

---

## Translating Military Education and Training to Meet Civilian Academic Requirements

**Jené M. Hurlbut, PhD, MSN, CNE**

Professor

Roseman University of Health Sciences

11 Sunset Way

Henderson, NV

Tel: (702) 968-2058

Email: [jhurlbut@roseman.edu](mailto:jhurlbut@roseman.edu)

**Deborah L. Sikes, DNP, RN, CNE**

Associate Professor

Texas Tech University Health Sciences Center

3601 4th Street, STOP 6264

Lubbock, TX

Tel: (915) 494-1558

Email: [deborah.sikes@ttuhsc.edu](mailto:deborah.sikes@ttuhsc.edu)

**Jason E. Saladiner, EdD**

Clinical Associate Professor

Texas A&M University-Corpus Christi

6300 Ocean Dr. Unit 5840

Corpus Christi, TX

Tel: (361) 825-3270

Email: [Jason.saladiner@tamucc.edu](mailto:Jason.saladiner@tamucc.edu)

**Patricia G. Francis-Johnson, DNP, RN**

Assistant Professor

Texas Tech University Health Sciences Center

3601 4th Street, STOP 6264

Lubbock, TX

Tel: (806) 743-9227

Email: [patricia.francis@ttuhsc.edu](mailto:patricia.francis@ttuhsc.edu)

**Imelda R. Revuelto, MSED**

RNPC Director of Operations, Training & Partnerships

Roseman University of Health Sciences

11 Sunset Way

Henderson, NV

Tel: (702) 968-1658

Email: [irevuelto@roseman.edu](mailto:irevuelto@roseman.edu)

**Melinda Mitchell Jones, MSN, JD, RN**

Professor

Texas Tech University Health Sciences Center

3601 4th Street, STOP 6264

Lubbock, TX

Office: 806-743-9229

Cell: (806) 773-5114

Email: melinda.mitchell.jones@ttuhsc.edu

**Mary Jane Hamilton PhD, RN**

Professor

Texas A&M University-Corpus Christi

6300 Ocean Dr. Unit 5840

Corpus Christi, TX

Office: 361-825-2649

Cell: (361) 834-5000

Email: mary.hamilton@tamucc.edu

### Author Note

The US Department of Health and Human Services, Health Resources and Services Administration, Nurse Education, Practice, Quality, and Retention-Veterans' Bachelor of Science in Nursing Program Grants UF1HP28516, UF1HP28518, and UF1HP28519 supported this work. The contents are the authors' and do not necessarily represent the official views of, nor an endorsement by, HRSA. The authors have no financial conflicts of interest. All correspondence regarding this publication should be directed to Dr. Jene' Hurlbut per the contact information provided above. The authors acknowledge the following individuals for their support of veterans' nursing education initiatives: Tedd Mitchell, MD, Michael L. Evans, PhD, RN, FAAN, Jana Saunders, PhD, RN, Kyle Chapman, Megan Kramr MBA, and Marian Smithey MS, RN.

### Abstract

Recognizing military education and experience for upper-division nursing courses has proven to be a challenge for many schools of nursing. The Joint Service Transcript (JST) issued by the US Department of Defense, provides scant information for college officials to use to determine if educational outcomes gained while in military service can effectively translate into nursing course credit. This article outlines different approaches developed by three different schools of nursing to assess the knowledge and skills of incoming veterans matriculating into nursing education programs. The goals of the three schools are similar. First, to ensure the veteran nursing student has met the course requirements for which they are seeking credit. Second, the student is prepared to progress successfully through the curriculum. Finally, the third goal was to ensure the student had sufficient knowledge and judgment to pass the licensing exam. The strategies and processes designed by each school are distinct and influenced by the underlying curriculum and university policy.

*Keywords:* veterans, nursing, education, college credit, competency-based education, prior learning

## Introduction

As of 2017, the National Center for Veterans Analysis and Statistics estimated nearly 20 million veterans would be living in the US, with an average of 200,000 exiting military service annually (US Department of Veterans Affairs, 2018a). An estimated one million individuals will utilize VA education benefits in 2018 (US Department of Veterans Affairs, 2018b), including the Post-9/11 GI Bill (US Department of Veterans Affairs, 2018a) and the Hazlewood Act (for Texas Veterans) (Texas Veterans Commission, 2019a). Access to veterans' education benefits reduces financial barriers for attending college and gaining future employment. Given nursing's projected need to expand the workforce by over 400,000 nurses between 2016-2026, professional nursing could be a target profession for transitioning military veterans (American Association of Colleges of Nursing, 2020). Returning veterans who served in a medical facility or as part of a team of medics or corpsmen and have military medical education may desire to employ their skills in healthcare occupations, but lack the required credentials for professional nursing roles. In-the-field medicine is at the cutting edge of healthcare, and the experience one gains in triage or other aspects of emergency medical assistance translates well to the healthcare field. Over half of veterans (53%), including those with healthcare experience, feel that colleges and universities neither value nor recognize the skills and knowledge gained in military service (US Department of Veterans Affairs, 2018a). Unfortunately, although service members have had medical education and training in the military, they do not have recognized degrees or licenses (Bachelor of Science-Nursing [BSN] or Registered Nurse [RN]) and may not be employable or may be underemployed.

In a study completed by the University of Washington, Center for Workforce in Healthcare Studies (Snyder, Wick, Skillman & Frogner, 2015), four barriers veterans frequently face when pursuing healthcare careers were discussed. One of the four factors was translating military education and training to meet civilian academic requirements. The transition from military to civilian life/employment is not always smooth. Translating military medical knowledge and experience is confusing and sometimes difficult for both the military and academia. The lack of an individual assessment for military experience is very misleading to the veteran student. All veterans have a military transcript [(e.g., Army/American Council on Education Registry (AARTS), Sailor-Marine American Council on Education Registry Transcript (SMART), or the Community College of the Air Force (CCAF)]. The Joint Services Transcript (JST) (n.d.) is an official military education transcript available to service members in all military service branches except the Air Force, which utilizes the Community College of the Air Force Transcript (CCAF, 2019). Students may misunderstand they have been awarded credit through American Council on Education (ACE) (2019) for their military experience. The ACE process intends to bridge the gap between professional military education and post-secondary education. The process is as follows: the military point of contact requests a review by college/university faculty who are currently teaching the content areas. The review team analyzes course material, objectives, learning outcomes, and recommends credit based on its findings. However, ACE does not validate the military experience portion on the military transcript, and therefore, it is difficult to assign credit. The military experience simply states that a soldier, airman, or seaman reaching a particular military pay grade and time in service should have learned specific skills. This misconception could have significant implications on the student's ability to integrate into the academic institution, which could decrease the student's success.

The following is a description of the processes used by three universities to award academic credit for student veterans with prior military health care training. The summary includes a brief description of each institution, the educational program awarding academic credit, and the processes used to complete prior learning assessments.

### **Texas A&M University-Corpus Christi College of Nursing and Health Sciences**

Texas A&M University-Corpus Christi (TAMUCC), a part of the Texas A&M System, is Carnegie classified as a public Doctoral-High Research Activity. TAMUCC is a coeducational institution situated in the largest metropolitan area on the South Texas Gulf Coast and less than 200 miles from the Mexican border, providing education to over 12,000 undergraduate, masters, and doctoral students (Texas A&M University-Corpus Christi, 2019). Surrounded by rural communities, this urban setting is composed of multiple layers of diversity concerning culture, student attributes, and educational needs. TAMUCC is a Hispanic serving institution, and, consistent with that mission, the College of Nursing & Health Sciences (CONHS) is committed to supporting opportunities for diverse, underserved populations in the Texas Coastal Bend area, including the military.

TAMUCC nursing education programs began in 1978 with the RN/BSN program (Texas A&M University-Corpus Christi, College of Nursing & Health Sciences, 2019). Graduate programs were added in the 1980s and in 1990 a pre-licensure baccalaureate program. The Board of Regents of the Texas A&M System and the Texas Higher Education Coordinating Board (THECB) approved the creation of the CONHS in 2004. The CONHS offers baccalaureate, masters, and doctoral degrees as well as post-graduate certificates. CONHS enrollment in September 2019, totaled approximately 2,000 students. The CONHS baccalaureate nursing science (BSN) program consists of a five-semester pre-licensure program with about 500 students. The CONHS offers three BSN online tracts. In addition to the RN to BSN track, there is the electronic Learning in Nursing Education (eLine©), an online pre-licensure BSN track based on articulated, competency-based modular model. In 2010, the eLine© prelicensure BSN evolved to offer eLine© Military track for active duty, military, veterans, and reservists with military medical experience and education.

#### *Developing a Program of Assessment*

In 2010, the college was awarded an HRSA Workforce Development grant to develop a transitional program for veterans with military experience to obtain their BSN. Goals for the military students were to educate, graduate, pass the National Council Licensure Examination for Registered Nurses (NCLEX-RN) and move to successful employment. In Year 1 of the eLine© military (ELM) program, many issues became apparent: (a) Lack of prerequisites; (b) lack of understanding of the American Council on Education (ACE) process; (c) lack of knowledge of Military Transcripts (e.g., SMART, AARTS, CCAF); (d) need to explore avenues for awarding Prior Learning credits; (e) understanding the regulations and requirements of the different financial aid packages for the military; and (f) mobility of active duty military and their spouses and state to state requirements.

The lack of prerequisites (2-3 courses) would be an issue for incoming student veterans; however, this was more dramatic. The majority of prospective students lacked 22-24 hours of

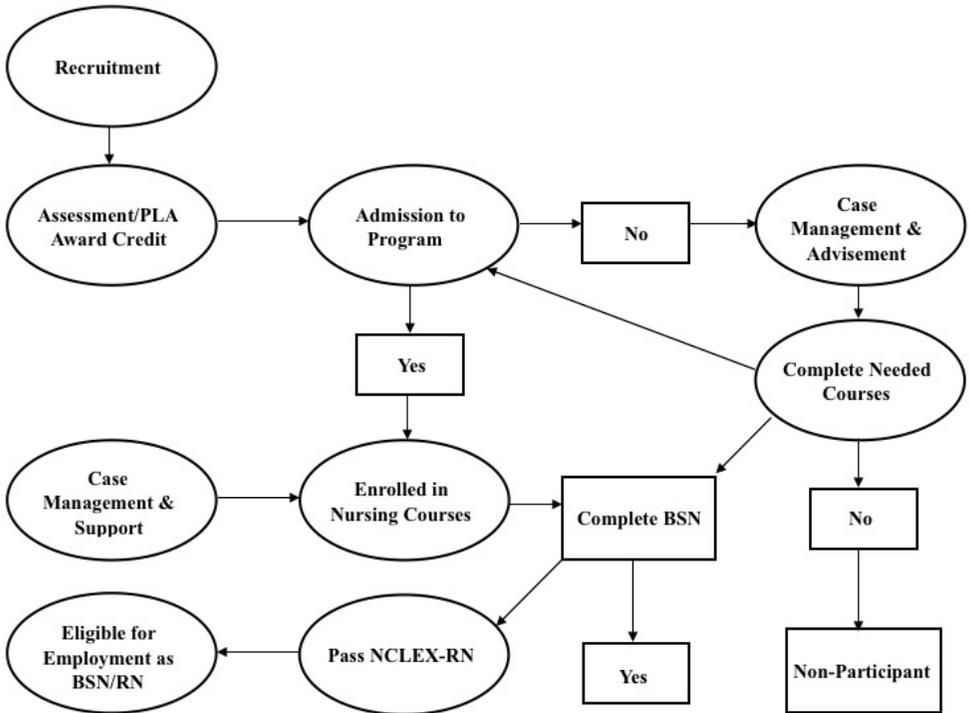
prerequisite requirements. Although many had credit hours, they lacked basic education courses required for the BSN. Many perspective ELM students who have taken courses during their military career and, in some cases, have even earned advanced degrees that lack transferability and do not apply towards the BSN degree. The academic advisor and case-worker resolved this barrier by developing individual student degree plans identifying the courses needed and methods to obtain them, such as face-to-face, online, or College Level Examination Program (CLEP) tests.

Following the vision of the eLine© military grant, TAMUCC-CONHS began exploring and developed an innovative and aggressive internal avenue for awarding individualized college credit thorough internal prior learning assessments (PLA) process. This model of analyzing military experience and awarding personalized credit is one of the significant successes that has implications for higher education across multiple disciplines. Initially, ELM students would attempt to validate knowledge by meeting a minimum standard score of 850 through standardized testing developed by the Health Education System Incorporated (HESI) (2020). Working with the testing department of HESI, the faculty developed a customized fundamentals test representing all the Fundamental course modules. TAMUCC-CONHS identified concepts that typically require remediation (e.g., Nursing Process, Fluid, and Electrolytes in Fundamentals) as “all students” modules. If the ELM student pre-test score met the requirements, the student would receive the HESI conversion score for most modules and was only required to complete “all student” modules and an abbreviated clinical experience. This process gave TAMUCC the ability to award college credit for prior learning. Awarding college credit for prior learning was a milestone for the ELM Grant. However, the process was still insufficient in genuinely measuring the veteran students' prior knowledge. The modules required were assigned arbitrarily with the potential for repeating content. Students that were close but unable to meet the required threshold did not receive prior learning credit.

The Prior Learning Assessment (PLA) model evolved from a “high stakes test” requiring an 850-composite score to an accurate competency-based validation model of evaluation. This latest iteration of the PLA (i.e., knowledge validation) allowed for a standardized, data-driven mechanism for removal of redundancy in the curriculum at the concept level (within multiple nursing courses) in areas where competency, learned through military training and experience, is validated. Additionally, just as students' skills are unique, this Prior Learning Assessment model individualized the curriculum (based on their military expertise) for each VBSN student. Administering the PLA provides the opportunity for the student to move more rapidly through the curriculum while remaining engaged and challenged in learning. This iteration (of the PLA) also facilitated the paradigm shift (i.e., they don't know what they don't know) from the military medical servicemember (up to 20 years of service) to the professional role of a bachelor's prepared nurse because the “gaps” identified are tangible and visible to the student. The student no longer must take our word at face value. Simulation and abbreviated clinical experiences provide the mechanism for faculty to validate and remediate the veteran students' clinical skill level. This approach showed the VBSN student (i.e., service member and veteran) that their military service is valued. Feedback from current and program graduates suggests that the value placed on their military service (by CONHS) has a positive impact on the successful academic and social integration into the university, and ultimately their academic success. The concept level (partial) credit PLA model within nursing courses in conjunction with the evaluation of military transcript (awarding course for course) credit maximizes the award of college credit while individualizing the curriculum. To date, nearly 100 BSN students have benefited from

this model earning their BSN degree at Texas A&M University-Corpus Christi, with 25% going on for their graduate degrees, mostly as Family Nurse Practitioners. (See Figure 1- TAMUCC VBSN Program Progression).

Figure 1.  
**TAMUCC VBSN Program Progression**



### Roseman University of Health Sciences College of Nursing

Roseman University, founded in 1999 in Henderson, Nevada, is a private non-profit university operating on three campuses located across Nevada and Utah. The College of Nursing offers two tracks leading to a Bachelor of Science in Nursing. The Veteran to BSN is offered in both tracks. Roseman University holds regional accreditation through the Northwest Commission on Colleges and Universities. The College of Nursing is accredited through the Commission on Collegiate Nursing Education (CCNE).

Roseman University utilizes the concept of mastery learning in the delivery of content to students, and this includes applying a block curriculum design. With a block curriculum, students take one class at a time, focusing intensely on that content area and master the content before proceeding to the next block. Students attend class from 8 a.m. to 3 p.m., which facilitates an increase in direct contact hours between the faculty and the students. This structure encourages faculty to incorporate active learning strategies, including flipping the

classroom techniques. Rudimentary to student success is the use of a team approach within the classroom setting that supports the current environment of interprofessional healthcare delivery. This overall atmosphere encourages cooperation and collaboration with student team members and healthcare professionals (Roseman University of Health Sciences, 2019).

Roseman's College of Nursing offers an on-campus undergraduate 18-month Bachelor of Science in Nursing (BSN) degree and an online hybrid BSN degree program. These BSN programs adhere to the block curriculum and principles of mastery learning. Students must demonstrate mastery of the content, defined as scoring 90 or higher on assessments and assignments. Students who do not demonstrate proficiency are required to remediate during set remediation times. Block lengths vary based on the topical areas, and if a lab component is required (Lipsky, Cone, Watson, Lawrence, & Lutfiyya, 2019).

### *Securing Approvals*

In July of 2015, the College of Nursing was awarded the Veteran to Bachelor of Science in Nursing HRSA grant (VBSN). Upon notification of this funding, the grant team sought approvals from the university president, as well as other applicable departments within the university, to build the essential policies and processes that would guide the development of the VBSN pathway. Securing university administrative approvals was facilitated by creating an advisory board with representation from all university service units. The advisory board enabled interprofessional collaboration during the development of the VBSN pathway. Moreover, approval from the Nevada State Board of Nursing was required to offer this pathway for the veteran students. The grant team initially met with the educational committee of the Nevada State Board of Nursing, and then with the full board for approval in the fall of 2015. All entities granted approvals before admission of the first cohort in February 2016. Overall, the VBSN pathway aligned with the structure and educational philosophies of the university.

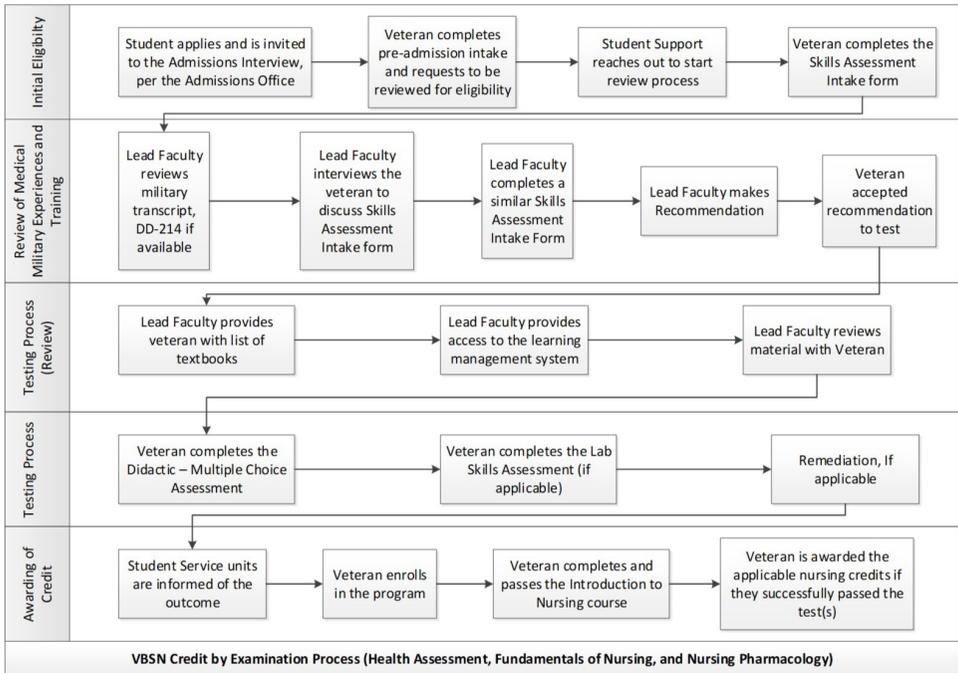
### *Creating Mechanisms to Award Nursing Credit*

Roseman University's educational model requiring all students to meet a 90% or higher score on all assessments made it challenging to determine credit-for-credit articulation. An additional challenge was the complexity of the nursing course requirements and the lack of alignment in the learning outcomes from their military experience as described by the American Council on Education's (ACE) Military Guide (ACE, 2019). Instead, the faculty developed mechanisms to award nursing credit for the VBSN students by providing an opportunity to take a credit by examination for identified courses in the BSN curriculum. The tools to test-out included: 1) an initial eligibility review, 2) lead faculty review of military medical experiences and training, 3) skills and resource review with the lead faculty, 4) the testing process, and 5) awarding of credit. The lead faculty who oversaw the mechanisms to test-out was a retired Navy nurse who had served as a Hospital Corpsman, taught at the Navy Hospital Corps school, and has 49 years of experience as a practicing nurse.

Initially, faculty identified Health Assessment, Fundamentals of Nursing (didactic), and Nursing Pharmacology as courses in which students could challenge. These are courses offered early in the nursing curriculum, with the belief that veterans with a medical background would be able to meet the required outcomes of the course based on ACE occupational descriptions (ACE, 2019). A competency assessment for each class was developed in the form of a checklist and placed in a "skills assessment intake" form to be able to validate the skills and education that

the veteran acquired during their military training. Based on the Essentials of Baccalaureate Education by the American Association of Colleges of Nursing (2008), faculty determined skills for the assessment intake. The assessment skills were the same skills required for all students to demonstrate with a minimum of 90% competency to pass the courses. (See Figure 2- Roseman VBSN Credit By Examination Process).

Figure 2.



### Initial Eligibility Review

All students who apply to the BSN programs are required to complete an in-person interview process with a member of the faculty. Additionally, the veterans received supplementary information in the form of a pre-admission intake form that addressed the requirements of the program, veteran education benefits, and eligibility requirements to test-out of the identified courses. If the veteran indicated that they met the criteria and wished to be reviewed for the credit by examination, the lead faculty member was informed. Upon admission, the lead faculty began the initial eligibility review.

Faculty supported students from diverse backgrounds and experiences through several processes. The eligibility process to complete veteran testing included meeting admission criteria, providing a skills assessment intake form, and documenting the experience and training on an official military transcript. The evidence of military training experience included a healthcare specialist rating within the past five years, a skills assessment intake form completed by the lead faculty, and an interview with the veteran to further clarify his/her experiences. At

the end of the review process, the lead faculty made a recommendation on which blocks the veteran was eligible to test.

### *Assessment Processes and Policies*

The assessment process took place before the start of classes. The veteran had access to faculty before the testing process to provide for adequate preparation. The lead faculty provided the veteran with the list of assigned textbooks and ATI products that corresponded to the eligible courses and access to the learning management system for the College of Nursing at least 30 days before the actual in-person review. An in-person analysis was provided to the veteran by the lead faculty 1-2 days before the assessment took place.

Testing in the courses consisted of a multiple-choice assessment, which included questions that met the objectives of the course as well as testing mastery level comprehension. In the blocks involving skills and specific competencies, the testing-out process required the veteran to demonstrate the associated knowledge, skills, and abilities to receive credit. The process consisted of cognitive assessments based on the blueprint identified in the course outcomes and demonstration of competency skill set in a medium to high fidelity laboratory. Using the competency-based checklist and videotaping system, the veteran had the opportunity to evaluate their performance and engage in remediation if needed. Veterans who were successful in meeting the course requirements at a 90% or higher score received credit once they were enrolled and after completing the first course in the curriculum, "Introduction to Nursing."

### *Outcomes and Lessons Learned*

As of the publication of this article, there has been a total of 55 VBSN students enrolled. Of the 55, a total of four veterans (one Army, two Air Force, and one Navy) attempted to test out of the courses, and all four were successful. Of those who tested, only one veteran attempted and passed all three classes. (See Table 1-Veterans Who Tested-out of Courses Based on Military Affiliation).

**Table 1.**

Nursing Courses	Veteran 1 (Air Force)	Veteran 2 (Army)	Veteran 3 (Air Force)	Veteran 4 (Navy)
Health Assessment		X		
Fundamentals of Nursing	X	X		X
Nursing Pharmacology		X	X	X

**Veterans Who Tested-out of Courses Based on Military Affiliation**

One of the lessons learned related to military educational benefits. Although successfully testing-out of the courses meant tuition savings for the student, it also affected their full-time enrollment status. Successful students who tested out of one course were disadvantaged due to Roseman's educational model of completing one block at a time. A consequence of the reduced total number of enrolled hours resulted in students being ineligible for enrollment in the College of Nursing during this time. The overall adverse effect resulted in a reduction in students' military housing benefits during the affected month.

### Texas Tech University Health Sciences Center School of Nursing

Texas Tech University Health Sciences Center (TTUHSC) is a public university with its main campus in Lubbock, Texas. The School of Nursing, founded in 1981, provides undergraduate and graduate nursing education programs at five regional campuses, two off-campus clinical sites, and through distance education programs. The School of Nursing has shown dramatic growth over the past 10 years, from 961 students in 2009 to over 1,900 students in 2018 (TTUHSC, 2019). Accreditations include the Southern Association for Colleges and Schools/Commission on Colleges and the Commission on Colleges of Nursing. Additionally, the School of Nursing has been recognized by the National League for Nursing as a Center of Excellence in Nursing beginning in 2014 through to 2023 (TTUHSC, 2019).

Two distinct trends in Texas propelled the mission driving the School of Nursing to develop a Veteran to Bachelor of Science in Nursing (VBSN) program. First, the growing demand for nursing graduates by Texas hospitals and second, an awareness of the difficulties veterans military medical specialists faced in securing employment in healthcare without certification or licensure. The School of Nursing had been offering an accelerated 12-month 2<sup>nd</sup> Degree BSN since 2005. The 12-month time frame of the 2<sup>nd</sup> Degree program checked several personal boxes for veteran medics, corpsmen, and airmen. Additionally, the School delivered the didactic content of the program online with multiple clinical sites located around the state, making the program highly accessible. Potential veteran applicants, though, found it discouraging that TTUHSC did not grant academic credit for military medical training and experience.

Given the expressed interest by veterans and the demand for more nursing graduates, faculty identified an opportunity to adopt the existing 2<sup>nd</sup> Degree BSN curriculum as a platform to create a VBSN option as a track within an Accelerated BSN (ABSBN) Program which also included the 2<sup>nd</sup> Degree BSN track. The 2<sup>nd</sup> Degree's summative assessments allowed for the creation of a competency-based education evaluation model exclusively for military medical specialists who desired to earn a BSN. Faculty developed the Competency Assessment Placement (CAP) Battery, which served as a cornerstone for the School of Nursing's grant application to the US Department of Health Resources and Services Administration, Nursing Education, Practice, Quality and Retention, VBSN Program. The VBSN program was funded in 2015 by the Health Resources & Services Administration (2019).

#### *Regulatory Approvals*

TTUHSC, as a public university, considered the rules and regulations of regulatory groups at both the state and federal levels as well as the regional accrediting organization. Necessary approvals involved working with a network of internal stakeholders within the university, including the School of Nursing's Associate Dean for Outcomes and Evaluation as well as TTUHSC's Registrar and the Office of Regulatory Affairs and Accreditation. The VBSN track was the first competency-based educational option offered at TTUHSC. Administrators expressed intense interest in how the program of review and approval of awarding course credit would work to ensure the plan was pedagogically sound and in compliance with the guidelines of the regional accrediting organization.

Externally, faculty notified stakeholders at the state-level to the Texas Board of Nursing (2018) and the Texas Higher Education Coordinating Board (THECB) (n.d.). However,

approvals were not needed as the VBSN track was not a new degree offering. Both agencies though respectively, have executive authority influencing state education: The Texas Board of Nursing holding state oversight over nursing curriculum and student performance, and the Coordinating Board retaining power for approval and review of state financing of schools of higher education.

An additional required approval was necessary from a central state agency, the Texas Veterans Commission, which serves as the State Approving Agency (SAA) for the US Department of Veterans Affairs (Texas Veterans Commission, 2019b). Each state's SAA serves as the gatekeeper to receiving federal GI Bill benefits. A formal application needed to be made and submitted along with holding multiple meetings with agency representatives to present and obtain final authorization for the VBSN track for students to receive VA education benefits.

Notification of the regional accrediting organization, the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC), was needed. Development of the VBSN track included developed using the majority of the previously established 2<sup>nd</sup> Degree Program curriculum. A substantive change notification was required to describe the modifications. Finally, a formal report was submitted and approved before implementing the VBSN track in compliance with the SACSCOC Substantive Change Policy Statement (2019).

### *The Competency Assessment Placement (CAP) Battery*

Working with the US Defense Health Agency's Medical Education Training Campus (METC) (2019) at Fort Sam Houston in San Antonio, faculty developed a curriculum crosswalk by comparing the learning objectives of the 2<sup>nd</sup> Degree BSN curriculum with the METC corpsman curriculum. The resulting curriculum crosswalk served as the basis to determine in which 2<sup>nd</sup> Degree courses veterans had received comparable formal training at METC. The outcome of developing the curriculum crosswalk was the verification of knowledge acquired at METC in health assessment, nursing foundations, pharmacology, and leadership and management.

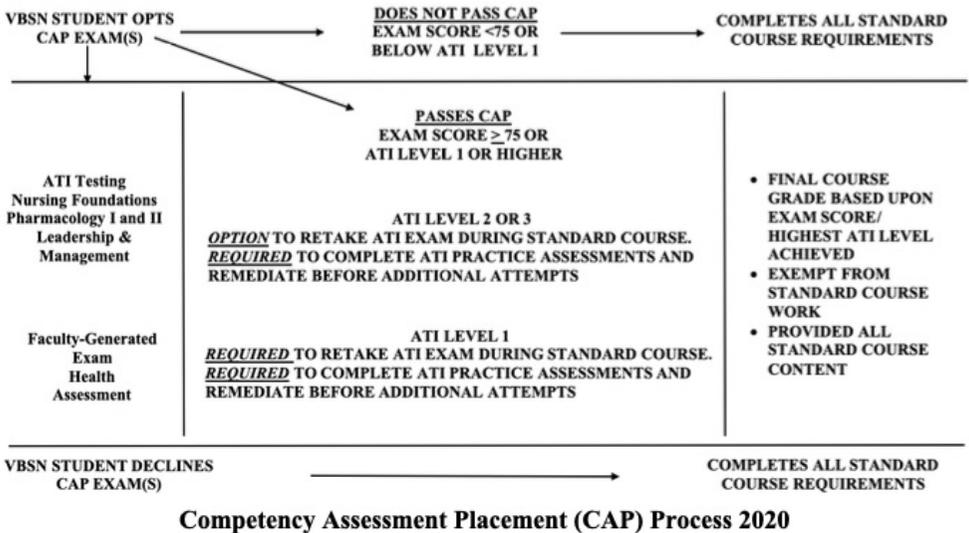
The curriculum crosswalk then served as the impetus for the development of the Competency Assessment Placement (CAP) battery. The 2<sup>nd</sup> Degree curriculum included standardized, summative assessments developed by Assessment Technologies Incorporated® (ATI) (2019a) benchmark assessments, which proved to be predictive of NCLEX-RN success. The faculty elected to adopt the ATI assessments for nursing foundations, pharmacology, and management and leadership using the recommended cut scores recommended by ATI. Achieving an ATI Level 1 indicates the absolute minimum proficiency expectations, ATI Level 2 exceeds minimum proficiency expectations, and ATI Level 3 exceeds maximum proficiency expectations for passing the NCLEX based on the content area tested (ATI, 2019b).

The testing scheme would permit VBSN students two attempts on the ATI before the start of each course. Achieving a minimum proficiency (Level 1) or higher, VBSN students received an option of academic credit rather than completing course work. As the VBSN track evolved, students were awarded a course grade based on the highest level achieved on ATI for each of the three courses. Course grades corresponded to the highest ATI levels achieved with a Level 1 equivalent to a C, a Level 2 equivalent to a B, and a Level 3 equivalent to an A. Taking a CAP test was voluntary for VBSN students. If a student took a CAP test and was

unsuccessful in achieving the minimum proficiency level, he/she was required to complete the course requirements for the corresponding standard course in the curriculum. VBSN students who were successful on a CAP test received prior learning credit for that course content but also encouraged to audit the corresponding class and encouraged to take course exams. (See Figure 3- Competency Assessment Placement (CAP) Process 2020).

Health assessment knowledge for the CAP Battery included using a faculty-generated exam as ATI did not provide a standardized assessment. If VBSN students completed the written exam with a grade of 75 or higher, they were subsequently required to demonstrate physical assessment skills competency. Physical assessment competency included completing a head-to-toe physical examination on a standardized patient and documenting the findings.

Figure 3.



### CAP Battery Findings

The initial VBSN 2016 cohort attempted CAP tests before program instruction in January. During student orientations in early December, VBSN students who desired to try one of the CAP tests received the course syllabi, ATI content mastery review modules, and access to ATI practice assessments. Additionally, students were granted access to resources within the learning management system and online library resources to review. Initially, faculty administered only health assessment, foundations, and pharmacology in early January before course instruction. Administration of the leadership CAP test was between the second and third semesters of program instruction, as the leadership course occurred during the third semester in the curriculum. After each cohort, revisions and improvements in the process of administering the CAP Battery followed. Beginning with Cohort 2018, faculty conducted all CAP testing, including the leadership CAP test, before the start of program courses in January.

Nearly 80% (79.1%; n=53/67) of all admitted VBSN students at TTUHSC attempted at least one CAP between 2016 and 2019, with 71.7% (n=38/53) successfully passing at least one CAP test in the battery. Of 38 students who attempted and were successful on at least one CAP between 2016 and 2018, only one student was unsuccessful on their first attempt on NCLEX-RN. The student subsequently passed the NCLEX-RN on a second attempt. The initial cohort in 2016 included three students who attempted health assessment, with only two being successful. The same three students also tried the foundations' test, and all were successful. Only one student attempted pharmacology and was not successful. Seven VBSN students attempted leadership and were successful. All seven 2016 VBSN students graduated and were successful on their first NCLEX-RN attempt (See Table 2- VBSN CAP Courses Attempted/Passed). Faculty observed that students who were successful in CAP tests were more likely to be successful in the ABSN Program compared to students who either did not attempt a CAP test or were unsuccessful in CAP attempts. VBSN students who were successful in CAP tests in 2019 have only recently graduated at the time of this publication and have not attempted the NCLEX-RN.

Table 2.

Year	Health Assessment		Foundations		Pharmacology		Leadership	
	#Attempted	#Passed	#Attempted	#Passed	#Attempted	#Passed	#Attempted	#Passed
2016	3	2	3	3	1	0	7	7
2017	9	2	11	9	5	3	14	7
2018	14	0	16	8	11	4	17	6
2019	12	0	12	11	11	6	15	13
<b>Subtotal</b>	<b>38</b>	<b>4</b>	<b>42</b>	<b>31</b>	<b>28</b>	<b>13</b>	<b>53</b>	<b>33</b>
<b>Pass Rate</b>	<b>10.53%</b>		<b>73.81%</b>		<b>46.43%</b>		<b>62.26%</b>	

**VBSN CAP Courses Attempted/Passed**

### Summary & Conclusion

In summary, the policies and processes to award academic credit to veteran nursing students based on military medical training and experience was implemented successfully by all three schools of nursing. Each school executed varying approaches to achieve the goals of the nursing programs. Challenges encountered included securing approvals by state boards of nursing and other regulatory organizations, understanding the ACE processes, and interpreting military transcripts. Student concerns included determining the impact on financial aid packages explicitly related to military housing benefits and inadequate prerequisite preparation. Common mechanisms used to award credit by the three schools encompassed the use of standardized testing, the creation of competency assessments for the selected nursing courses, and veteran student access to faculty and resources/study guides before the testing-out process.

Nationally, there is a priority to develop processes that allow for ease of access to higher education, including the awarding of credit for prior learning, thereby reducing the time needed to achieve a degree and to recognize the past learning experiences of students (Poisel & Joseph, 2018). The establishment of the policies by the three schools of nursing, as discussed in this article, allows for the awarding of academic credit for veterans, thereby supporting this national agenda. Moreover, as demonstrated, the schools of nursing were successful in meeting similar goals of all the programs. Goals achieved included meeting the course requirements in evaluated courses for credit, successful progression through the curriculum, and ultimately graduating and passing the national licensure exam (NCLEX-RN).

As Kirchner (2015) asserts, over the next several years, universities should expect an increased number of veterans to enroll in higher education. Universities need to be prepared to assist this unique population of students. By implementing procedures and policies that support credit for prior learning experiences for veteran students, this will aid these students in achieving their goals of becoming registered nurses and being employed in a profession of high demand. Overall, these three schools of nursing allow the opportunity for the validation of the veterans' past experiences and knowledge that can result in the awarding of academic credit, thus promoting the health and healing of veterans and facilitating their goals of becoming professional registered nurses. Additionally, by supporting the veteran students in pursuing their academic degrees, this led to an increase in the diversity of the student population, and the programs benefited from the many educational and leadership strengths veteran students possess.

---

## References

- American Association of Colleges of Nursing. (2008). The essentials of baccalaureate education for professional nursing practice. Retrieved from <https://www.aacnursing.org/Education-Resources/AACN-Essentials>
- American Association of Colleges of Nursing. (2020). Nursing shortage. Retrieved from <https://www.aacnursing.org/News-Information/Fact-Sheets/Nursing-Shortage>
- American Council on Education. (2019). Guide to the evaluation of educational experiences in the armed services. Retrieved from <https://www.acenet.edu/news-room/Pages/Military-Guide-Online.aspx>
- Assessment Technologies Incorporated\* (ATI). (2019a). About us. ATI by the numbers. Retrieved from <https://www.atitesting.com/educator/about/by-the-numbers>
- Assessment Technologies Incorporated\* (ATI). (2019b). RN content mastery series 2019 proficiency levels. Retrieved from <https://sitefinity.atitesting.com/docs/default-source/assessments/rn-cms-2019/tn-2019-cms-proctored-proficiency-levels.pdf?sfvrsn=2>
- Community College of the Air Force Transcripts. (2019). Retrieved from <https://www.airuniversity.af.edu/Barnes/CCAF/Display/Article/803247/community-college-of-the-air-force-transcripts/>
- Giardello, K., & Appel, S. (2019). Impacting student veteran success through military credit articulation. A regional model for progress. *Journal of Military Learning*, 3(1), 47-59.
- Health Education System Incorporated (HESI). (2020). HESI for nursing. Retrieved from <https://evolve.elsevier.com/education/nursing-review-and-testing/>
- Health Resources & Services Administration (HRSA). (2019). Funding opportunities: Nurse Education, Practice, Quality, and Retention (NEPQR) Program - Veteran's Bachelor of Science Degree in Nursing. Retrieved from <https://bhwh.hrsa.gov/fundingopportunities/default.aspx?id=b72536b5-6cde-41dd-9fca-93fcfd6f7d>
- Joint Services Transcript. (n.d.). Joint services transcript FAQ. Retrieved from <https://jst.doded.mil/faq.html>
- Kirchner, M. (2015). Supporting student veteran transition to college and academic success. *Adult Learning*, 26(3), 116-123.
- Lipsky, M., Cone, C., Watson, S., Lawrence, P., & Lutfiyya, M. (2019). Mastery learning in a bachelor's of nursing program: The Roseman University of Health Sciences experience. *BioMed Central*, 18(52), 1-9.
- Medical Education and Training Campus. (METC). (2019). Retrieved from <https://www.metc.mil/>

## Articles

---

- Poisel, MA, & Joseph, S. (Ed.). (2018). *Building transfer student pathways for college and career success*. Columbia, SC: University of South Carolina, National Resource Center for The First Year Experience and Students in Transition and the National Institute for the Study of Transfer Students.
- Roseman University of Health Sciences (n.d.). Retrieved from <https://www.roseman.edu/about-roseman-university/six-point-mastery-learning-model/>
- Snyder, C.R., Wick, K.H., Skillman, S.M., & Frogner, B.K. (2016, May). Pathways for military veterans to enter healthcare careers. Center for Health Workforce Studies, University of Washington. Retrieved from [https://depts.washington.edu/fammed/chws/wp-content/uploads/sites/5/2016/05/Pathways\\_for\\_Military\\_Veterans\\_FR\\_2016\\_May\\_Snyder.pdf](https://depts.washington.edu/fammed/chws/wp-content/uploads/sites/5/2016/05/Pathways_for_Military_Veterans_FR_2016_May_Snyder.pdf)
- Southern Association of Colleges and Schools Commission on Colleges. (2019). Substantive change for SACSCOC accredited institutions: Policy statement. Retrieved from <http://www.sacscoc.org/pdf/081705/SubstantiveChange.pdf>
- Texas A&M University-Corpus Christi. (2019). A brief history. Retrieved from <https://www.tamucc.edu/about/history.html>
- Texas A&M University-Corpus Christi, College of Nursing & Health Sciences. (2019). College of nursing and health sciences faculty handbook. Retrieved from <http://conhs.tamucc.edu/faculty-staff/assets/facultyhandbook-10-11-19.pdf>
- Texas Board of Nursing. (2018). Retrieved from <https://www.bon.texas.gov/>
- Texas Higher Education Coordinating Board. (n.d.). Public universities and health-related institutions. Retrieved from <http://www.theccb.state.tx.us/institutional-resources-programs/public-universities-health-related-institutions/>
- Texas Tech University Health Sciences Center Factbook. (2019). Retrieved from <https://www.ttuhscc.edu/about/documents/factbook/2019.pdf>
- Texas Veterans Commission. (2019a). Hazlewood act. Retrieved from <https://www.tvc.texas.gov/education/hazlewood-act/>
- Texas Veterans Commission. (2019b). School approval: Apply to train veterans. Retrieved from <https://www.tvc.texas.gov/education/school-approval/>
- US Department of Veterans Affairs. (2018a). Department of veterans affairs statistics at a glance. Retrieved from [https://www.va.gov/vetdata/docs/Quickfacts/Stats\\_at\\_a\\_glance\\_6\\_30\\_18.PDF](https://www.va.gov/vetdata/docs/Quickfacts/Stats_at_a_glance_6_30_18.PDF)
- US Department of Veterans Affairs. (2018b). The military to civilian transition 2018: A review of historical, current, and future trends. Retrieved from <https://www.benefits.va.gov/TAP/docs/mct-report-2018.pdf>