported was 2,068. Programs were asked to indicate whether they used Dedicated Education Units (DEUs)<sup>14</sup> as a clinical format.

- 8 programs stated they used DEUs, an increase from 5 in 2023.

Table 6 shows the percentage of hands-on clinical practice time programs reported students spent in several different clinical settings.

- The majority of hands-on clinical practice hours were spent in acute care settings, with programs reporting an average of 48.5% of clinical practice hours in the acute care setting.
- The next most used setting was the long term care setting, with programs reporting an average of 32.5% of clinical practice hours in the long term care setting.
- The “Other” category includes settings like pediatric and maternal clinics, school health fairs, daycare centers, mental health centers, and home health and hospice.

Table 6. Percentage of Hands-On Clinical Time Spent by Setting, 2024

Clinical Setting	n	Mean % of Time Spent	Median % of Time Spent
Acute Care	78	48.2%	48.1%
Long Term Care	75	32.3%	25.0%
Community	70	10.1%	8.2%
Observational	53	4.7%	3.8%
Other	24	4.8%	0.0%

The 2024 NEPIS asked how many hands-on clinical contact hours in the VN program were devoted to the nursing care of children and maternity nursing.

- The mean and median number of hands-on clinical contact hours devoted to the nursing care of children were 35.9 and 30.0 hours, respectively.
- Programs reported a mean of 35.8 hours and a median of 32.0 hands-on clinical contact hours devoted to maternity nursing.

**Table 7: Percent of hands-on, simulation, and other clinical learning experiences hours spent with different populations (n=78).**

	Hands-on clinical hours		Simulation hours		Other (labs, computer, standard patients)	
	Mean % of time spent	Median % of time spent	Mean % of time spent	Median % of time spent	Mean % of time spent	Median % of time spent
Medical/Surgical	44.9%	44.6%	58.5%	53.0%	36.0%	31.9%
Geriatric	25.8%	20.6%	21.0%	16.3%	10.8%	4.8%
Maternal/newborn	6.2%	4.9%	22.2%	13.7%	6.1%	4.3%
Pediatrics	6.0%	5.1%	16.1%	12.0%	5.1%	3.8%
Mental health	3.4%	2.8%	6.6%	-	4.9%	2.4%
Community or population health settings	9.9%	6.7%	3.7%	-	4.7%	-

Note: MEEP Programs were not included in the response due to the difference in structure and delivery of the program.

Table 7 shows the mean and median percent of time students spent with different populations during their hands-on clinical practice hours, simulation hours, and other clinical learning experiences.

- 78 of 84 programs responded to this question.
- The highest mean and median percent time in hands-on clinical hours, simulation hours, and other hours were spent in the medical/surgical clinical area.

## Academic Practice Partnerships

Programs were asked to indicate whether they partnered with health care facilities in a clinical agreement to allow students an opportunity for an enriched and concentrated clinical experience under the supervision of a trained preceptor or nursing faculty.

- 25 programs (29.8%) did partner with health care facilities.
- The number of partnerships ranged from 1 to 98, with the mean and median being 15.2 and 8, respectively.

- Of these 25 programs, only 1 program indicated that their students were paid for these experiences.
- 4 of the 25 programs (28.0%) stated that they were using a clinical evaluation tool to evaluate these clinical experiences. 8 programs (32.0%) used preceptor's evaluation. 8 programs (32.0%) used student self-evaluations.

<sup>8</sup> Block curriculum: blocks or chunks of nursing content that are structured around particular clinical specialty areas, patient population, pathology, or physical systems. The content and focus of each course tends to be unique to that course. Content commonly is specific to areas such as medical-surgical nursing, mental health nursing, pediatric nursing, maternity nursing, gerontological nursing, and community nursing.

<sup>9</sup> Integrated curriculum: curriculum pattern where nursing content is woven across courses in the curriculum rather than being based on body systems or specific health problems.

<sup>10</sup> Concept-based curriculum: curriculum based upon faculty-identified concepts that are considered core to nursing practice and threaded across the curriculum. Each concept is presented through application to exemplars of each concept.

<sup>11</sup> Traditional curriculum: curriculum usually organized in a block format, and typically includes general education courses, prerequisite courses, and nursing major coursework.

<sup>12</sup> Texas model of concept-based curriculum: curriculum based on concepts that are considered core to nursing practice, approved by the Texas Board of Nursing

<sup>13</sup> Programs are asked specifically about permanent curriculum changes to avoid reporting on temporary curriculum changes programs may have made to address special circumstances.

<sup>14</sup> A Dedicated Education Unit is a nursing education model based upon a contractual agreement between a hospital and a nursing education program. Staff nurses on a specific hospital unit function as the primary instructors for nursing students during clinical learning experiences, and nursing program faculty serve as mentors and education resources for the staff nurses.

## High School and Military Tracks in Vocational Nursing Programs

The 2024 VN NEPIS asked programs about options for high school students.

- 5 programs reported offering options for high school students.
- 2 of these programs allows students to complete the entire nursing curriculum in high school.

More information on nursing programs for high school students can be found in the 2024 Nursing Education for High School Students report located at <https://www.dshs.texas.gov/texas-center-nursing-workforce-studies/nursing-education-reports>

Programs were asked to report whether they had implemented a track that gives active duty, former, or retired military personnel nursing credit for allied health care training and/or experience.

- In 2024, 1 program reported having a track that gives active duty, former, or retired military personnel nursing credit for allied health care training and/or experience.
- The program is not an accelerated track, did not identify any challenges to planning or implementing the track, and reported 0 students in that track.