

ncas

nursing
community
assessment
service



BC Care Aide &
Community Health
Worker Registry



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NURSING COMMUNITY ASSESSMENT SERVICE (NCAS) PROJECT

The BC Ministry of Health is supporting B.C. nursing regulators in planning and piloting NCAS, a competency-based assessment service covering these nursing community stakeholders:

- Health Care Assistants (HCAs)
- Licensed Practical Nurses (LPNs)
- Registered Nurses (RNs)
- Registered Psychiatric Nurses (RPNs).

The service will provide a streamlined approach assisting Internationally Educated Practitioners (IEP's) to integrate into B.C.'s health workplace, enhancing the Province's capacity to build and maintain a safe, competent and adequately resourced nursing workforce.

As was overviewed in our first issue of NCAS News, Phase 1, the **Planning** phase is now complete and we are well underway with Phase 2, **Building**. Over the past 4 months subject matter experts from the nursing community and consultants from the Development Team have been hard at work developing competency-based assessment tools. Members of the Project Team have also been working with the three Regulatory bodies and the BC Care Aide Registry supporting the development of business processes to implement NCAS. Here's what they've been doing:

1 Computer-Based Assessment (CBA)

March was a pivotal period in the development of the computer-based assessment tools. Over 100 cases and 600 questions were developed for all four roles between January and March. This simulation-style tool uses authentic, contextualized

situations and scenarios that typically face entry-to-practice nurses.

The CBA assessment is focused on the concept of unfolding cases that take the candidate step-by-step through the process of clinical thinking and decision making, providing a bridge between theory and clinical practice and allowing candidates to showcase what they've learned and experienced through clinical reasoning and decision-making skills. It is not about passing or failing a candidate but rather identifying gaps in their knowledge.

“This experience of developing case scenarios has allowed me to consolidate what I do as an educator and practitioner, really bringing to light how 'entry-to-practice' needs to be demonstrated. This has helped me solidify education goals for students and what we do in practice.”

Anna Helewka
item writer for the RPN team

Twenty subject matters experts (SMEs)—five from each nursing community, representing both practice and academia—developed scenarios and questions, commonly found in practice. SMEs went through a rigorous three-day training session under the guidance of a psychometrician. The training provided an overview of the blueprint, writing unfolding cases and multiple choice and multiple select questions using an online platform called MEASURE (by Yardstick).

All questions involve several review points. The rigor embedded into the development of the unfolding scenarios and questions is critical to ensuring the reliability of the assessment process in identifying candidates' learning needs and facilitating their transition into Canadian practice.

2 Simulation Lab Assessment (SLA)

Design

Each of the nursing roles will be assessed independently in the Simulation Lab Assessment. The LPN and RN roles will be assessed using a dual rubric for triage purposes. For example LPN applicants will be assessed for both LPN and HCA competencies. There are three components to the simulation lab assessment: simulation using interactive mannequins, simulation using standardized patients and a Clinical Decision Making Oral Assessment. The Computer Based Assessment Tools and the Simulation Lab Assessment Tools will be field-tested with new graduates in May to determine equivalency with new B.C. graduates. Validation of the scenarios by additional subject matter experts from each role will take place in June. Candidates will be assessed at four stations per role. Each station will take 20 - 45 minutes to complete depending on the role. Each station will be followed by a clinical decision-making oral assessment which will take 10 - 15 minutes and will be conducted by the assessor.

Simulation Using Interactive Mannequins

The simulation will include the use of hi-fidelity interactive mannequins in 8 of the 16 scenarios. These patient simulators will be programmed to have different medical conditions with corresponding vital sign changes, varying heart and lung sounds and pulses, and can respond to simulated medications.

Simulation will be used to determine a candidate's capacity to conduct patient assessments, perform nursing interventions, communicate effectively with patients and make clinical decisions while in an environment in which a mistake will not harm a patient. Additional equipment such as IV pumps,

EKG monitors, medication carts, crash carts, and isolation carts will be used to create a realistic, simulated healthcare environment. The labs are equipped with audio-visual equipment which includes the capacity to videotape the interactions.

Simulation Using Standardized Patients

Standardized patients will be used in all of the scenarios: they will take on the role of patients in face to face interactions with the candidate and they will take on the role of the patient's voice in the scenarios using mannequins.

Clinical Decision Making Oral Assessment

The oral assessment will take place at the end of each scenario. It will use a structured format that will be designed to measure critical thinking and clinical judgment competencies, and the candidate's thought processes that influenced his/her actions in the simulation.

“The NCAS project is a dynamic, thought provoking experiential learning process for all involved. The uniqueness of the project has allowed those involved to push past what is known in the literature and best practice – a great experience! The goal to develop competency assessment tools, including high stakes simulation testing for four nursing professions not only supports the NCAS project but also demonstrates the keen collaborative spirit the nursing community in this Province possesses.”

Connie Evans
member RN SIM Lab Team

3 NCAS Working Group

A NCAS Working Group made up of operational leaders from the four nursing regulators and BC Care Aide Registry partners has been formed. This group is focused on supporting the building of the assessment tools and enabling the launching of the NCAS for IEPs pilot. This group is also responsible for the 'readiness' of their organizations to implement the pilot.

“This group’s support to the various contractors, to each other and their commitment to making this project a success is evident in each and every meeting. We have accomplished a lot in a short period of time, and the momentum continues...”

Sara Telfer
Chair Working Group
Deputy Registrar/Director,
Regulatory Services. CPLNBC

SIM LAB LOCATIONS

An Expression of Interest (EOI) has just been sent out to a number of organizations to host the pilot of the Sim Lab Assessment with IEPs from August through October.

GETTING OUR STORY OUT THERE

Many members of the NCAS Project Team have been out in the community updating key stakeholders about the purposed, design and benefits of the project. Needless to say, everyone is very excited and wants to not only share their enthusiasm for it but also ensure that people understand its magnitude.

So far, presentations have been done for the Western and Northern Health Human Resources Planning Forum, the National Nursing Assessment Service board, the Committee of Health Sciences Deans and Directors (BC) and the Nursing Educators Council of BC.

“The NCAS Project is an amazing competency blueprint – something that nursing can be proud of. I would like to recognize the nursing community for their time and support of this project.”

Cynthia Johansen
Registrar and CEO, CRNBC
NCAS Project Steering Committee Chair

NCAS PROJECT TIMELINE CHECKLIST

- Phase 1** Development of an Integrated Competency Mapping Framework to map the competencies across all four roles, Research and Selection of Competency Assessment Model: Complete
- Phase 2** Building and Field Testing of Assessment Tools, Partner Business Readiness: Complete June 2015
- Phase 3** Pilot Test with IEP candidates: July – December 2015
- Phase 3A** Evaluation, October 2015 – January 2016

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