

**Practice Review** **Guide**

**For Nurse  
Administrators  
2007**



**COLLEGE OF NURSES  
OF ONTARIO**  
**ORDRE DES INFIRMIÈRES  
ET INFIRMIERS DE L'ONTARIO**

THE STANDARD OF CARE.

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# INTRODUCTION

Welcome to the *Practice Review Guide for Nurse Administrators*. This guide offers information about the Practice Review process and suggestions for preparing for your participation.

## What is Practice Review?

Practice Review was developed in consultation with nurse administrators and nursing administration experts. It is an objective assessment of your practice in relation to a set of competencies and behaviours that have been identified as essential for safe, effective and ethical RN nursing care and nursing administration roles. These competencies are based on the College's Standards of Practice. Practice Review allows the College to provide feedback on aspects of your practice and administrative role. Practice Review provides an in-depth picture of your practice strengths and areas needing improvement. Practice Review when combined with peer feedback obtained through reflective practice process also allows the College to better support you in maintaining competence as a nurse administrator.

Practice Review is one component of the College's Quality Assurance (QA) Program. (For more information about the other components – Reflective Practice – contact the College or visit our Web site at [www.cno.org](http://www.cno.org).) *The Regulated Health Professions Act (1991)* requires Ontario's regulatory colleges to develop, establish and maintain programs assuring the quality of practice within the profession. To meet this obligation, the College and its Council developed and implemented the QA Program. The QA program supports you in continuously improving your practice, facilitating practice development, and increasing the public's confidence in the nursing profession.

Participating in Practice Review is a legislative requirement. The QA Committee is responsible for ensuring that all nurses including nurse administrators are involved in the mandatory components of the QA program.

## What does this mean to me?

You were selected to participate in Practice Review for nurse administrators this year. Your name was identified through a computer-generated random sample. Once you successfully complete Practice Review for nurse administrators, you will be excluded from further selection for five years.

Only members who have current RN registration and are in nurse administrator roles in Ontario are selected for this version of Practice Review.

## What do I need to do?

The following five steps will help ensure you are prepared to participate.

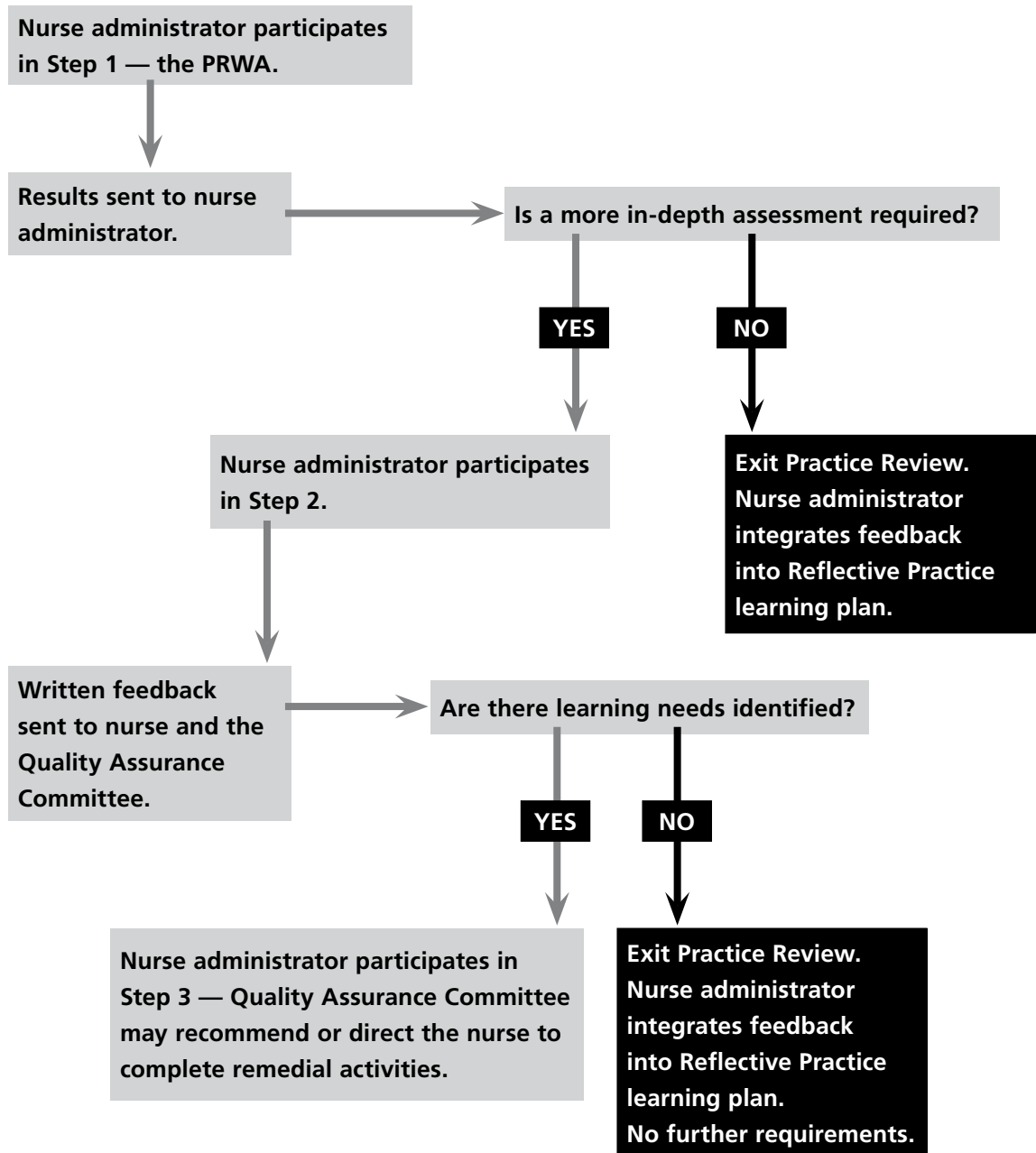
1. Review this Practice Review guide for nurse administrators.
2. Decide on a date and location to complete the written assessment.
3. Complete the enclosed forms:
  - Confirmation of Participation in Nurse Administrator Practice Review written assessment; and
  - Nurse Administrator Practice Review Publication Order Form (if you choose to order publications).
4. Review the enclosed Competency Review Tool for nurse administrators.
5. Review the practice standards and guidelines to increase your knowledge.

## The Practice Review Process

Practice Review is a three-step process. Most participants will probably only need to complete Step 1; however, if more in-depth information about your practice is required, you will be required to participate in Step 2. If learning needs are identified you will be required to move to Step 3. The three steps are:

- Step 1. A written assessment called the Practice Review Written Assessment (PRWA).
- Step 2. A written scenario that describes specific nurse administrator behaviours.
- Step 3. Remediation to address any practice concerns identified in Steps 1 and 2.

## Practice Review



# PRACTICE REVIEW: STEPS 1 AND 2

Steps 1 and 2 are designed to assess the knowledge, skill and judgment required for safe, effective and ethical nursing care. These steps measure Registered Nurse practice competencies and nurse administrator behaviours identified within the *Professional Standards* (Revised 2002) (attached). Competencies related to speciality areas will not be assessed. For example, you will not be asked specific question about neonatal intensive care nursing or any other area of specialized practice beyond the administrator behaviours identified in the *Professional Standards* (Revised 2002). All questions are based on the College's standards of practice and assess your knowledge of, and ability to apply the standards to administrator practice situations. You will not be asked to recite or explain your understanding of the standards.

After participating you will receive feedback about your strengths and areas for improvement. You can incorporate this feedback into your Reflective Practice learning plan.

Practice Review assesses RN competencies and administrator behaviours that:

- have the most direct impact on public safety (i.e. those that have the greatest potential to bring harm to the client if performed improperly);
- influence effective and ethical practice; and
- can be reliably and validly measured.

## Competency Categories for Nurse Administrators

The nurse administrator competency categories encompass both the RN nurse administrator behaviours and the RN competencies. The competency categories are as follows:

### 1. Accountability

You are accountable to the public and responsible for ensuring that your practice and conduct meet legislative requirements and standards of the profession. This includes: ensuring mechanisms allow for staffing decisions that are in the best interest of clients and professional practice; ensuring appropriate use, education and supervision of staff; advocating for quality practice settings that support the provision of safe, effective and ethical care; creating an environment that encourages ongoing learning, staying current on new/relevant legislation and its impact, complying with labour legislation, identifying the needs of the community and developing a plan to meet those needs, maintaining a budget, reviewing relevant data and incorporating the findings into practice.

### 2. Continuing Competence

Competence is your ability to use knowledge, skill, judgement, attitudes, values and beliefs to perform in various situations. Continuing competence ensures you are able to perform in a changing health environment. Continuing competence also contributes to quality nursing practice and increases the public's confidence in the nursing profession. This includes: supporting staff to become reflective practitioners; encouraging staff to engage in ongoing learning; seeking opportunities for staff to participate in continual learning activities and to incorporate Reflective Practice into agency professional development systems as well as advocate for a quality practice setting.

### 3. Ethics

Ethical nursing care means promoting the values of client well-being, respecting client choice, assuring privacy and confidentiality, respecting sanctity and quality of life, maintaining commitments, respecting truthfulness, and ensuring fairness in the use of resources. It also includes acting with integrity, honesty and professionalism in all dealings with the client and other health team members. Administrators demonstrate this behaviour by: creating environments that promote and support safe, effective and ethical practice; advocating for resources and establishing mechanisms to assist staff in recognizing and resolving ethical issues; supporting staff to develop skills to recognize and manage ethical issues, and facilitating/advocating for staff input on ethics committees.

#### **4. Knowledge**

Basic RN education includes knowledge in clinical practice, decision-making, critical thinking, research utilization, leadership, health care delivery systems and resource management. You are expected to add to your basic education and foundational knowledge throughout your career by pursuing ongoing learning. As a nurse administrator you demonstrate this behaviour by: understanding how practice environments can foster professional growth and improve professional practice; facilitating staff to seek new knowledge continually; knowing how to access resources to enable staff to provide the best possible care; critically evaluating research relating to outcomes and advocating for its application in practice; using relevant leadership and management principles and understanding and promoting nursing work as knowledge-based and research-informed.

#### **5. Knowledge Application**

As a nurse, you are expected to continually improve the application of professional knowledge. You apply knowledge to practice using nursing frameworks, theories and/or processes. This includes the performance of clinical skills because the technical and cognitive aspects of care are closely related and cannot be separated. An administrator displays the behaviours by: creating practice environment that support quality care; establishing and maintaining communication systems to support quality service and research and support and contributing to practice environments that encourage learning, application of knowledge and research.

#### **6. Leadership**

Leadership requires self-knowledge, respect, trust, integrity, shared vision, learning, participation, good communication techniques and the ability to be a change facilitator. As an administrator you display leadership behaviours by: identifying goals that reflect the College's mission and values and facilitate the advancement of professional practice; guiding/facilitating projects; providing feedback and support to staff about issues at an individual and organization level; creating opportunities for staff to assume various leadership roles; involving staff in decisions that affect their practice; coordinating, supervising and evaluating the development of client programs and services and providing professional advice to committees and teams.

#### **7. Relationships**

Relationships include therapeutic nurse-client relationships and professional relationships with colleagues, health team members, employees and employers. Administrators demonstrate these behaviours by: fostering an environment in which clients and staff are safe from abuse; supporting the therapeutic nurse-client relationship; promoting a philosophy of client-centred care and collaborative relationships; promoting a work environment in which trust and respect amount all health care disciplines is expected; ensuring systems are in place to reduce and manage conflict between team member effectively; supporting staff to take action when clients are at risk of harm from colleagues; valuing and acknowledging staff expertise and contribution to the health of clients.

#### **8. RN Competencies**

In addition to the RN nurse administrator behaviours, nurse administrators need to meet the RN competencies: professional behaviours; critical thinking, research and leadership; client and nurse safety; relationships and clinical skills. For more details, read the *Competency Review Tool for Nurse Administrators*.

#### **Preparation**

Since Steps 1 and 2 are based on the College's standards of practice and competencies, you may want to complete the *Competency Review Tool for Nurse Administrators* before participating in Practice Review. A copy of the tool is included in this package. The tool will assist you in assessing your practice based on the competencies that will be assessed during Practice Review. It will help you identify those areas that you may choose to enhance before participating in Practice Review.

## Confidentiality

Your participation in Practice Review is confidential. You are not obligated to notify your employer about your participation or the feedback you receive from the College. Only the Quality Assurance Committee is aware of your participation and your results. The committee will not use the information for any other College activity, such as complaints investigation.

In the rare instance that the Quality Assurance Committee has serious concerns about your ability to practice safely, the committee has the legislated authority to impose a term, condition or limitation on your certificate of registration while you undergo remediation to address the learning needs identified. If this occurs, the *Regulated Health Professions Act* states that this information must be displayed on the College's public register; however, it will not be published in *The Standard*.

## Deferral

Your participation in Practice Review may be deferred if you have a valid extenuating circumstance, such as serious illness, disability, bereavement or other significant factors.

If you are unable to participate in Practice Review at this time, notify the College as soon as possible. You will be required to provide documents, such as a medical certificate, that demonstrate your need for a deferral.

Failure to participate in Practice Review without a valid deferral may be considered an act of professional misconduct and could result in a referral to the College's Executive Director.

# STEP 1

## Written Assessment (PRWA)— Sample questions

The written assessment assesses the Registered Nurse competencies identified in the *Competency Review Tool for Nurse Administrators* (attached) and administrator behaviours from the *Professional Standard* (Revised 2002). The written assessment uses multiple-choice questions and objective key features questions. Expert nurses administrators were involved in developing the questions.

### Multiple-Choice Questions

Each multiple-choice question consists of a question and four possible answers. Only one is the correct or best answer and the remaining three are incorrect or least correct. You must select the correct or best answer.

### Tips for Completing the Written Assessment

It is important to take your time and read the question and answers carefully in order to avoid the following test-taking pitfalls:

1. Missing important information in the case scenario.
2. Misreading the question.
3. Not picking out important or key words in the case or question.
4. Not relating the question to the information in the case scenario.
5. Making assumptions about the case or questions.
6. Focusing on insignificant details and missing key issues.
7. Selecting more or fewer answers than required.
8. Switching answers selected.

The following are examples of typical multiple-choice questions used in the written assessment:

1. In anticipation of an influenza outbreak at a long-term care facility, what is the most effective action the nurse administrator could take to promote safe care for residents?
  - A. Organize onsite influenza immunization clinics.
  - B. Maintain records of influenza vaccinations.
  - C. Develop a facility-wide contingency plan.
  - D. Post the facility immunization policy for all staff.

Competency Category: Accountability

**Answer: C**

It is important to advocate for a quality practice setting that supports nurses ability to provide safe and effective care. For more information, refer to the College's *Professional Standards*, (Revised 2002) practice standard and *Infection Prevention and Control* practice standard.

2. A hospital recently implemented a new medication administration system to decrease medication incidents. What should the nurse administrator do to evaluate the effectiveness of this change?
  - A. Monitor the number of medication incidents.
  - B. Analyse medication incidents in relation to baseline data.
  - C. Develop an education session on medication incidents.
  - D. Consult the pharmacy department regarding medication incidents.

Competency Category: Accountability

**Answer: B**

Analysing medication incidents in relation to baseline data provides an outcome measure with pre- and post-implementation measures. This is a system based non-punitive approach to analysing incidents that identifies root causes and results in corrective actions. For more information, refer to the College's *Medication* practice standard.

3. The CEO of a long-term care facility is forming a committee to assist with the design of a new building and is requesting nursing input. What should the nurse administrator do?
  - A. Volunteer to represent nursing on the committee.
  - B. Rotate nursing staff membership on the committee.
  - C. Circulate the minutes of the committee meetings to all nursing staff.
  - D. Recruit nursing staff from all categories to join the committee.

Competency Category: Relationships

**Answer: D**

Professional relationships result in improved client care when nurse administrators value and acknowledge nursing contributions to health care of clients. For more information, refer to the College's *Professional Standards*, (Revised 2002) practice standard.

4. In determining policies and procedures for the most appropriate skill mix, what client factors should the nurse administrator consider?
  - A. Family supports, client profile and available resources.
  - B. Care delivery model, environment and nurse competency.
  - C. Complexity, predictability and risk of negative outcomes.
  - D. Practice supports, consultation and work load measurement.

Competency Category: Accountability

**Answer: C**

There is a growing body of research about the link between staff mix and nursing-sensitive client outcomes. This research points to the need for decision-makers to consider the appropriate utilization of RNs and RPNs in the practice setting. For more information, refer to the College's *Utilization of RNs and RPNs* practice guideline.

5. The facility has just received funds to purchase mechanical lifts. What process should the nurse administrator follow in determining which lifts should be purchased?
- A. Value analysis incorporating cost, safety and effectiveness.
  - B. Cost benefit analysis incorporating cost, features and durability.
  - C. Ergonomic analysis incorporating workplace injuries, depreciation of lifts and ease of use.
  - D. Clinical analysis incorporating lift features, nurses input and orientation.

Competency Category: Knowledge

**Answer: A**

Value analysis is a systematic approach to the evaluation of products that are used in providing patient care. For more information, refer to Rider Ellis, J. & Love Hartley, C. (2005). *Managing and coordinating nursing care* (4th Edition). Philadelphia, PA: Lippincott Williams & Wilkins. p. 86

6. The nurse administrator in collaboration with the Occupational Health and Safety department organized annual back care health education sessions for staff. Which of the following measures could be monitored to evaluate the outcomes of the education investment?
- A. Staff satisfaction with the sessions.
  - B. Absenteeism rate for nursing staff.
  - C. Attendance at the education sessions.
  - D. Rate of lift and transfer injuries.

Competency Category: Knowledge Application

**Answer: D**

Optimal outcomes measures are established based on legislation and nursing research. For more information, refer to Yoder-Wise, P.S. (2003). *Leading and managing in nursing* (3rd Edition). St. Louis, MO: Mosby. pg. 183

7. What must the nurse document on the client's record after administering a PRN analgesic?
- A. Name of the drug, dosage, route, exact time of administration, effectiveness of medication.
  - B. Name of the drug, dosage, route, the effectiveness of administration.
  - C. Name of the drug, route, exact time of administration.
  - D. The effectiveness of the medications.

Competency Category: RN Competencies

**Answer: A**

The following steps contribute to the safe administration of medication: right medication, right dose, right route, right time, right client, as well as evaluating the effectiveness of the medication. For more information, refer to the College's *Medication* practice standard.

8. An RN and RPN are both delivering care to a client. The RPN changes the dressing. Who should document the dressing change?
- A. The RN and RPN
  - B. The RPN
  - C. The RN
  - D. The RPN with the RN co-signing
- Competency Category: RN Competencies

**Answer: B**

Records should be written by the nurse who saw the event or performed the action. For more information, refer to the College's *Documentation* practice standard.

9. When is cardio-pulmonary resuscitation (CPR) not required?
- A. The client has a terminal illness
  - B. The nurse notes absent vital signs
  - C. The family indicates they do not want CPR
  - D. The client's wishes for no CPR are known
- Competency category: RN Competencies

**Answer: D**

The nurse has a central role in ensuring that client wishes regarding resuscitation are identified and implemented. The nurse should not initiate CPR if the client's wish for no resuscitation is known. For more information, refer to the College's *Resuscitation (Revised 1999)* practice standard.

10. What steps should a Nurse Administrator take to ensure research decisions follow ethical nursing practice?
- A. Identify hospital board member to participate in research committee
  - B. Communicate research study plans with clients
  - C. Access funding sources to support research initiative
  - D. Review *Ethics* practice standard
- Competency Category: Ethics

**Answer: D**

The *Ethics* practice standard provides guidance for conducting research in an ethical manner. For more information, refer to the College's *Professional Standards (Revised 2002)* practice standard.

11. Gus, the painter, has left his supplies and ladder in a hallway outside the nursing staff washroom. A nurse trips on the ladder injuring her leg. To whom should the nurse report the incident?
- A. Her employer
  - B. Gus' supervisor
  - C. Her colleagues
  - D. The physician
- Competency Category: RN Competencies

**Answer: A**

Nurses demonstrate their accountability by reporting unsafe actions to the appropriate authority. For more information, refer to the College's practice standard: *Professional Standards (Revised 2002)*.

## Objective Key Features Questions

Each case-based scenario consists of a paragraph describing a situation. There may be one or more questions based on the information in the scenario. Each question asks you to select two or more priority actions from a list of possible responses.

### Case 1

A 1,000-bed academic health science centre is challenged to develop a \$20 million recovery plan. A component of the organization's vision statement is the promotion of an environment that fosters educational opportunities. Recent results from the employee satisfaction survey indicate a high level of dissatisfaction regarding support for growth and development. The hospital has proposed an initiative that would freeze all educational requests. The nursing department must develop a response to the proposed freeze.

1. Evidence shows improved client outcomes in organizations where there is a strong commitment to learning. What TWO (2) strategies should the Nurse Administrator use to obtain resources to promote a learning organization?
  - A. Reduce staffing on the unit and reallocate the resources to educational funding.
  - B. Spend limited resources on updating the nursing library references.
  - C. Ask staff to nominate the most deserving individuals to receive limited educational opportunities.
  - D. Invest educational resources to improving Internet accessibility for all staff.
  - E. Encourage efficiencies in the use of resources and reinvest surpluses in educational opportunities.
  - F. Develop a business case showing the relationship between the availability of educational opportunities and reduced sick time.

Competency Category: Knowledge application

**Answer: E, F**

The Nurse Administrator is able to demonstrate knowledge required to obtain the resources necessary to promote an ongoing learning environment. The quality of nursing practice is reflected in the nurse's knowledge application. For more information, refer to the College's *Utilization of RNs and RPNs* practice guideline and *Professional Standards* (Revised 2002) practice standard.

2. The Director of Nursing clearly supports the organization's vision to promote educational opportunities. What TWO (2) actions should the Director of Nursing demonstrate to foster a learning organization?
  - A. Support those units with a surplus in their unit budgets to attend educational opportunities.
  - B. Direct the clinical educator to develop a calendar for staff in-service.
  - C. Advocate for a commitment for resources to support staff education.
  - D. Support high profile units in their educational endeavours.
  - E. Promote units to explore opportunities for revenue generation that will fund education.
  - F. Communicate department-wide expectations of support for education.

Competency Category: Accountability

**Answer: C, F**

The Nursing Director creates a climate that values education by communicating the organization's vision and advocating for the resources needed to realize that vision. For more information, refer to the College's *Professional Standards* (Revised 2002) practice standard.

3. The Unit Manager has observed knowledge gaps amongst all levels of staff regardless of seniority or classification. What TWO (2) actions should the Unit Manager take to assess the education needs of staff?
- A. Review the learning plan components of recent staff performance appraisals.
  - B. Request the education department develop learning opportunities for novice staff.
  - C. Develop educational opportunities based on observed knowledge gaps.
  - D. Use surveys to identify the educational needs of unit staff.
  - E. Encourage staff to pursue alternative sources of funding for education.
  - F. Make the educational needs of the RNs the first priority for the nursing unit.

Competency Category: Continuing Competence

**Answer: A, D**

The Nurse Administrator creates an ongoing learning environment by using tools/strategies appropriate to determining the learning needs of all staff. For more information, refer to the College's *Professional Standards*, (Revised 2002) practice standard.

4. An alternative education opportunity has been provided for staff. What TWO (2) indicators should the Nurse Administrator assess to determine the effectiveness of the alternative program?
- A. Anecdotal evidence from staff who have completed the program.
  - B. Cost of the program per staff member on the unit.
  - C. Survey results regarding staff satisfaction with the program.
  - D. Number of staff who successfully completed the program.
  - E. Successful transfer of learning outcomes to the practice setting.
  - F. Interest from other professions to participate in the program.

Competency Category: Knowledge Application

**Answer: C, E**

The delivery of educational programs in a timely and cost effective manner that can be linked to measurable outcomes shows utilization of relevant management principles. Transfer to the workplace is one of the ultimate goals of employer sponsored educational opportunities. Staff perceptions of the usefulness of educational opportunities are important for morale. For more information, refer to the College's *Professional Standards* (Revised 2002) practice standard and *Utilization of RNs and RPNs* practice guideline.

## Case 2

Mr. Belushi, 70, has diabetes. Over the past few months, Mr. Belushi has gained weight because of his poor diet and a lack of exercise. His fluency in English is limited, so he frequently depends on family members to interpret information. Three weeks ago, Mr. Belushi's physician changed his oral hypoglycemic medication to injectable insulin.

1. The nurse finds Mr. Belushi upset and agitated. He refuses to eat because he feels that if he doesn't eat, "he won't need needles".

What THREE (3) communication techniques should the nurse use to explore Mr. Belushi's agitation?

- A. Allow time for Mr. Belushi to express his feelings.
- B. Offer advice to Mr. Belushi about how to deal with his frustration.
- C. Give a personal opinion to Mr. Belushi on how important it is to follow his treatment.
- D. Interpret Mr. Belushi's reaction as a cultural barrier.
- E. Use open-ended questions while interacting with Mr. Belushi.
- F. Offer praise to Mr. Belushi when he expresses acceptable behaviour.

G. Convey interest through eye contact and nodding in acknowledgement.

Competency Category: RN Competencies

**Answer: A, E, G**

Listening to the client without immediately giving advice or diminishing the client's feelings is essential in developing a therapeutic nurse-client relationship. Showing a general interest in, and compassion for, the client is another effective therapeutic intervention. For more information, refer to the College's practice standard *Therapeutic Nurse-Client Relationship*.

2. Mr. Belushi reports to the nurse that he is feeling weak and dizzy. The nurse puts Mr. Belushi to bed and takes the appropriate measures to assess the status of his diabetes. The nurse notifies Mr. Belushi's physician. While processing the physician orders, the nurse learns that Mr. Belushi has fallen out of bed.

What TWO (2) things should the nurse do to ensure accurate documentation of the fall?

- A. Sign the master signing sheet only with her initials and nursing designation.
- B. Document that Mr. Belushi fell due to being hypoglycemic.
- C. Have another nurse co-sign for the insulin on the medication sheet.
- D. Record the incident in chronological order.
- E. Document the fall on the health record.
- F. Record that Mr. Belushi "appears unsteady when ambulating."

Competency Category: RN Competencies

**Answers: D, E**

When a situation directly involves a client, documentation of the incident occurs in the client's health record. Entries documented chronologically present a clear picture of events. Nursing documentation should consist of only the facts. Any opinion statements or conclusions should be avoided. For more information, refer to the College's *Documentation* practice standard.

## Step 1 Process

### Length of the Assessment

The written assessment is divided into two booklets and will require four to six hours to complete. A break should be taken between the booklets.

### Writing Assessment

#### Arrange a self-selected site and invigilator (assessment supervisor).

You must select the location, date and time for writing the assessment, as well as an invigilator to oversee the administration of the assessment.

The invigilator must be:

- a regulated health professional (see Appendix on page 19 for a complete list of regulated health professions in Ontario); or
- a professional such as a lawyer, engineer, teacher, social worker, librarian, accountant, judge, magistrate, veterinarian, police officer or a member of the clergy.

To select an invigilator who does not meet these requirements, send a written request to the College. Relatives, regardless of their occupations, may not serve as invigilators.

Confirm with your invigilator the location, date and time for administering the written assessment. By completing the Confirmation of Participation in Written Assessment Form and return it to the College before the due date indicated.

Once the College has approved your request, it will mail instructions and a sealed copy

of the written assessment to your invigilator. You and the invigilator will be asked to review, sign and return a pre-printed statement verifying that the invigilator supervised the written assessment and checked your photo identification. The invigilator is responsible for returning the completed assessment to the College. To learn more about the invigilator's responsibility, please see the enclosed *Guide for the Administration of the Practice Review Written Assessment*. Invigilators will receive a \$75 fee for administering the assessment on the College's behalf.

### **Identification**

When you arrive at the self-selected site you will be asked to show your current Certificate of Registration (Annual Registration Payment Card) and one piece of identification containing your picture and signature.

### **Confidentiality Agreement**

To maintain confidentiality of the content of the written assessment you will be required to sign a Confidentiality Agreement before writing the assessment.

### **What to Bring**

Bring two or three HB pencils and a soft eraser. You may want to bring a watch to keep track of the time. Alarms and beeping watches are not permitted.

### **Time**

Invigilators will keep the official time. It will take four to six hours to complete the written assessment. Breaks will be provided.

### **Returning the Assessment Package**

All materials, including test books and answer sheets, are the property of the College and must be returned to the invigilator when you finish writing the assessment.

### **Special Needs**

Accommodations for special needs may include, but are not limited to, the use of a reader, a large text version of the assessment, or additional writing time. Include requests for these or other arrangements when you submit your confirmation form to the College.

### **Misconduct or Irregularities**

You may be dismissed from the assessment process if you engage in any misconduct or irregularity during the administration of the assessment, including, but not limited to, the following:

- creating a disturbance;
- giving or receiving assistance;
- working on or reading the written assessment during a time not authorised by the invigilator;
- removing test materials or notes;
- taking part in an act of impersonation or other forms of cheating;
- failing to follow the directions of invigilator
- using books, ear plugs, headsets, rulers, computers, listening devices, paging devices, papers of any kind or other aids.

Participants who engage in misconduct, irregularity or disclose information about the questions on the written assessment may be further reviewed by the College and subject to other penalties.

### **Missing Assigned Writing Date**

If you miss or are absent from your scheduled assessment, you must notify the College immediately.

### **Following Completion of the Written Assessment**

You will receive results and feedback about your performance approximately eight weeks **after completing the assessment**. The feedback will include a report on your performance in each competency category as well as provincial average for each category. The questions, your response and the answer key are not returned. See page 15 for a sample of the feedback you will receive.

### **Scoring the PRWA**

Nurse administrators set the overall required pass score using a method similar to one used for the nurse national registration examinations, the national certification examinations and the RN Extended Class examination. As with those exams, the overall required score is confidential and will not be included with the Practice Review profile. There will be a rating of “successful” or “Requires Further Assessment” at the top of the report.

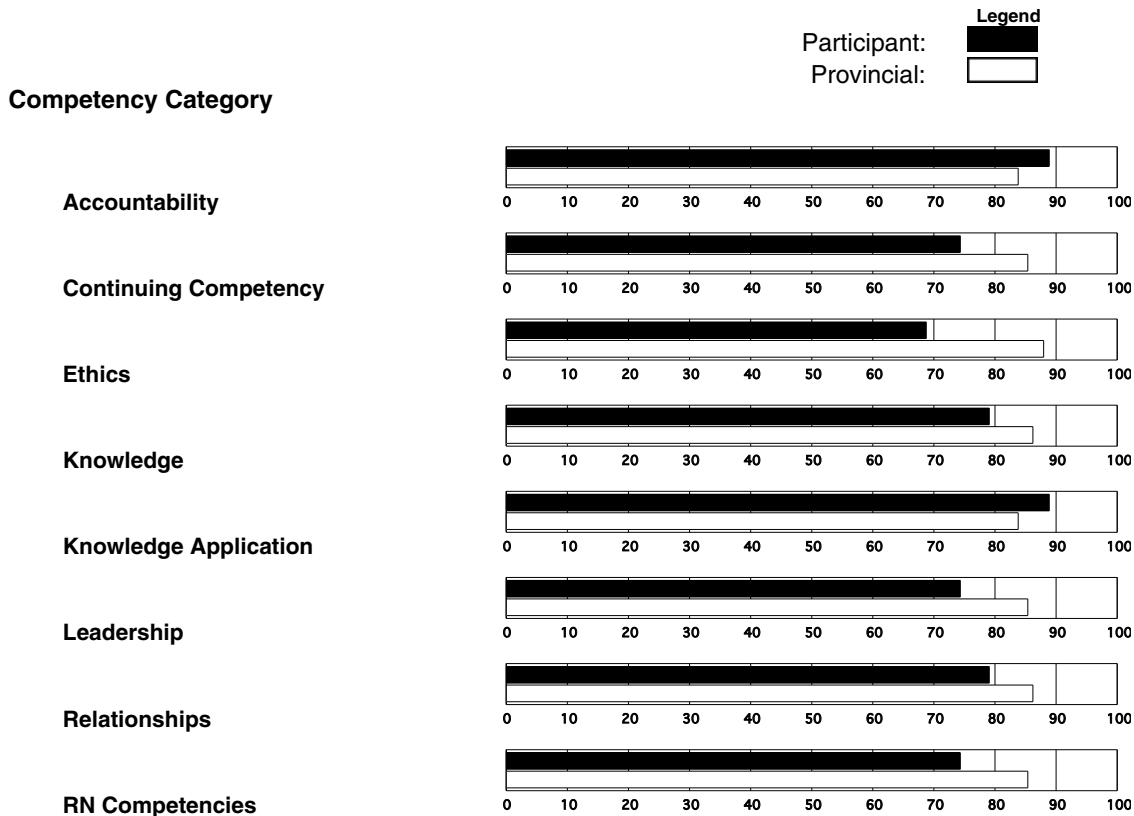
The answer sheets are scored by computer. A nurse administrator who writes the written assessment and achieves a score greater than the overall required score will have successfully completed Practice Review and will exit the process. A nurse administrator whose score is below the overall required score will progress to the second step of Practice Review.

## College of Nurses of Ontario Practice Review Written Assessment (PRWA) Performance Profile

**Participant:** 0000000 Jane Doe

**Result:** Successfully Completed PRWA

This report provides a profile of your performance according to content categories from the PRWA (Participant) and a profile of the average performance of all participants who wrote the PRWA (Provincial). The profile is based on the competency categories. Definitions of these categories are provided on the reverse side of this page.



### Interpreting Your Score

When your performance is considered to be above the minimally accepted standards, your "Result" will indicate "Successfully Completed PRWA" above. Where your overall performance is below the minimally accepted standard, your "Result" will indicate "Requires a Behaviour-Based Interview". In this case, a further assessment of your knowledge and application of these standards is needed. The interview will focus only on the category(s) that are listed in the accompanying letter. The goal of the interview is to identify if practice improvement is necessary and to assist you in developing an effective learning plan to address any identified learning needs. If your "Result" box indicates that you have "Successfully Completed PRWA" you are encouraged to use the feedback in this report to identify areas of learning for your Reflective Practice participation.

To help you focus your learning objectives, consider your performance in each category relative to the average performance of your colleagues (provincial). This will give you a general indication of your strengths as well as areas requiring further development. You should consider focusing your continuing learning efforts in any areas where your scores fall below the average score of your colleagues, starting with those areas where your performance falls furthest below the provincial average.

# STEP 2

## Behaviour-Based Assessment

If Step 1 indicates that a more in-depth assessment is needed you will be required to participate in Step 2.

Step 2 assesses only those assessed administrator behaviours that have been identified from Step 1. You will be notified about which competency categories will be assessed in Step 2. They could include one or more of the following:

- Accountability
- Continuing Competence
- Ethics
- Knowledge
- Knowledge Application
- Leadership
- Relationships

See page 5 for an explanation of these competency categories and the College's *Professional Standards* (Revised 2002).

The goal of step 2 is to further assess your knowledge and application of the administrator behaviours, and to determine if specific learning needs are evident. The philosophy of the assessment is that past practice is an accurate predictor of future practice.

You will be asked to document a scenario that describes in detail how you have displayed the nurse administrator behaviour. Your description will be assessed against the expectations within the nurse administrator behaviours.

## Step 2 Process

### Preparing for the Assessment

If you are required to complete Step 2, more details will be forwarded from the College providing full instructions as to the behaviour to be described and the correct format.

### Feedback – Practice Review Assessment Report

You will receive a written report (*Practice Review Assessment Report*) approximately four to six weeks after completing Step 2. The report will include:

- a summary of the scenarios you provided;
- a summary of how your scenarios demonstrated the behaviours and/or RN competencies being assessed; and
- any learning needs/knowledge gaps that were identified.

If learning needs were identified the report will also include some options for remedial activities to address the learning need(s). A copy of the written report will be sent to the Quality Assurance (QA) Committee who will make a decision about specific remedial activities you will be required to complete. You have an opportunity to submit a written response to the QA Committee within 30 days of the notification before the committee makes a final decision about remediation.

# STEP 3

## Remediation

The QA Committee has several options when reviewing the *Practice Review Assessment Reports* and your written response. The Committee may respond in one of the following four ways:

1. Decide that no learning needs were identified and therefore remediation is not necessary. You exit Practice Review.
2. Decide that you would benefit from reviewing a College standard or document and suggest that you incorporate this into your annual Reflective Practice learning plan. You exit Practice Review.
3. Decide that a significant learning need was identified and direct you to undertake specified remedial activities. You would need to provide evidence of completion of the remedial activities before exiting Practice Review.
4. In very serious cases, the committee may direct the Executive Director to impose a term, condition, or limitation on your Certificate of Registration while you complete the necessary remedial activities.

Remedial activities that the QA Committee may direct the nurse to complete can include (but are not limited to): reviewing a College standard, completing one of the College's on-line learning modules, meeting with a College Practice Consultant or Quality Assurance Coordinator to reflect on learning, working with a mentor in the workplace, reviewing journal literature, and/or taking a formal course (i.e., ethics in nursing).

## Contacting the College

To learn more about Practice Review, contact the College:

E-mail: [ppd@cnomail.org](mailto:ppd@cnomail.org)

Web site: [www.cno.org](http://www.cno.org)

Phone: 416 928-0900

Toll-free (in Ontario): 1 800 387-5526

Fax: 416 928-6507

Mail: 101 Davenport Rd, Toronto ON M5R 3P1.

# Appendix

## Regulated Health Profession Colleges in Ontario

College of Audiologists and Speech-Language Pathologists of Ontario

College of Chiropractors of Ontario

College of Chiropractors of Ontario

College of Dental Hygienists of Ontario

College of Dental Technologists of Ontario

College of Denturists of Ontario

College of Dietitians of Ontario

College of Massage Therapists of Ontario

College of Medical Laboratory Technologists of Ontario

College of Medical Radiation Technologists

College of Midwives of Ontario

College of Nurses of Ontario

College of Occupational Therapists of Ontario

College of Opticians of Ontario

College of Optometrists of Ontario

College of Physicians and Surgeons of Ontario

College of Physiotherapists of Ontario

College of Psychologists of Ontario

College of Respiratory Therapists of Ontario

Ontario College of Pharmacists

Royal College of Dental Surgeons of Ontario



**COLLEGE OF NURSES  
OF ONTARIO**  
**ORDRE DES INFIRMIÈRES  
ET INFIRMIERS DE L'ONTARIO**

THE STANDARD OF CARE.

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