

WEST VIRGINIA  
BOARD OF REGISTERED NURSES

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# STATE OF NURSING EDUCATION REPORT

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BASED ON THE NCLEX-RN  
PRE-LICENSURE NURSE  
EDUCATION PROGRAM  
SURVEY



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**2025**  
EDITION

**NURSING EDUCATION REPORT**

**EXECUTIVE  
SUMMARY**

West Virginia (WV) NCLEX-RN pre-licensure nurse education programs continue to increase to meet WV registered nurse practice needs.

In August 2018 there were 43 total programs (18 baccalaureate and 25 associate) compared to August 31, 2025, when there were 82 total programs (26 baccalaureate, 56 associate and 1 diploma), a 96.69% change increase in Board approved prelicensure registered nurse education programs in 7 years. The annual NCLEX-RN pre-licensure nurse education programs survey was sent to 82 programs on August 1, 2025. A total of 27 WV higher education schools with 82 nurse education NCLEX-RN programs participated in the online 2025 West Virginia pre-licensure NCLEX-RN annual survey. The response rate was 100%.

The following needs were identified:

- Need more graduate-prepared faculty.
- Need more hybrid LPN-BSN, hybrid second degree BA-BS to BSN programs, and accelerated hybrid BSN programs.
- Need more program administrator and faculty development.
- Need more certified simulation faculty.
- Need more accredited simulation labs and centers.
- Need innovation in student recruitment, remediation and retention initiatives.

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## PURPOSE AND METHODOLOGY

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The purpose of this survey is to collect annual report data from all West Virginia pre-licensure NCLEX-RN nurse education programs. It provides an overview of the current state of NLCEX-RN nursing education in the state and offers valuable insights into trends for nursing workforce stakeholders.

The survey was constructed from statistically identified quality indicators and warning signs based on results of a large mixed-method research study of US prelicensure nursing programs conducted by the National Council of State Boards of Nursing, which included an integrative literature review; a national Delphi study with educators, regulators and those who practice with new graduates; a five-year quantitative study of NRB Annual Report data; and a five-year qualitative study of NRB site visit documents.

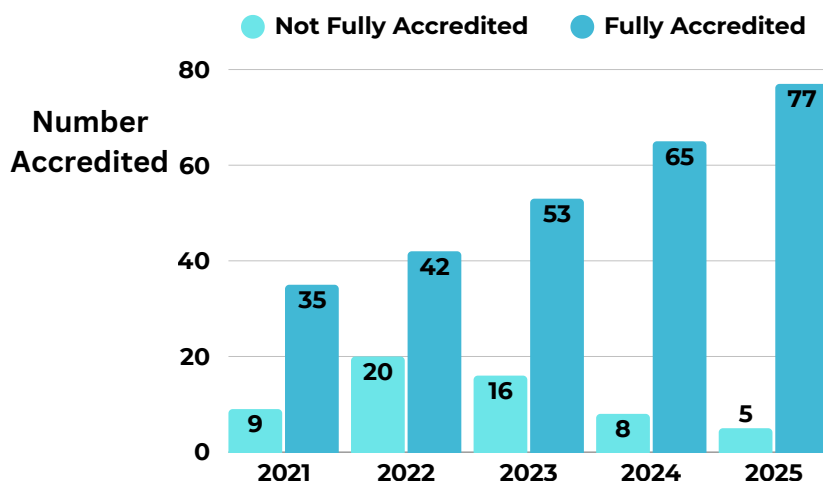
The survey was administered using Qualtrics software (Qualtrics, Provo, UT). The WV RN Board distributed the survey link to each of its prelicensure nursing programs for completion. Each nursing program was allowed 30 days to complete the survey. After all nursing programs submitted their surveys the survey was closed. NCSBN reviewed and verified the data and compiled an aggregate report of this data.



# PROGRAM DEMOGRAPHICS

During the 2024-2025 academic year, 94% (N=77) of WV NCLEX-RN nursing programs were nationally accredited and 6% (N=5) were non-nationally accredited.

## Accreditation status trend

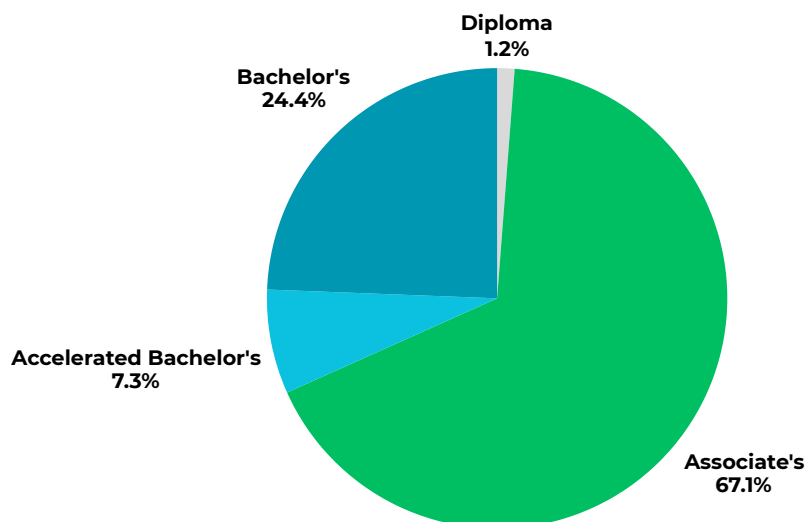


All 5 of the non-nationally accredited programs were younger than 7 years. Regulatory guidelines and evidence-based quality indicators for nursing education report programs younger than 7 years as high risk programs that may need additional oversight (Spector et. al., 2020). The West Virginia Board of Registered Nurses oversees new NCLEX-RN nursing education programs pursuant to its legislative mandates. This helps ensure that West Virginia's new NCLEX-RN nursing programs are monitored and guided while they are in the process of obtaining national accreditation. The locations of nursing education programs show that a plurality of programs are located in rural areas 44% (N=36), followed by suburban 33% (N=27), and rural 23% (N=19). Geographic location is a self-identified variable by individual institutional respondents.

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## PROGRAM DEMOGRAPHICS

Most nursing programs in West Virginia are public institutions (55%; N=45), followed by private for-profit (26%; N=21), and private not-for-profit institutions (20%; N=16). The types of programs vary, most 67% (N=55) are associate degree granting institutions, 32% (N=26) are baccalaureate degree granting institutions and 1% (N=1) is a diploma program. Nationally, The Robert Wood Johnson Foundation through its Future of Nursing reports has set national goals of increasing the amount of BSN nurses across the country. Increasing hybrid LPN-BSN, hybrid second degree BA-BS to BSN and accelerated hybrid BSN programs for West Virginia promotes enhanced flexibility and choice for students and aids West Virginia in contributing to increased BSN nurses to meet workforce needs across the healthcare spectrum.

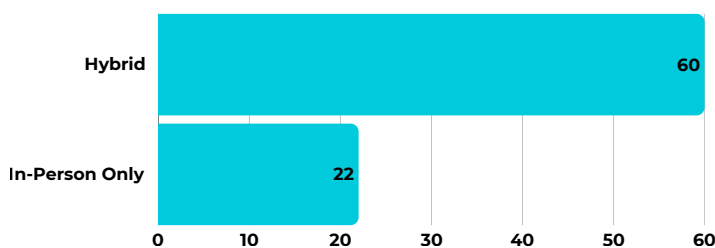


Slightly more than a third or 35% (N=29) of West Virginia prelicensure NCLEX-RN nurse education programs report experiencing major organizational changes within the past year. The reported changes included new university leaders, new directors, economic efficiencies/budget reductions, a staff layoff, and collapsing programs.

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## CURRICULUM AND THE CLASSROOM

A majority of programs (73.2 %; N=60,) indicate their students are engaged in hybrid learning experiences compared to (26.8 %, N=22) that use in person learning only. Hybrid is defined as a program that combines elements of online learning and traditional in-person learning.



Most program's academic year schedules are divided into two session semesters (71%; N=58), followed by quarter sessions (15%; N=12), trimesters (12%; N=10), and other schedules (2%; N=2). Those responding as "other" utilized time block scheduling.

The majority of programs (98%, N = 81) offer simulation clinical techniques in their programs. Simulation is defined as a technique creating a situation or environment allowing persons to experience a representation of a real event for the purpose of practice, learning, evaluation, testing, or gaining an understanding of systems or human actions (Lioce et al., 2020).

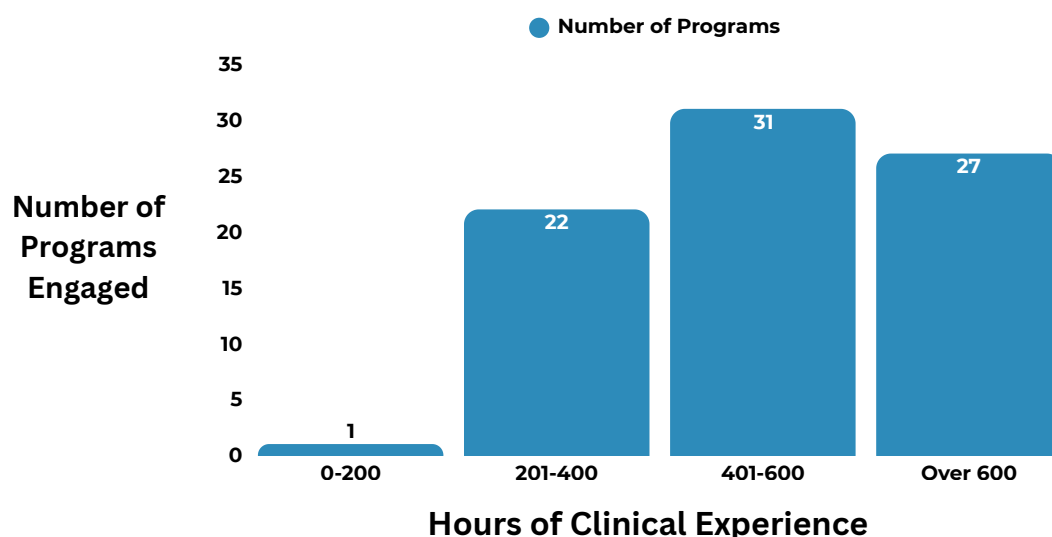
Only 25%(N=20) of West Virginia programs have faculty certified in healthcare simulation education by the Society for Simulation in Healthcare (SSH) or who have completed the International Nursing Association for Clinical Simulation and Learning (INACSL) 12-course INACSL Simulation Education Program (ISEP). Even fewer programs, 2% (N=2) report accredited simulation labs by SSH or that they have Healthcare Simulation Standards Endorsement from the International Nursing Association for Clinical Simulation and Learning (INACSL). Since 99% (N=81) or most West Virginia prelicensure nurse education programs now use simulated clinical techniques, increasing healthcare simulation certified faculty, accrediting healthcare simulation labs and using healthcare simulation standards promotes quality healthcare education.

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## CURRICULUM AND THE CLASSROOM

The largest percentage of programs 38%; (N=31) indicate their students are engaged in clinical experiences providing direct patient care between 401-600 hours. The mean direct patient care hours required by programs was 535 hours, up from 513 the previous year.

### Programs Engaged in Clinical Experiences by Hours



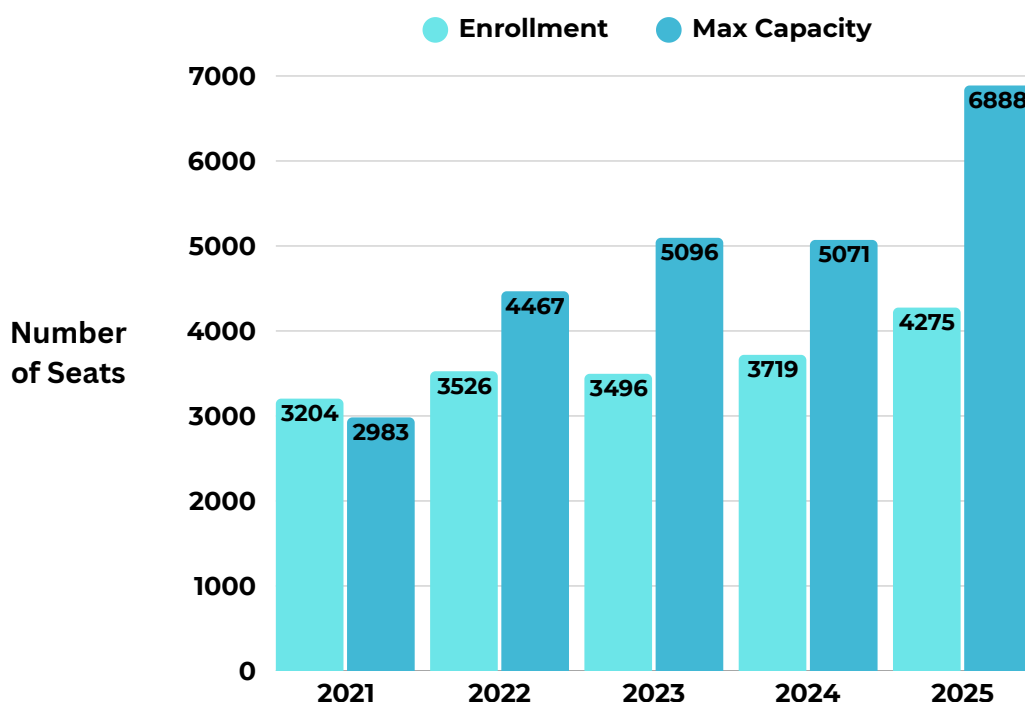
Student-to-faculty ratios for both didactic and clinical courses varied among programs. A majority of programs indicate their didactic courses had 16-30 students per faculty (53.6%; N=44), followed by over 30 students to faculty 22% N=18 and 0-15 students per faculty (20.7%; N=17). Overall, the median didactic faculty to nurse ratio was 23.8. Clinical faculty to student ratios ranged from 5 to 10 students per faculty member. Overall, the median clinical faculty to student ratio was 8.

All (100%) (N=82) of West Virginia prelicensure NCLEX-RN programs report having a systematic evaluation plan in place for curriculum. Curriculum evaluation includes creating a systematic process of measurable outcomes based on standards and best-practice evidence, data collection at planned intervals, reporting of findings, and analysis for maintenance or needed changes to improve or exceed outcomes.

# STUDENT DEMOGRAPHICS

4,275 SEATS FILLED  
6,888 SEAT CAPACITY

### Enrollment vs Capacity

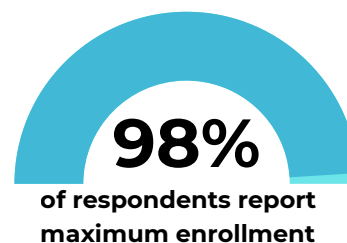


The total number of students reported by responding programs as enrolled across all WV pre-licensure programs at the beginning of the 2024-2025 academic year was 4,275. Due to the timing of this survey, the total enrollment figure may not capture the total number of students for their fall term. Data collected in subsequent years will capture total enrollment for programs who had not yet finished their admissions process at the time of this survey.

Statewide, the maximum enrollment capacity reported across all pre-licensure registered nursing programs in the state is 6,888. A total of 2 of 82 programs report they do not have a maximum enrollment capacity. Those programs without maximum enrollment are not included in the total for maximum enrollment. The difference across all WV pre-licensure NCLEX-RN programs between maximum enrollment capacity and student enrollment numbers is 2,613 unfilled seats.

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## STUDENT DEMOGRAPHICS



Further analysis of student enrollment and maximum capacity data revealed limits on generalization. For instance, the total enrollment data numbers for this study included entering cohort data plus seats for students who are enrolled at different levels within nursing as well as graduates throughout an academic year thus the unfilled seat number can be inflated or deflated depending on the timing of the respondent report. Additional limits on generalizations of enrollment and capacity data identified included new programs admission implementation not yet started and old programs voluntary ceasing without closing the programs as follows:

Six ADN programs (3 new programs had not yet started enrolling students and 3 established programs had not yet started admitting students because they only admit annually in the spring), and 1 new BSN program had not yet started enrolling students, all reported 0 student enrollment. This was most likely the result of the timing of this survey before the programs had completed admissions processes.

Two ADN programs voluntarily stopped admissions in previous years but have not yet restarted admissions. These two programs reported 0 student enrollment.

The average age of a student enrolled across respondents during the 2024-2025 academic year ranged from 18 to 37, with one outlier of 52. The average age of enrolled students among all programs is 27 years old.

The racial composition of students, much like the larger licensed nurse population, is primarily Caucasian or White (88.9%, N=3,797), followed by African American or Black (5.2%, N=222), Multi Racial (2.7%, N=116), Other (1.7%, N=74), Asian (1.1%, N=48), American Indian or Alaska Native (0.2%, N=9), and Native Hawaiian or Other Pacific Islander (0.2%, N=7).

Ethnically, most students are not Hispanic, Latino, or Spanish in origin (96.8%; N=3,674). With regards to gender most students are female (85.3%; N=3,685), followed by male (14.6%; N=633) and other (0.07%; N=3).

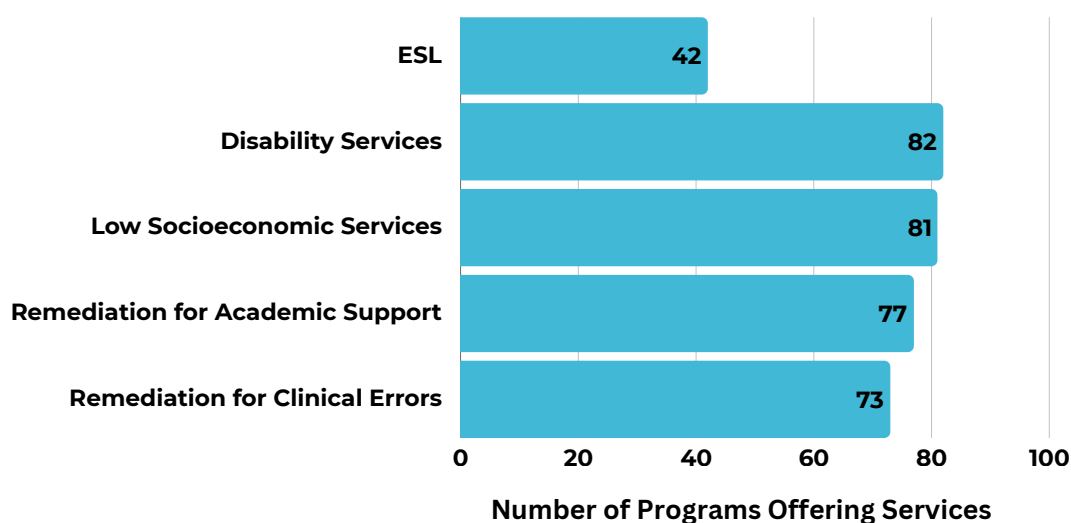
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# STUDENT DEMOGRAPHICS

The total number of students who started in the last graduating cohort among all pre-licensure registered nursing programs is 1,580. The percentage of students who graduated on time from programs ranged from 40% to 100%.

Students at nursing programs in West Virginia are eligible for a wide variety of support services to facilitate learning and academic success. ESL services, which include services for nonnative English speakers to allow students to practice reading, listening, speaking and writing in English, are offered at 51% (N=42) of programs. Disability services, which include making reasonable accommodations for students who qualify under the Americans Disability Act, are offered at 100% (N=82) of programs. Low socioeconomic student programs, which include access to services like peer monitoring, tuition assistance, work-study programs, books, etc., are offered at 99% (N=81) of programs.

## Available Support Services



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# STUDENT DEMOGRAPHICS

**Formal remediation for academic support is offered at most programs 94% (N=77). One West Virginia higher-education institution with 5 prelicensure NCLEX-RN associate degree programs (7%, N=5) reported no formal remediation for students needing academic support. Evidence-based innovative formal remediation actions to promote student academic success and retention contributes to increasing graduates for the West Virginia registered nurse workforce.**

**Formal remediation processes for clinical experiences for students are offered at 89% (N=73) of programs. Four different West Virginia higher-education institutions with 9 prelicensure NCLEX-RN associate degree programs (11%, N=9) have no formal remediation processes (i.e. policies and procedures to track errors and near misses in student clinical experiences or actions taken to make system/educational improvements). Evidence-based formal remediation actions for student clinical experience contributes to safe practice and quality care.**

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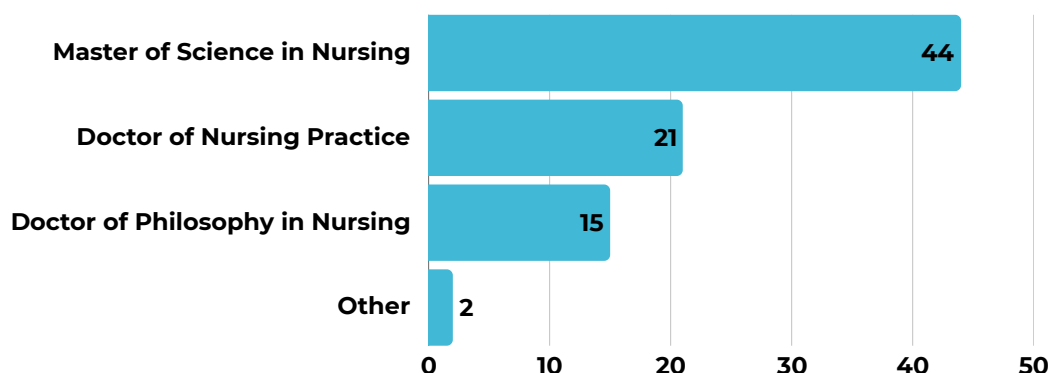
## FACULTY DEMOGRAPHICS

The number of full-time faculty across all WV programs is 348. Additionally, there are 246 clinical adjunct faculty and 178 part-time faculty, for a total of 756 nursing faculty working at nursing programs in West Virginia.

The percentage of full-time faculty in nursing programs ranged from 4.47% to 100%. Regulatory guidelines and evidence-based quality indicators for nursing education identify pre-license registered nurse education programs with less than 35% full-time faculty as a warning sign for program quality (Spector, et al., 2020). There were 33 programs reporting less than 35% full-time faculty during the year. Increasing graduate prepared faculty for West Virginia prelicensure nurse education programs is essential to program quality and success to supply nurses to the West Virginia workforce.

When respondents were asked about the highest nursing degrees obtained by their nursing directors, most responded to the Master of Science in Nursing (53.7%; N=44).

### Highest Degree of Director



There were 35.4% (N=29) of nursing directors surveyed who also had degrees outside of nursing. Of those with non-nursing degrees, the most common was a baccalaureate degree (N=13), followed by other master's degree (N=9), associate degree (N=2), doctor of education degree (N=2), master of education degrees (N=3) and other master's degree (N=1).

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## FACULTY DEMOGRAPHICS

Nursing program director changes reported in the past 5 years ranged from 1 to 6 changes. Only 3 programs out of 82 reported they had more than 3 directors in less than 5 years. One associate degree program reported they had 6 directors in 5 years and 1 school with 2 prelicensure baccalaureate degree programs, reported they had 4 directors in 5 years. Regulatory guidelines and evidence-based quality indicators for nursing education identify programs with more than 3 directors within 5 years as warning signs for program quality (Spector et al., 2020).

Only 12% (N=10) of programs reported their nursing director had administrative responsibility for allied health professions, an increase of 1 (one) from last year's N=9 reporting the same. Most programs 74% (N=61) reported they do not have an assistant or associate program director. A majority of programs 89% (N=73) reported they had dedicated administrative support for general office management such as answering phones, clerical work and a variety of other tasks.

Formal orientation and mentoring were offered by 100% (N=82) of programs for full-time faculty. Formal orientation was offered for new part-time faculty by 99% (N=81) of programs.

Faculty development support was provided by 93% (N=76) of programs. Support included money, substantive periodic workshops, and other support (i.e. tuition reimbursement, grants, continuing education courses, simulation education, and subscriptions). Program administrator and faculty support is essential to nurse education programs to improve instruction quality, develop new administrators and faculty, bolster educator qualifications with evolving instructional, technological and healthcare practices, and enhancement of program and student outcomes.

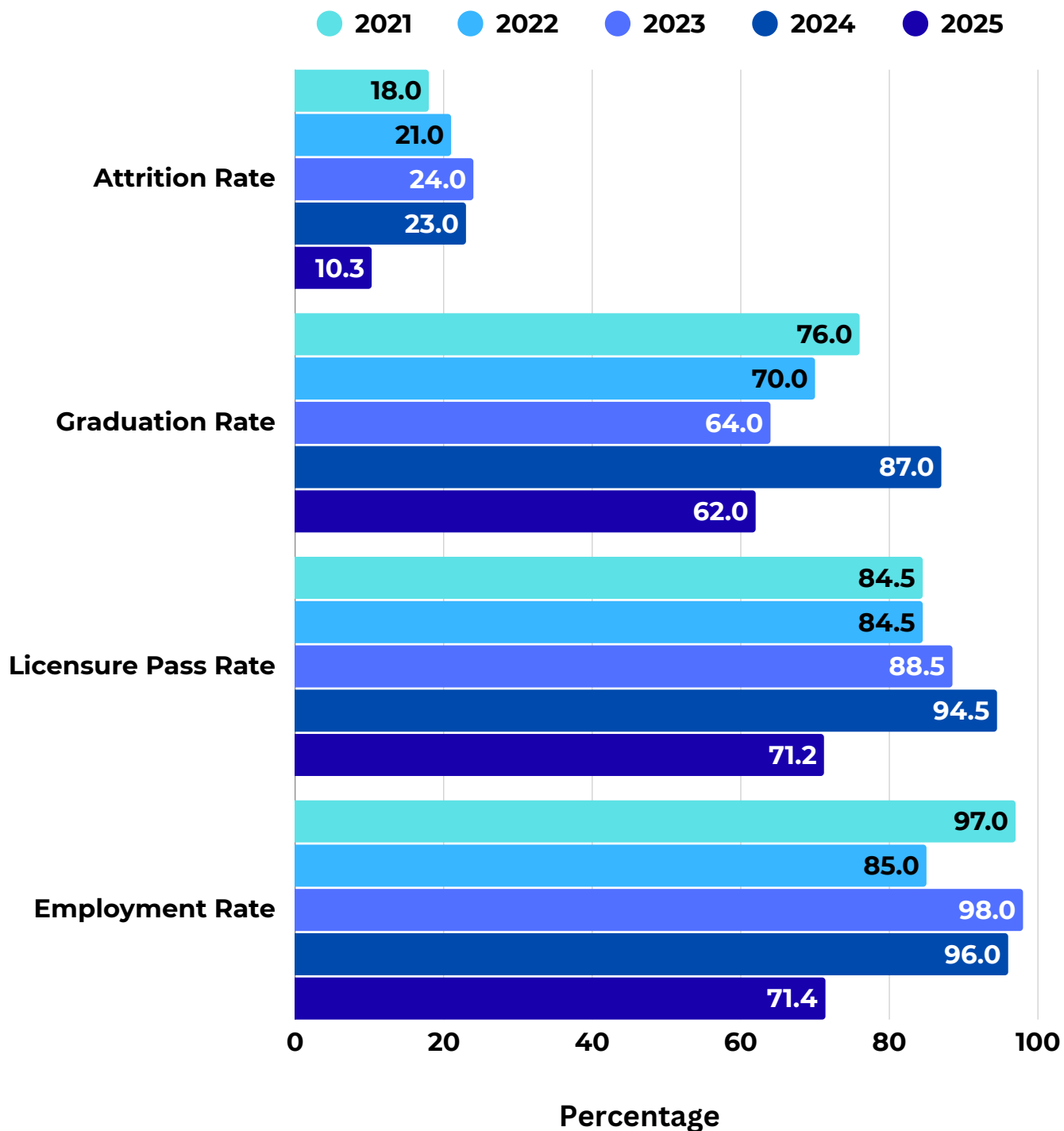
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## NURSING PROGRAM OUTCOMES

Program outcomes among respondents across all programs varied per W.Va. code of legislative rule 19-01.

- The calendar year 2024 licensure pass rates varied from 46% to 100%. The Board standard for licensure pass rate is 80% or higher for first time test takers of total first-time test takers in a calendar year. Twenty one, or 25.6% of WV NCLEX-RN programs had licensure pass rates below 80%. The mean licensure pass rate was 71.2%. The median was 90.5%.
- The calendar year 2024 graduation rates varied from 0% to 100%. The Board standard for graduation rate is 70% or higher for total graduates who complete the NCLEX-RN program in a calendar year. Thirty five, or 42.7% of WV NCLEX-RN programs reported graduation rates less than 70%. The mean graduation rate was 62%. The median graduation rate was 73.5%.
- The calendar year 2024 attrition rates varied ranging from 0% to 52%. The Board standard for attrition rate is 50% or less for students who leave the program in a calendar year. One, or 1.4% of WV NCLEX-RN programs reported attrition rates > than 50%. The mean attrition rate was 10.2%. The median attrition rate was 5%.
- The calendar year 2024 employment rates for graduates varied, ranging from 0% to 100%. The Board standard for employment rate is 80% or greater for students who complete the program in a calendar year. Twenty six, or 31.7% of WV NCLEX-RN programs reported employment rates less than 80%. The mean employment rate was 71.4%. The median employment rate was 100%.

### Nursing Program Outcomes



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## KEY QUALITY INDICATORS

**When reviewing the results of this survey against key quality indicators, nursing programs in WV are not meeting the standards.**

**The following is a list of summary percentages across all programs not meeting the published key quality regulatory guidelines (Spector et. al. 2020)**

**6.1% of nursing programs in WV are not accredited.**

**6.1% of nursing programs in WV do not have full approval.**

**35.4% of nursing programs in WV have experienced major organizational changes.**

**3.7% of nursing programs in WV had nursing director turnover greater than 3 in the last 5 years.**

**2.4% of nursing programs in WV reported that students spent less than 50% of their time experiencing direct patient care.**

**40.2% of nursing programs in WV had less than 35% full-time faculty.**

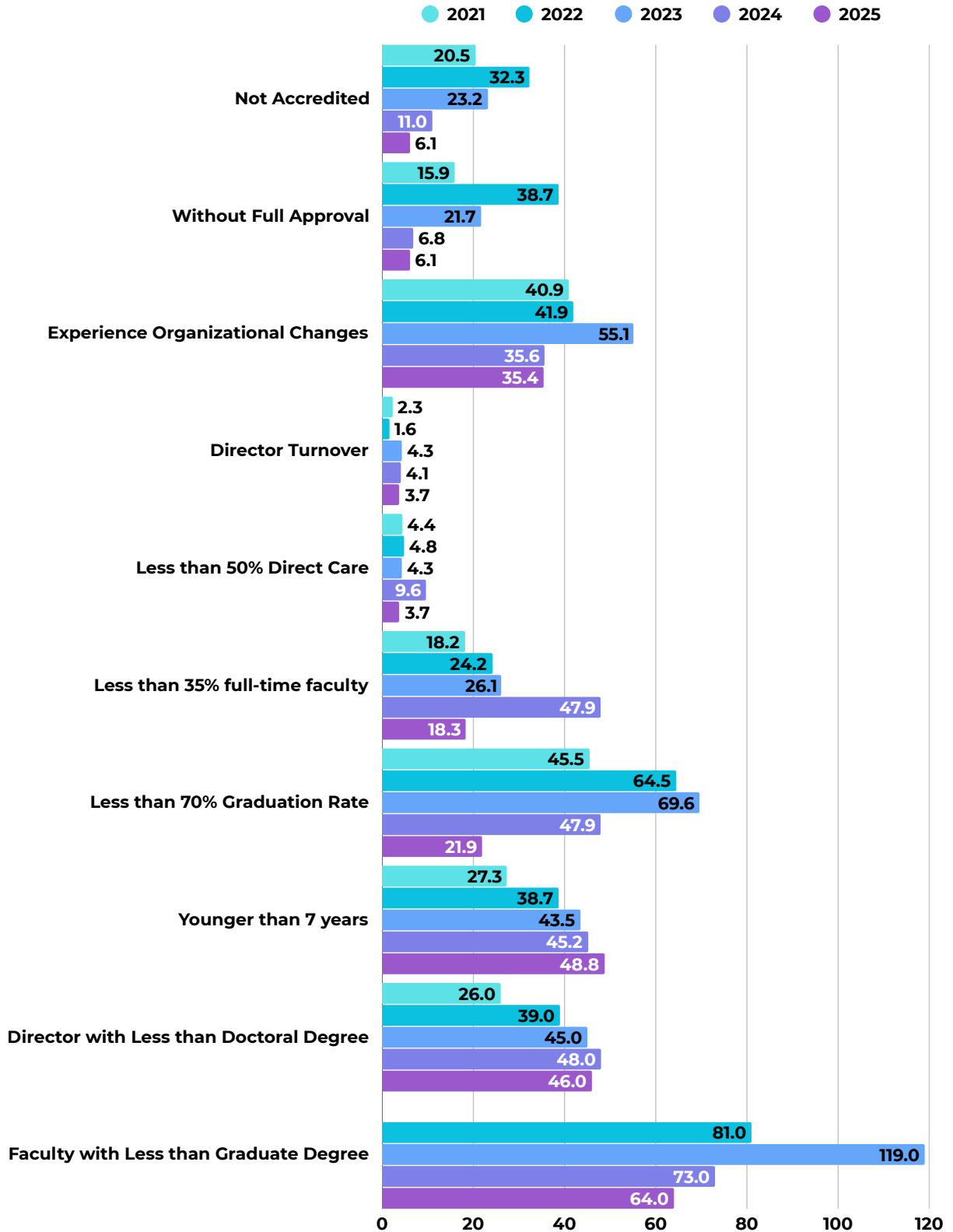
**42.7% of nursing programs in WV had a graduation rate of less than 70%.**

**51.2% of nursing programs in WV were younger than 7 years old.**

**53.7% of nursing programs in WV had RN program director with less than a doctoral degree.**

**51.2% of nursing programs in WV had FT faculty with less than a graduate degree in nursing.**

Key performance indicators



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## CONCLUSION

**West Virginia prelicensure NCLEX-RN programs have nearly doubled over the past 7 years to increase graduates to meet West Virginia's registered nurse workforce demands. This rapid growth has precipitated a critical demand for qualified administrators and faculty. A majority of WV NCLEX-RN programs have administrators without doctoral degrees and a majority were unable to hire fulltime faculty with a graduate degree. Program administrator and faculty development is essential to quality nurse education programs to educate West Virginia's registered nurse workforce. More program administrator and faculty development, recruitment, remediation and retention initiatives are needed.**

## REFERENCES

**Lioce, L., Lopreiato, J., Downing, D., Chang, T. P., Robertson, J. M., Anderson, M. ... & Terminology and Concepts Working Group. (2020). Healthcare simulation dictionary. Rockville, MD: Agency for Healthcare Research and Quality, 2020, 20-0019.**

**Spector, N., Silvestre, J., Alexander, M., Martin, B., Hooper, J.I., Squires, A., & Ojemeni, M. (2020). NCSBN regulatory guidelines and evidence-based quality indicators for nursing education programs. Journal of Nursing Regulation, 11(2), S1-S64. [https://www.ncsbn.org/Spector\\_NCSBN\\_Regulatory\\_Guidelines\\_and\\_Evidence-Based\\_Quality\\_Indicators\\_for\\_Nursing\\_education\\_programs.pdf](https://www.ncsbn.org/Spector_NCSBN_Regulatory_Guidelines_and_Evidence-Based_Quality_Indicators_for_Nursing_education_programs.pdf)**