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2014 RN Practice Analysis: Linking the NCLEX-RN® Examination to Practice U.S. and Canada

2014 RN Practice Analysis: Linking the NCLEX-RN[®] Examination to Practice U.S. and Canada

National Council of State Boards of Nursing, Inc. (NCSBN®)

Mission Statement

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Part 1

2014 RN Practice Analysis: Linking the NCLEX-RN[®] Examination to Practice

U.S. Respondents

National Council of State Boards of Nursing, Inc. (NCSBN®)

EXECUTIVE SUMMARY

The National Council of State Boards of Nursing (NCSBN®) is responsible to its members, the boards of nursing in the U.S. and its member board territories for the preparation of psychometrically sound and legally defensible licensure examinations. The periodic performance of practice analysis (i.e., job analysis) studies assists NCSBN in evaluating the validity of the test plan that guides content distribution of the licensure examination. Because the U.S. health care industry is rapidly changing, practice analysis studies are traditionally conducted on a three-year cycle.

A number of steps are necessary to perform an analysis of newly licensed registered nurse (RN) practice. A panel of subject matter experts was assembled, a list of RN activities was created and incorporated into a survey that was sent to a randomly drawn sample of newly licensed registered nurses, and data were collected and analyzed.

Methodology Reviewers

Three methodology reviewers, chosen for their expertise in practice/job analysis and certification exam development, reviewed the methodologies and procedures utilized in this study. All three reviewers indicated this methodology was psychometrically sound, legally defensible and in compliance with industry standards for practice analyses.

Panel of SMEs

A panel of 12 RNs was assembled to assist with the practice analysis. Panel members worked with, educated and/or supervised the practice of RNs within their first six months of practice or were themselves newly licensed RNs. Panel members represented geographic NCSBN areas of the U.S. and Canadian territories/jurisdictions using NCLEX for licensure decisions, major nursing specialties, and varied practice settings.

The panel used the current test plan category structure describing the types of activities performed by newly licensed RNs and developed a list of activities performed within each category of the structure.

Survey Development

A total of 139 nursing activity statements were incorporated into a practice analysis survey. The survey also included questions about the nurses' practice settings, past experiences and demographics. Half of the sample of newly registered nurses received a paper version of the survey. The other half of the sample received a Web-based survey. Two forms for the paper survey and three forms of the Web survey were created to reduce the number of activity statements on each survey. For the paper survey, one form contained 70 activity statements and the other 69 with no shared statements. For the Web versions of the survey, two of surveys contained 46 activity statements and one of the Web surveys contained 47 activity statements, without shared activity statements. Such a design ensures every activity statement appears in two paper survey forms or three Web survey forms. Except for the activity statements unique to each survey form, the surveys were identical.

Survey Process

Sample Selection

Two samples were randomly selected from the candidates who successfully passed the NCLEX-RN[®] examination from Oct. 1, 2013 through March 31, 2014. Newly licensed RNs were excluded from this sample if their mailing address was not within the jurisdiction in which they were seeking licensure.

The exclusion criterion was used to minimize the number of incorrect addresses to which the survey would be sent. A sample of 6,000 practitioners was randomly selected for the paper survey. A sample of 6,000 RNs was randomly selected from the population for the Web survey.

Representativeness

The sample selected for this study was proportionally equivalent to the population from which the sample was drawn in terms of NCSBN jurisdictions.

Mailing Procedure

Two forms of the paper survey were distributed evenly among 6,000 newly licensed RNs. The Web

survey had three forms that were evenly distributed among 6,000 newly licensed RNs. A five-stage mailing process was used to engage the participants in the study. All potential participants were promised confidentiality with regard to their participation and their responses. The survey was conducted from April through June 2014.

Return Rates

Out of the 6,000 paper surveys mailed out, 757 were returned for Form 1 and 758 were received for Form 2. With 71 undeliverable surveys, the adjusted return rate is 25.5% for paper survey. Out of the 6,000 Web surveys delivered, 731 surveys were received for Form 1, 754 surveys were received for Form 2, and 699 for Form 3. The return rate was 36.4% for the Web survey. There were 955 individuals (446 paper, 509 Web) who did not qualify for survey ratings based on one of the following reasons: (a) they did not indicate having an RN license; (b) they were not currently working in the U.S.; (c) they were working less than 20 hours per week as an RN; and/or (d) they failed to answer the previous two demographic questions. After adjusting for incorrect addresses and removals, the analyzable response rates were 18.0% for paper and 27.9% for Web.

RN Practice Analysis Survey Nonresponder Study

In order to ensure the validity of the results, NCSBN conducted a telephone survey of nonrespondents to determine if those RNs not responding would have rated the survey activity statements differently. Based on the nonrespondent data, the ratings for nonrespondents were similar to the ratings of respondents which provide support to the validity of the survey results.

Demographics, Experiences and Practice Environments of Participants

Demographics/Past Experiences

The majority (87.6%) of survey respondents reported were female. The age of respondent nurses averaged 31.6 years (SD 8.8 years). The respondents were 74.2% White, 10.5% African American, 6.1% Hispanic, 4.1% Asian, and 1.0% Asian Indian.

Newly licensed RNs listed obtaining an associate degree most frequently (54.7%) as the educational preparation for initial RN licensure. The second most frequent response was the baccalaureate degree (40.4%).

Respondents reported working an average of 3.4 months as RNs in the U.S. and its territories. On average, respondents indicated earning a nursing degree 7.4 months prior to taking the survey. Approximately 16.0% of newly licensed RNs reported previous experience as a licensed practical/ vocational nurse (LPN/VN) and 43.6% reported previous experience as a nurse aide (NA). The average experience in those positions was 6.1 years as an LPN/VN and 4.7 years as an NA.

Orientation

The majority of newly licensed RNs received some form of formal orientation (95.4%). No formal orientation was reported by 4.6% and 1.2% reported having only classroom instruction or skills lab work for their orientation. The majority of newly licensed RNs reported working with an assigned preceptor (66.5%) for an average of 8.3 weeks. In the next largest group, 13.6% reported having a formal internship that lasted an average of 13.7 weeks, while just 11.2% of respondents indicated performing supervised work with patients for an average of 6.3 weeks.

Certifications Earned

In the current survey, Basic Life Support (57.4%), Advanced Cardiac Life Support (24.2%), and Intravenous Therapy (12.8%) were the most frequently reported certifications.

Facilities

The majority (72.0%) of newly licensed RNs in this study reported working in hospitals. The next largest group, of around 15%, reported working in long-term care while just fewer than 10% reported working in community-based facilities.

Related to the size of the facilities in which respondents work, the bulk of newly licensed RNs in this study indicated working in hospitals with at least 100 beds. The majority of respondents (27%) work in a facility with 100-299 beds, followed by 21% of respondents in facilities with 500 or more beds, and lastly facilities with 300-499 beds included 19% of the sample. Only 16.5% of respondents indicated working in facilities containing less than 100 beds. Almost 53% of newly licensed RNs in this study reported working in urban or metropolitan areas, 31.8% in suburban areas, and 15.3% in rural areas.

Practice Settings

The majority of newly licensed RNs reported working in the medical/surgical (27.7%) and critical care (18.7%) settings. Nursing home, skilled or immediate care made up 11.2% of the current sample, followed by rehabilitation (5.5%) and step-down/progressive care (4.3%). Only 0.1% reported working in the occupational health settings.

Client Health Conditions and Ages

Newly licensed RNs reported caring for acutely ill clients (50.0%), clients with stable chronic conditions (38.8%), clients with unstable chronic conditions (29.0%) and clients with behavior/emotional conditions (25.3%). The majority of newly licensed RNs reported caring for older adult clients aged 65 to 85 (54.3%), adult clients aged 18 to 64 (52.8%), older adult clients aged 85 plus (30.2%) and young adult clients aged 13 to 17 (7.0%).

Shifts Worked

The shifts most commonly worked by newly licensed RNs continued to be days (43.8%) and nights (31.4%). Only 12.5% reported working rotating shifts.

Time Spent in Different Categories of Nursing Activities

Newly licensed RNs reported spending the greatest amount of time in Management of Care (17.6%), Physiological Adaption (13.8%), and Pharmacological and Parenteral Therapies (13.2%).

Administrative Responsibilities/Primary Administrative Position

Of the respondents, 21.4% reported having administrative responsibilities and of those respondents, 43.4% reported having a primary administrative position. Those working in long-term care facilities were far more likely to report having administrative responsibilities than those working in hospitals (60.6% in long-term care vs. 9.4% in hospitals). Those working in long-term care with administrative responsibilities were more than three times as likely to report being in a primary administrative position than those working in hospitals (61.2% of those working in long-term care reported having an administrative position compared to 20.8% of those working in hospitals). Of those working in community-based settings, 37.7% reported having administrative responsibilities. Of those respondents, 48.8% reported holding a primary administrative position.

Activity Performance Findings

Reliability

Reliability indices were calculated to assess the capability of the survey to measure the activities relevant to safe and effective practice of newly licensed RNs. Cranach's alpha coefficients were calculated for frequency and importance ratings for the paper and Web forms of the survey. Paper surveys had a reliability index of about 0.97 for importance and about 0.96 for frequency ratings, which is quite good. Web surveys had a reliability index of .96 for importance and 0.95 for frequency ratings. These high-reliability indices indicate the survey is reliably measuring the nursing activities necessary for competent RN practice.

SME Panel Validation of Survey Findings

The subject matter expert panel for the 2014 RN Practice Analysis was asked to provide independent ratings of the 139 activity statements. The importance ratings estimated by panel members were compared to the average importance ratings from the practice analysis survey. In general, respondents regarded most of the activity statements as more important than the SMEs did.

Representativeness of Activity Statements

Respondents were asked whether the activities on their survey form represented what they actually did in their positions. A large majority of participants (89.3%) indicated that the survey covered the important nursing activities "well" or "very well."

Applicability of Activities to Practice Setting

Respondents indicated if each of the activities was applicable to his or her work setting. The activities ranged from 21.5% applicability (21.5% of the respondents reported that the activity was performed within their work setting) to 99.9% (99.9% of the respondents reported the activity was performed within their work setting).

Frequency of Activity Performance

Respondents were asked to rate the frequency of performance of all activities that were applicable to their work setting on a six-point scale: "0 times" to "5 times or more." Average frequency statistics were calculated in two ways: setting-specific frequency of activity performance and total group frequency. Average setting-specific frequencies ranged from 0.67 to 4.94. Average total group frequencies ranged from 0.20 to 4.94.

Importance of Activity Performance

Respondents were asked to rate the importance of performing each nursing activity in regard to the maintenance of client safety and/or threat of complications or distress using a five point scale: "1" (not important) to "5" (critically important). Average setting-specific importance ratings ranged from 3.52 to 4.91. Average total group importance ratings ranged from 3.31 to 4.91.

Summary

Respondents to the 2014 RN Practice Analysis found the activities listed in the survey to be representative of the work they performed in their practice settings. In general, the importance ratings of SMEs and respondents were similar (correlation = 0.85), supporting the validity of the results. The reliability of the survey instrument was quite good. In addition, activities with the lowest average total group frequency and importance ratings corresponded, in general, to those activities performed in specialized areas of nursing practice.

Conclusion

The 2014 RN Practice Analysis used several methods to describe the practice of newly licensed RNs in the U.S.: (1) document reviews; (2) daily logs of newly licensed RNs; (3) subject matter experts knowledge; and (4) a large scale survey. The reliability of the survey instrument was quite good. In addition, there was evidence to support the validity of the activity statement ratings. Based on evidence, the findings of this study can be used to evaluate and support an RN test plan.

Part 1

2014 RN Practice Analysis: Linking the NCLEX-RN[®] Examination to Practice

U.S. Respondents

National Council of State Boards of Nursing, Inc. (NCSBN®)

BACKGROUND OF STUDY

The National Council of State Boards of Nursing (NCSBN®) is responsible to its members, the boards of nursing in the U.S. and its member board territories for the preparation of psychometrically defensible sound and legally licensure examinations. The periodic performance of practice analysis (i.e., job analysis) studies assists NCSBN in evaluating the validity of the test plan that guides content distribution of the licensure examination. Furthermore, practice analysis studies have long been recognized by measurement and testing professions as important sources of validity evidence for licensure examinations (AERA, APA, and NCME, 2014; Raymond, 2001). Because the U.S. health care industry is rapidly changing, practice analysis studies are traditionally conducted by NCSBN on a three-year cycle. The previous registered nurse (RN) practice analysis was conducted in 2011.

Methodology

A number of steps are necessary to perform an analysis of newly licensed RN practice. This section provides a description of the methodology used to conduct the 2014 RN Practice Analysis study. Descriptions of subject matter expert (SME) panel processes, survey development, sample selection and data collection procedures are provided, as well as information about assurance of confidentiality, response rates and the degree to which participants were representative of the population of newly licensed RNs.

Preliminary Interviews with Nurse Leaders

In order to collect information about trends in nursing and health care and to anticipate possible changes in the future of nursing practice, a variety of leaders in the nursing profession, approved by the NCLEX[®] Examination Committee, were interviewed regarding their opinions. These interviews with nurse leaders were conducted, recorded and transcribed. After leaders' identifying information was removed in order to provide anonymity, the summary of the phone interviews were made available as source documents for the SME panel to consider when

developing the activity statements. In addition, four NCSBN nursing staff reviewed the results of the interviews, noting any themes or trends. This information was then provided to the SME panel for consideration when developing activity statements.

Methodology Reviewers

Three methodology reviewers, chosen for their expertise in practice/job analysis and certification exam development, reviewed the methodologies and procedures utilized in this study. All three reviewers indicated this methodology was psychometrically sound, legally defensible and in compliance with professional standards for practice analysis. See Appendix A for a listing of methodology reviewers.

Panel of SMEs

A panel of 12 registered nurses was assembled to assist with the practice analysis. Panel members worked with and/or supervised the practice of RNs within their first six months of practice or were themselves newly licensed RNs and represented all geographic areas of the U.S. and Canada, varied major nursing specialties and practice settings. See Appendix B for a listing of panel members.

The panel of experts performed several tasks crucial to the success of the practice analysis study. The SMEs asked three newly licensed RNs whom they supervised to submit activity logs describing the activities they performed on the job. Additionally, SMEs were asked to submit job descriptions, orientation and professional evaluations from their work settings. Using activity logs, past activity statements, job descriptions, performance evaluation documents, as well as their own knowledge of newly licensed RN practices, the panel members worked to create a list of activities performed within each category of the current test plan category structure. Each activity was reviewed for applicability to newly licensed practice and the relationship to the delivery of safe nursing care to members of the public. Care was taken to create the activity statements at approximately the same level of specificity and to avoid redundancy.

After the activity statements were reviewed and approved by the NEC, twelve panel members provided information necessary for validation of the practice analysis survey. They estimated the percentage of nurses in the country that would perform the activity within their practice settings, the average frequency with which each activity would be performed daily by nurses performing the activity (on a 0 to 5+ scale) and the average importance the activity would have in relation to the provision of safe client care (on a 1 to 5 scale).

Survey Development

A number of processes were used to create, evaluate and refine the survey instrument used for the 2014 RN Practice Analysis study. The activity statements created by the panel of experts were reviewed, edited and approved by the NCLEX® Examination Committee. The committee also reviewed the survey form. Additionally, the practice analysis methodology reviewers approved the methodology and procedures. For this survey, both paper and Web-based (Web) versions of the survey were utilized in order to continue the investigation of using only a Web-based survey for practice analyses (NCSBN 2008).

There were 139 nursing activity statements that were incorporated into a practice analysis survey. The survey also included questions about the nurses' practice settings, past experiences and demographics. Half of the sample of newly registered nurses received a paper version of the survey. Two forms of the paper survey were created to decrease the number of activity statements contained on each survey. The other half of the sample received one of three Web versions of the survey. Three forms of the Web survey were created to reduce the number of activity statements on each survey.

For the paper survey, one survey form contained 70 activity statements while the other 69 statements. There were no shared activity statements between the survey forms. There were three Web versions of the survey, two of the Web surveys contained 46 activity statements and one of the Web surveys contained 47 activity statements, without shared activity statements. Except for the activity statements, all surveys were identical.

The survey contained six sections. In the first section there were questions related to type of RN license, working in the U.S., and direct care of clients. Activity statements were also in this section. The second section contained questions about months of work experience as an RN, type and length of work orientation, and certifications earned. The third section focused on work environment including type and age of clients, employment setting, and type and size of facility. The fourth section requested information on the respondents' last day of work including numbers of hours worked, numbers of clients for whom care was provided and the amount of time spent in various types of nursing activities. The fifth section asked basic demographic information. The sixth section provided space for respondents to write comments or suggestions about the study. All forms of the Web and paper versions of the survey used in the 2014 RN Practice Analysis may be found in Appendix C.

Survey Process

Sample Selection

Two samples were randomly selected from the candidates who successfully passed the NCLEX-RN[®] examination from Oct. 1, 2013, through March 31, 2014, and were not previously included in the 2014 Knowledge of Newly Licensed Registered Nurses survey. First, a sample of 6,000 practitioners were randomly selected for the paper survey. Newly licensed RNs were excluded from this sample if their mailing address was not within the jurisdiction in which they were seeking licensure. The exclusion criterion was used to minimize the number of incorrect addresses to which the survey would be sent. The strategy effectively removed all candidates with international addresses. Then, of the remaining candidate pool, candidates with email addresses were extracted. A sample of 6,000 RN candidates was randomly selected from this population for the Web survey.

Representativeness

The sample selected for this study was proportionally equivalent to the population from which the sample was drawn in terms of NCSBN jurisdictions. Table 1 presents the correspondence between the population, the sample and the respondents by NCSBN jurisdiction.

Mailing Procedure

The paper survey was sent to 6,000 newly licensed RNs (half receiving Form 1 and the other half receiving Form 2). The Web survey was sent to the other 6,000 newly licensed RNs; the three versions of the Web survey were distributed evenly among the sample.

Table 1. Correspondence of Population, Sample and Respondents for the 2014 RN Practice Analysis									
	Population	2014 Pap	er Sample		Paper ndents	2014 Web Sample			Web ndents
Jurisdiction	%	N	%	N	%	N	%	N	%
ALABAMA	1.9	116	1.9	30	2	111	1.9	38	1.7
ALASKA	0.3	17	0.3	3	0.2	20	0.3	7	0.3
ARIZONA	2.8	167	2.8	49	3.2	173	2.9	62	2.8
ARKANSAS	1.2	80	1.3	16	1.1	70	1.2	23	1.1
CALIFORNIA	3.6	216	3.6	62	4.1	217	3.6	67	3.1
COLORADO	1.7	91	1.5	20	1.3	112	1.9	37	1.7
CONNECTICUT	1.1	72	1.2	16	1.1	62	1	26	1.2
DELAWARE	0.4	23	0.4	4	0.3	21	0.4	9	0.4
DISTRICT OF COLUMBIA	0.1	5	0.1	2	0.1	4	0.1	2	0.1
FLORIDA	8.8	554	9.2	127	8.4	504	8.4	169	7.7
GEORGIA	2.8	172	2.9	35	2.3	167	2.8	61	2.8
HAWAII	0.4	20	0.3	6	0.4	34	0.6	12	0.5
IDAHO	0.7	38	0.6	14	0.9	44	0.7	17	0.8
ILLINOIS	4.3	244	4.1	56	3.7	268	4.5	94	4.3
INDIANA	2.5	151	2.5	38	2.5	155	2.6	57	2.6
IOWA	1.2	87	1.5	25	1.7	58	1	24	1.1
KANSAS	1.2	73	1.2	18	1.2	63	1.1	26	1.2
KENTUCKY	1.7	102	1.7	30	2	100	1.7	33	1.5
LOUISIANA	2.1	123	2.1	20	1.3	131	2.2	48	2.2
MAINE	0.3	21	0.4	5	0.3	15	0.3	8	0.4
MARYLAND	2.4	149	2.5	45	3	141	2.4	54	2.5
MASSACHUSETTS	1.9	117	2	37	2.4	116	1.9	52	2.4
MICHIGAN	3.6	229	3.8	60	4	203	3.4	60	2.7
MINNESOTA	2	104	1.7	32	2.1	131	2.2	47	2.2
MISSISSIPPI	0.9	51	0.9	8	0.5	55	0.9	23	1.1
MISSOURI	2.6	154	2.6	31	2	161	2.7	52	2.4
MONTANA	0.3	20	0.3	9	0.6	17	0.3	8	0.4
NEBRASKA	0.5	31	0.5	8	0.5	32	0.5	8	0.4
NEVADA	0.8	53	0.9	11	0.7	41	0.7	17	0.8
NEW HAMPSHIRE	0.1	12	0.2	5	0.3	5	0.1	2	0.1
NEW JERSEY	1.8	103	1.7	23	1.5	109	1.8	49	2.2
NEW MEXICO	0.8	41	0.7	10	0.7	50	0.8	14	0.6
NEW YORK	5.7	331	5.5	98	6.5	350	5.8	126	5.8

	Population	2014 Pap	er Sample	2014 Paper Respondents		2014 Web Sample		2014 Web Respondents	
Jurisdiction	%	N	%	N	%	N	%	N	%
NORTH CAROLINA	1.8	111	1.9	30	2	103	1.7	47	2.2
NORTH DAKOTA	0.2	10	0.2	3	0.2	8	0.1	1	0
OHIO	6	358	6	81	5.3	367	6.1	123	5.6
OKLAHOMA	1	62	1	12	0.8	62	1	17	0.8
OREGON	0.6	41	0.7	8	0.5	30	0.5	14	0.6
PENNSYLVANIA	3.8	223	3.7	66	4.4	230	3.8	72	3.3
RHODE ISLAND	0.4	31	0.5	7	0.5	20	0	8	0.4
SOUTH CAROLINA	1.8	102	1.7	26	1.7	117	2	57	2.6
SOUTH DAKOTA	0.5	35	0.6	9	0.6	23	0.4	11	0.5
TENNESSEE	2.7	148	2.5	37	2.4	174	2.9	67	3.1
TEXAS	9.8	594	9.9	141	9.3	579	9.7	216	9.9
UTAH	1.2	76	1.3	17	1.1	65	1.1	31	1.4
VERMONT	0.1	4	0.1	0	0	2	0	2	0.1
VIRGINIA	2.7	164	2.7	40	2.6	160	2.7	54	2.5
WASHINGTON	1.7	82	1.4	23	1.5	120	2	43	2
WEST VIRGINIA	0.4	29	0.5	3	0.2	24	0.4	10	0.5
WISCONSIN	2.6	151	2.5	57	3.8	163	2.7	71	3.3
WYOMING	0.2	12	0.2	2	0.1	13	0.2	8	0.4
TOTAL	100.0	6000	100.0	1515	100.0	6000	100.0	2184	100.0

A five-stage mailing process was used to engage the participants in the study. A pre-survey letter or email was sent to each person selected for the sample on April 14, 2014. A week later, the paper survey, with a cover letter and postage-paid return envelope, was mailed. Web recipients were sent an email invitation with a log-in address and a unique access code. Two weeks later, a postcard/email was sent to all participants reiterating the importance of the study and urging participation. Approximately two weeks after the first postcard/email, a second reminder was sent to nonrespondents and two weeks later, a third postcard/email was sent to continued nonrespondents. The survey was conducted from April through June 2014.

Confidentiality

All potential participants were promised confidentiality with regard to their participation and their responses. Files containing mailing information were kept separate from the data files. Pre-assigned code numbers were used to facilitate cost-effective follow-up mailings. The study protocol was reviewed and approved by NCSBN's Chief Executive Officer for compliance with organizational guidelines for research studies involving human subjects.

Return Rates

Out of the 6,000 paper surveys mailed out, 757 were returned for Form 1 and 758 were received for Form 2. With 71 undeliverable surveys, the adjusted return rate was 25.5% for paper survey. For Web survey, 731 surveys were returned for Form 1, 754 surveys were returned for Form 2, and 699 for Form 3. The return rate was 36.4% for the Web survey. There were 955 individuals (446 paper and 509 Web) who did not qualify for survey ratings based on one of the following reasons: (a) they did not indicate having an RN license; (b) they were not currently working in the U.S.; and/or (c) they were working less than 20 hours per week as an RN. After adjusting for incorrect addresses and removals, the analyzable response rates were 18.0% for paper and 27.9% for Web.

RN Practice Analysis Survey Nonresponder Study

In order to ensure the validity of the results, NCSBN conducted a telephone survey of nonrespondents to determine if those RNs not responding would have rated the survey activity statements differently than the respondents. If there are no systematic differences in respondents versus nonrespondents, we have further evidence that the results are unbiased, which supports of the validity of the 2014 RN Practice Analysis results. The nonrespondents rated the activity statements similar to the respondents, lending support for the validity of the results. See Appendix H for a full report of the nonrespondent study.

Summary

A panel of 12 registered RNs, subject matter experts in the practice of newly licensed RNs, met and created a comprehensive list of RN activity statements. A data collection instrument was developed and revised before being sent to 12,000 newly licensed RNs selected from lists of candidates who passed the NCLEX-RN examination between Oct. 1, 2013, and March 31, 2014. The survey response rate was 18.0% for paper and 27.9% for Web. This practice analysis contains the responses of 2,744 newly licensed RNs.

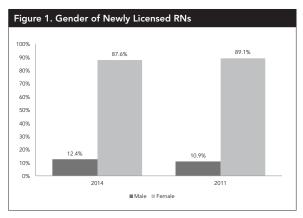
DEMOGRAPHICS, EXPERIENCES AND PRACTICE ENVIRONMENTS OF PARTICIPANTS

Demographics/Past Experiences

Demographic information, including racial and ethnic backgrounds, educational preparation, and gender, are presented next, followed by descriptions of respondents' work environments, including settings, shifts worked and client characteristics.

Age and Gender

In 2014, the majority of survey respondents reported being female (87.6%), a slight decrease from the percentage found in the 2011 RN Practice Analysis study. See *Figure 1* for gender. The age of respondent nurses averaged 31.6 years (SD= 8.8 years), similar to the average of 31.1 years from the 2011 survey.



Race/Ethnicity of Newly Licensed RNs

Participants in the current survey were ethnically diverse, with 74.2% reporting being White. In the current survey, the respondents reported their race/ ethnicity as follows: 10.5% African American; 6.1% Hispanic; 4.1% Asian Other; 1.0% Asian Indian. See *Figure 2* for newly licensed RNs racial/ethnic backgrounds

Of the respondents, 87.7% reported English as their primary language and 9.4% had both English and another language as their primary languages. The primary language of the remaining 2.9% of respondents was not English.

Educational Background

Newly licensed RNs indicated obtaining an associate degree most frequently (54.7%). The second most frequently chosen response was baccalaureate degree (40.4%). It should be noted that this year's survey included an "In progress to complete generic Master's" which was not included in 2011. See *Figure 3* for the educational background of the respondents.

Previous Licensed Practical/Vocational Nurse (LPN/VN) or Nurse Aide/Nursing Assistant (NA) Experience

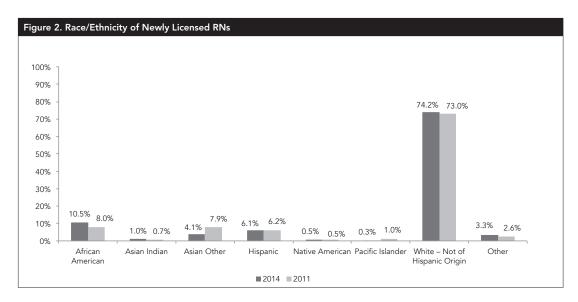
Respondents reported working an average of 3.4 months as RNs in the U.S. and reported being an average of 7.4 out from graduating a nursing program. These data are displayed in *Figure 4*.

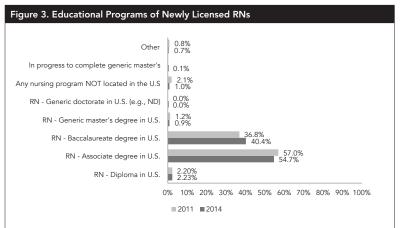
Approximately 16.0% of newly licensed RNs reported previous experience as an LPN/VN and 43.6% reported previous experience as a nurse aide (NA). The average experience in those positions was 6.3 years as a LPN/VN and 3.6 years as an NA. These data are tabulated in *Table 2*.

Table 2. Average Years LPN/VN or NA Experience								
	2014 2011							
	Yrs. Exp	%*	Yrs. Exp	%*				
LPN/VN	6.3	16.0	6.0	13.0				
NA	3.6	43.6	3.4	44.4				
*Indicates the percentage of newly licensed RNs with previous LPN/VN or NA experience								

Orientation

The majority of newly licensed RNs responded receiving some form of formal orientation (95.4%). No formal orientation was reported by 4.6% and 1.2% reported having only classroom instruction or skills lab work for their orientation. Newly licensed RNs responded working with an assigned preceptor (66.5%) for an average of 8.3 weeks, and 11.2% reported performing supervised work with patients for an average of approximately 6.3 weeks. An increased percentage over the previous years, 13.6% of respondents reported having a formal





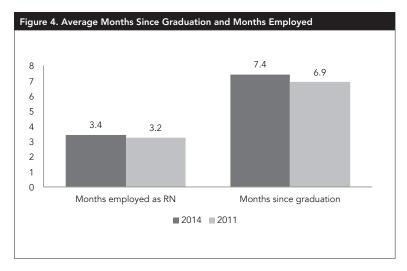


Table 3. Type and Length of Orientation										
	20)14	20)11						
	%	Avg Weeks	%	Avg Weeks						
No formal orientation	4.6	NA	4.6	NA						
Classroom instruction/skills lab work only	1.2	2.6	0.8	3.4						
Classroom and/or skills lab plus supervised work with clients	11.2	6.3	9.7	7.6						
Work with an assigned preceptor(s) or mentor(s) with or without additional classroom or skills lab work	66.5	8.3	73.5	9.0						
A formal internship with or without additional classroom or skills lab work	13.6	13.7	8.8	13.2						
Other	2.9	6.6	2.6	9.2						

Table 4. Additional Coursework/Certification*	ŧ	
	2014	2011
Type of Additional Coursework/Certification	%	%
Type of Additional Coursework/Certification	(n=2,744)	(n=2,832)
Advanced Cardiac Life Support	24.2	22.6
Basic Life Support	57.4	53.3
Behavioral Management	3.4	2.6
Chemotherapy	0.8	1.1
Conscious/Moderate Sedation	3.8	4.6
Coronary Care	1.7	2.6
Critical Care	4.7	6.1
Intravenous Therapy	12.8	13.8
Neonatal Advanced Life Support	0.9	3.2
Neonatal Resuscitation	4.1	N/A
Pediatric Advanced Life Support	6.8	5.6
Phlebotomy	6.6	7.2
Peritoneal Dialysis	1.4	1.6
Rehabilitation	1.2	1.3
None	12.6	19.2
Other	10.2	11.2
*Respondents could select all that apply		

Table 5. Employment Facilities										
	2014	2011								
Type of Facility/Organization	% (n=2,744)	% (n=2,832)								
Hospital	72	76.2								
Long-term care facility	14.7	13.1								
Community-based or ambulatory care facility/organization	9.9	6.9								
Other	3.3	3.8								

Table 6. Employment Setting Characteristics		
	2014	2011
Type of Facility/Organization	% (n=2,744)	% (n=2,832)
Number of Hospital or Nursing Home Beds		
Less than 50 beds	6.6	5.6
50 - 99 beds	9.9	9.1
100 - 299 beds	27.0	27.5
300 - 499 beds	19.0	20.1
500 or more beds	21.0	23.2
Don't know	6.2	6.9
Other work setting	10.2	7.6
Location of Employment Setting		
Urban/Metropolitan area	52.9	55.4
Suburban	31.8	30.8
Rural	15.3	13.7

internship that lasted an average of 13.7 weeks. See *Table 3* for types of orientations with average time spent in each.

Certifications Earned

In the current survey, 87.4% of responders reported earning additional certifications or completing coursework compared to 80.8% of the 2011 responders. Basic Life Support (57.4%), Advanced Cardiac Life Support (24.2%) and Intravenous Therapy (12.8%) were the most frequently reported certifications. See Table 4 for a complete listing of additional coursework and/or certifications completed by survey respondents. The ability to give multiple answers allowed for percentages to equal more than 100%.

Work Settings

Facilities

The majority (72.0%) of newly licensed RNs in this study reported working in hospitals. Only 14.7% reported working in long-term care and 9.9% reported working in community-based facilities. A slight shift can be noted in newly licensed nurses in acute care and long-term care and community based facilities. These data are presented in *Table 5*.

The numbers of beds reported in hospitals or nursing homes were mostly distributed among 100-299 beds (27.0%), 300-499 beds (19.0%) and 500 or more beds (21.0%). Only 16.5% reported working in facilities with fewer than 100 beds. The majority of newly licensed RNs (52.9%) reported working in urban or metropolitan areas, 31.8% worked in suburban areas, and 15.3% worked in rural areas. 597 people did not respond to this item. Data for the size and location of the facilities respondents reported working are presented in *Table 6*.

Practice Settings

Overall, the majority of newly licensed RNs reported working in medical/surgical (27.7%) and critical care (18.7%) settings, which represents a decrease in these settings as compared to the 2011 findings. On the other hand, an increase is seen in such settings as nursing home, skilled or intermediate care (from 9.5% to 11.2%) and rehabilitation (from 4.9% to 5.5%). Additionally, the 2014 RN Practice Analysis reflected two new categories, Short Stay/ Observational (1.2%) and Step-Down Progressive Care (4.3%) which may further account for the decrease in percentages for the medical/surgical and critical care practice settings. See *Table 7*.

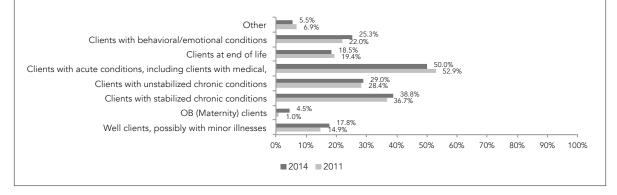
Client Health Conditions

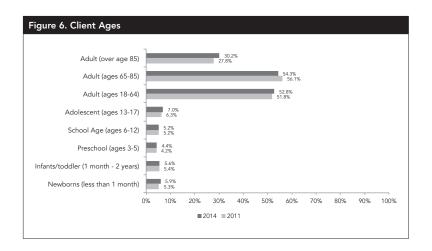
Newly licensed RNs reported caring for acutely ill clients (50.0%), clients with stable chronic conditions (38.8%), clients with unstable chronic conditions

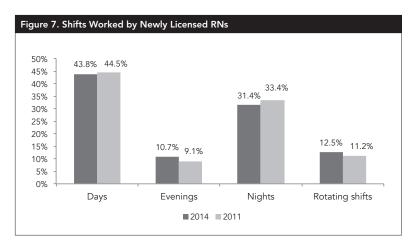
Table 7. Practice Settings*	2014	2011
	2014	2011
Type of Facility/Organization	(n=2,744)	(n=2,832)
Critical care (e.g., ICU, CCU, step-down units, pediatric/neonatal intensive care, emergency department, postanesthesia recovery unit)	18.7	23.5
Medical-surgical unit or any of its subspecialties (e.g., oncology, orthopedics, neurology)	27.7	31.0
Pediatrics	3.6	3.8
Nursery	1.2	0.9
Labor and delivery	2.0	2.2
Postpartum unit	1.9	1.4
Psychiatry or any of its subspecialties (e.g., detox)	3.9	2.8
Assisted Living	1.4	0.8
Operating room, including outpatient surgery and surgicenters	2.5	2.4
Nursing home, skilled or intermediate care	11.2	9.5
Other long-term care (e.g., residential care, developmental disability)	2.5	1.8
Rehabilitation	5.5	4.9
Subacute unit	2.0	1.5
Transitional care unit	1.3	1.0
Physician/APRN/Dentist office	1.1	1.0
Occupational health	0.1	0.1
Outpatient clinic	2.4	1.6
Home health, including visiting nurses associations	3.5	2.0
Public health	0.5	0.2
Student/school health	0.4	0.3
Hospice care	1.3	1.3
Prison/Correctional Facility/Jail	0.7	0.2
Short Stay/Observational	1.2	N/A
Step-down/Progressive Care	4.3	N/A
Other	4.5	5.7

*Survey participants could select more than one setting to describe their practices

Figure 5. Client Health Conditions







(29.0%) and clients with behavior/emotional conditions (25.3%). These results are similar to the 2011 results. The ability to give multiple answers allowed for percentages to equal more than 100%. *See Figure 5.*

Client Ages

The majority of newly licensed RNs reported caring for older adult clients aged 65 to 85 (54.3%), adult clients aged 18 to 64 (52.8%), and older adult clients aged 85 or older (30.2%). See Figure 6. The ability to give multiple answers allowed for percentages to equal more than 100%.

On average, the respondents were responsible for 11.5 clients on their last work day with a standard deviation of 23.87.

Shifts Worked

The shifts most commonly worked by newly licensed RNs continued to be days (43.8%) and nights (31.4%). Only 12.5% of respondents reported working rotating shifts. Note that 1.5% selected "other" for shifts worked and these responses are not reflected in Figure 7. See Figure 7 for shifts reported in 2011 and 2014.

The majority of the respondents (62.6%) worked a 12-hour shift on a typical work day; 23.4% worked 8-hour on a typical shift. About 4.4% of the RNs worked a 10-hour shift.

Time Spent in Different Categories of Nursing Activities

The respondents to the current survey were asked to record the number of hours spent performing

specific categories of activities (see Table 8). The hours spent were then converted to proportions of time by dividing the hours reported spent on each activity by the number of hours reported spent working. Because nurses often perform more than one type of activity at a time, such as teaching while giving medications or providing emotional support while giving routine care, these proportions did not equal 1. In order to make the proportions of time spent in activities useful to the task of helping to validate the NCLEX-RN® test plan, the proportions were standardized by dividing the time spent in each category of activity by the sum of hours reportedly spent in all the activities. These standardized proportions have the advantage of adding up to 1. Newly licensed RNs reported spending the greatest amount of time in management of care (18%), physiological adaption (14%), and pharmacological and parenteral therapies (13%). The relatively least amount of time was reportedly spent on health promotion and maintenance activities (11%), psychosocial integrity (11%), and reduction of risk potential (11%). Compared to the 2011 study, there are only very slight variations in time spent on almost all categories of activities.

Administrative Responsibilities/Primary Administrative Position

The newly licensed RNs responding to the practice analysis survey were asked if they had administrative responsibilities within their nursing position such as being a unit manager, a team leader, charge nurse, or a coordinator. If they reported such responsibilities, they were asked if they had a primary administrative position. Of all respondents, 21.4% reported having such responsibilities and of those respondents who reported having administrative responsibilities, 43.4% reported having a primary administrative position. Those working in long-term care facilities were more likely to report having administrative responsibilities than those working in hospitals (60.6% in long-term care vs. 9.4% in hospitals). In addition, those working in long-term care with administrative responsibilities were three times as likely to report being in a primary administrative position than those working in hospitals (61.2% of those working in long-term care reported having a primary administrative position compared to 20.8%

of those working in hospitals). Of those working in community-based settings, 37.7% reported having administrative responsibilities. Of those respondents, 46.8% reported holding a primary administrative position. Compared to 2011, these results represent a slight increase in administrative responsibilities overall, but a decrease in every type of facility with the exception of Community-based care in holding a primary administrative position. See Table 9 for detailed results of administrative responsibilities.

Summary

The newly licensed RNs responding to the 2014 RN Practice Analysis survey were primarily female with an average age of 31.6 years. The majority worked day or night shifts in medical/surgical or critical care units of hospitals. The majority of respondents were provided an orientation with an assigned preceptor or mentor for an average of about 8 weeks. The respondents cared mostly for clients with acute conditions who were 18-85 years of age.

Table 8. Average	Time Spent in Different Categories of Nursing Acti	vities			
Categories of Ac	tivities	2014 Average Hours	2014 Proportion of Work Hours	2014 Standardized Proportion	2011 Standardized Proportion
Perform and direct activities that manage client care within the health care delivery setting (e.g., advance directives, advocacy, case management, client rights, collaboration with interdisciplinary team, concepts of management, confidentiality and information security, consultation, continuity of care, delegation, establishing priorities, ethical practice, information technology, legal rights and responsibilities, performance improvement/quality improvement, referrals, resource management, staff education and supervision).		5.72	0.52	0.18	0.18
Safety and Infection Control	Perform and direct activities that protect client and health care personnel from hazards encountered in the health care setting (e.g., accident prevention, disaster planning, emergency response plan, ergonomic principles, error prevention, handling hazardous and infectious materials, home safety, injury prevention, medical/surgical asepsis, report of incident/ event/irregular occurrence/variance, safe use of equipment, security plan, standard/ transmission based/ other precautions and use of restraints/ safety devices).	4.51	0.41	0.12	0.12
Health Promotion and Maintenance	Perform and direct activities that promote and maintain the health of client (e.g., aging process, ante/intra/post partum/newborn care, developmental stages and transitions, disease prevention, expected body image changes, family planning, family systems, growth and development, health and wellness, health promotion programs, health screening, high risk behaviors, human sexuality, immunizations, lifestyle choices, principles of teaching/learning, self care, and techniques of physical assessment).	3.93	0.36	0.11	0.11
Psychosocial Integrity	Perform and direct activities related to caring for client with emotional, mental and social problems/ issues, including providing behavioral interventions (e.g., abuse/neglect, behavioral interventions, chemical and other dependencies, coping mechanisms, crisis intervention, cultural diversity, end of life care, family dynamics, grief and loss, mental health concepts, psychopathology, religious and spiritual influences on health, sensory/ perceptual alterations, situational role changes, stress management, support systems, therapeutic communications, therapeutic environment, and unexpected body image changes)	3.94	0.36	0.11	0.11
Basic Care and Comfort	Provide and direct basic care and comfort measures including promoting client ability to perform activities of daily living (e.g. assistive devices, complementary and alternative therapies, elimination, mobility/immobility, nonpharmacological comfort interventions, nutrition and oral hydration, palliative/comfort care, personal hygiene, and rest/sleep).	4.23	0.38	0.12	0.11

	Time Spent in Different Categories of Nursing Acti	2014 Average	2014 Proportion of	2014 Standardized	2011 Standardized
Categories of Ac Pharmacological and Parenteral Therapies	tvities Perform and direct activities necessary for safe administration of medications and intravenous therapies (e.g., adverse effects/ contraindications and side effects, blood and blood products, central venous access devises, dosage calculation, expected effects/ outcomes, medication administration, parenteral/intravenous therapy, pharmacological agents/actions, pharmacological interactions, pharmacological pain management, and total parenteral nutrition).	Hours 4.31	0.39	0.13	0.13
Reduction of Risk Potential	Perform and direct activities to prepare for and care for client undergoing a treatment/ procedure/ surgery to reduce the likelihood that client will develop a complication or health problem related to existing condition, (e.g., diagnostic tests, laboratory values, monitoring moderate/		0.37	0.11	0.11
Physiological Adaptation	Provide and direct care for client with acute, chronic or life threatening physical health condition (e.g., alterations in body systems, fluid and electrolyte imbalances, hemodynamics, illness management, infectious disease, medical emergencies, pathophysiology, radiation therapy, and unexpected response to therapy).	4.99	0.45	0.14	0.15

Table 9. Administrative Responsibilities											
	20)14	2011								
	Administrative Responsibility	Primary Administrative Position*	Administrative Responsibility	Primary Administrative Position*							
Facilities	%	%	%	%							
All	21.4	43.4	17.2	50.0							
Hospital	9.4	20.8	6.5	29.2							
Long-term care	60.6	61.2	61.2	67.8							
Community-based care	37.7	46.8	34.9	37.7							
Other	54.3	52.8	49.4	43.9							

*Percent of all relevant responders

ACTIVITY STATEMENT PERFORMANCE FINDINGS

Findings relative to the activities performed by newly licensed RNs are presented in this section of the report. The methods used to collect and analyze activity statement findings, the representativeness of activity statements, applicability to practice settings, frequency of performance, and importance of the activities will be discussed. A validation of survey findings with estimates provided by the subject matter expert panel will also be provided.

Overview of Methods

The 2014 RN Practice Analysis survey asked respondents to answer two questions about each activity statement. Question A addressed the frequency of activity performance. The scale of frequency ranged from "Never performed in work setting" to "5 or more times." Respondents were instructed to mark "Never performed in work setting" if an activity did not apply to their work setting and then to move to the next activity. If the activity did apply to their work setting, they were asked to mark on a six-point scale of 0-5+, reflecting the frequency with which they had performed the activity on their last day of work. In question B, they were then asked to rate the overall importance of the activity considering client safety and/or threat of complications or distress on a scale of 1 to 5 with one being "Not Important" to five being "Critically Important." The respondent ratings were analyzed in three parts. Applicability to practice setting was assessed by analyzing the number of respondents having performed each activity statement, excluding those that marked "never performed."

Activity Performance Characteristics

Reliability

Reliability indices were calculated to assess the capability of the survey to measure the activities relevant to safe and effective practice of newly licensed RNs. Cronbach's alpha coefficients were calculated for frequency and importance ratings for the paper and Web forms of the survey to measure the internal consistency of the instrument (Cronbach, 1951). Alpha coefficients range from 0 to 1; a value of 0.70 or greater is generally considered adequate. As can be seen in Table 10, the data suggest strong evidence for the reliability of the measured outcomes in this survey.

SME Panel Validation of Survey Findings

The SME panel for the 2014 RN Practice Analysis was asked to provide independent ratings of the 139 activity statements. They estimated the percentage of newly licensed RNs performing the activities within their practice settings, the average setting-specific frequency with which the activities were performed during one day and the average importance of the activities. After the ratings were obtained, average total group frequency estimates were calculated by prorating the setting-specific frequencies with the estimates of setting applicability. All panel ratings were averaged across panel members and compared to the ratings obtained from the practice analysis survey. The importance ratings estimated by panel members were compared to the average importance ratings from the practice analysis

Table 10. Reliability Estimates												
		Frequency		Importance								
	N Items	N Cases	Scale Reliability	N Items	N Cases	Scale Reliability						
Paper Form 1	70	535	0.97	70	535	0.97						
Paper Form 2	69	534	0.96	69	534	0.97						
Web Form 1	47	576	0.95	47	576	0.96						
Web Form 2	Web Form 2 46 563		0.95	46	563	0.96						
Web Form 3	46	536	0.95	46	536	0.95						

survey. As can be seen in Table 11, there were no differences greater than 0.70 between the SME ratings and the newly licensed RNs. In general, the respondents rated most of the activity statements slightly more important than the SMEs did.

Representativeness of Activity Statements

Respondents were asked whether the activities on their survey form represented what they actually did in their positions. A large majority of participants (89.3%) indicated that the survey covered the important nursing activities "well" or "very well."

Applicability of Activities to Practice Setting

Respondents indicated if each of the activities was not applicable to his or her work setting by marking "Never performed in work setting." The percentages of newly licensed nurses indicating that the activities were applicable are reported in Table 12. The activities ranged from 21.5% applicability (21.5% of the respondents reported that the activity was performed within their work settings) to 100.0% (100.0% of the respondents reported the activity was performed within their work setting). The activities with the lowest percentage of applicability were "Provide care and education to a client in labor and antepartum client" (21.5%), "Provide post-partum care and education" (23.0%) and "Provide care and education for the newborn less than 1 month old through the infant or toddler client through 2 years" (26.7%). The activities with the highest percentage of applicability for respondents were "Organize workload to manage time effectively" (100.0%) and "Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions)" (100.0%).

Frequency of Activity Performance

Respondents were asked to rate the frequency of performance of all activities that were applicable to their work settings. They reported how frequently they performed the activity on the last day they worked using a six-point scale: "0 times" to "5 times or more." Average frequency statistics were calculated in two ways. The setting-specific frequency was calculated by averaging the frequency ratings of those respondents providing ratings (i.e., respondents indicating that the activity applied to their work setting). The total group frequency was calculated by including the missing frequency ratings (i.e., respondents indicating that the activity did not apply to their work setting) before averaging the rating. To do this, the missing frequency ratings were converted to zero ("0 times" on the rating scale) for inclusion in the total group frequency calculation. See Table 12 for settingspecific and total group frequency.

Setting-Specific

Average setting-specific frequencies ranged from 0.67 to 4.94. The activities performed with the lowest frequencies were "Implement emergency response plans (e.g., internal/external disaster, bomb threat, community planning)" (0.67), "Implement and monitor phototherapy" (0.67), "Perform hemodialysis or continuous renal replacement therapy" (0.68), and "Perform and manage care of client receiving peritoneal dialysis" (0.70). The activities with the highest setting-specific average frequencies of performance were "Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/ standard precautions)" (4.94), "Provide care within the legal scope of practice" (4.82), and "Ensure proper identification of client when providing care" (4.82). Appendix D presents activity statements rank ordered by average setting-specific frequency.

Total Group

Average total group frequencies ranged from 0.20 to 4.94. The activities performed with the lowest total group frequency were "Implement and monitor phototherapy" (0.20), "Perform hemodialysis or continuous renal replacement therapy" (0.22), and "Provide post-partum care and education (0.31). Those activities performed with the overall highest frequencies were "Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/ standard precautions)" (4.94), "Provide care within the legal scope of practice" (4.82), and "Ensure proper identification of client when providing care" (4.80). Appendix E presents activity statements rank ordered by average total group frequency.

Importance of Activity Performance

Respondents were asked to rate the importance of performing each nursing activity in regard to the maintenance of client safety and/or threat of complications or distress. Respondents were further requested to consider the importance of activity performance in terms of client safety, namely risk of unnecessary complications, impairment of function or serious distress to clients. Importance ratings were recorded using a five-point scale of "1" (Not Important) to "5" (Critically Important). Average importance ratings were calculated in two ways. Setting-specific importance was calculated by averaging only the ratings of respondents providing frequency ratings for the activity statement (those indicating that the activity applied to their work setting). The total group importance was calculated by including all importance ratings regardless of applicability to work setting. The average importance rating for each of the 139 activities is reported in Table 13.

Setting-Specific

Average setting-specific importance ratings ranged from 3.52 to 4.91. The activities with the lowest importance ratings were "Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)" (3.52), "Plan and/or participate in community health education" (3.55), and "Perform post-mortem care" (3.73). The activities with the highest importance ratings were "Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions)" (4.91), "Prepare and administer medications, using rights of medication administration" (4.89), and "Ensure proper identification of client when providing care" (4.88). Appendix F displays activity statements rank ordered by average setting-specific importance ratings.

Total Group

Average total group importance ratings ranged from 3.31 to 4.91. The activities with the lowest importance ratings were "Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)" (3.31), "Plan and/or participate in community health education" (3.37), and "Implement and monitor phototherapy" (3.42). The activities with the highest importance ratings were "Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions)" (4.91), "Ensure proper identification of client when providing care" (4.88), and "Prepare and administer medications, using rights of medication administration" (4.88). Appendix G presents activity statements rank ordered by average total group importance ratings.

Table 11.	Average Frequency and Importance Ratings (Total Group) ar	nd Percent Per	forming from I	RN Practice An	alysis Survey a	nd RN Practice	Analysis Surve	y SME Panel		
		Newly Lice	ensed RN Surv	ey Ratings	SN	IE Ratings Res	ults	R	ating Differenc	es
Activity Number	Activity	Apply to Setting (%)	Average Frequency (Total Group)	Average Importance (Total Group)	Apply to Setting (%)	Average Frequency (Total Group)	Average Importance (Total Group)	Apply to Setting Difference	Total Group Frequency Difference	Total Group Importance Difference
1	Perform procedures necessary to safely admit, transfer or discharge a client	95.33	2.99	4.34	91.67	2.33	4.08	3.66	0.66	0.26
2	Provide and receive hand off of care (report) on assigned clients	97.39	3.53	4.58	91.67	3.08	4.33	5.72	0.45	0.25
3	Assign and supervise care provided by others (e.g., LPN/VN, assistive personnel, other RNs)	92.11	3.18	4.05	75.00	2.08	3.50	17.11	1.10	0.55
4	Advocate for client rights and needs	99.58	3.70	4.59	91.67	2.92	4.25	7.91	0.78	0.34
5	Prioritize the delivery of client care	98.96	4.50	4.65	100.00	4.17	4.92	-1.04	0.33	-0.27
6	Participate in performance improvement/quality improvement process	90.72	1.85	3.84	83.33	0.92	3.17	7.39	0.93	0.67
7	Collaborate with interprofessional team members when providing client care (e.g., language interpreter, health care professionals)	98.75	3.91	4.49	91.67	3.25	4.17	7.08	0.66	0.32
8	Receive and/or transcribe health care provider orders	97.57	3.39	4.52	91.67	3.83	4.75	5.90	-0.44	-0.23
9	Integrate advance directives into client plan of care	85.47	1.50	3.98	83.33	0.75	3.42	2.14	0.75	0.56
10	Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)	74.61	0.60	4.48	91.67	0.17	4.17	-17.06	0.43	0.31
11	Verify that the client received appropriate procedure education and consents to care and procedures	95.95	2.85	4.46	100.00	2.17	4.17	-4.05	0.68	0.29
12	Provide education to clients and staff about client rights and responsibilities	96.90	2.85	4.18	91.67	1.50	3.50	5.23	1.35	0.68
13	Recognize the need for referrals and obtain necessary orders	96.05	2.58	4.12	91.67	1.83	3.92	4.38	0.75	0.20
14	Initiate, evaluate, and update plan of care (e.g., care map, clinical pathway)	95.07	3.13	3.95	91.67	3.33	3.58	3.40	-0.20	0.37
15	Maintain client confidentiality and privacy	99.89	4.72	4.69	100.00	4.58	5.00	-0.11	0.14	-0.31
16	Recognize limitations of self and others and seek assistance	99.05	3.35	4.48	100.00	2.83	4.50	-0.95	0.52	-0.02
17	Report client conditions as required by law (e.g., abuse/ neglect and communicable disease)	80.19	0.80	4.43	83.33	0.50	4.33	-3.14	0.30	0.10

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Table 11.	Average Frequency and Importance Ratings (Total Group) a	nd Percent Per	forming from I	RN Practice An	alysis Survey a	nd RN Practice	Analysis Surve	y SME Panel		
		Newly Lic	ensed RN Surv	ey Ratings	SME Ratings Results			Rating Differences		
Activity Number	Activity	Apply to Setting (%)	Average Frequency (Total Group)	Average Importance (Total Group)	Apply to Setting (%)	Average Frequency (Total Group)	Average Importance (Total Group)	Apply to Setting Difference	Total Group Frequency Difference	Total Group Importance Difference
18	Manage conflict among clients and health care staff	89.87	1.26	3.82	100.00	0.75	3.58	-10.13	0.51	0.24
19	Utilize valid resources to enhance the care provided to a client (e.g., evidenced-based research, information technology, policies and procedures)	97.40	3.32	4.23	100.00	2.50	4.08	-2.60	0.82	0.15
20	Recognize ethical dilemmas and take appropriate action	90.02	1.01	4.12	91.67	0.42	3.67	-1.65	0.59	0.45
21	Use approved abbreviations and standard terminology when documenting care	98.72	4.38	4.11	100.00	4.08	3.92	-1.28	0.30	0.19
22	Organize workload to manage time effectively	100.00	4.50	4.51	100.00	4.42	4.50	0.00	0.08	0.01
23	Practice in a manner consistent with a code of ethics for registered nurses	99.90	4.73	4.69	100.00	4.42	4.42	-0.10	0.31	0.27
24	Provide care within the legal scope of practice	99.89	4.82	4.83	100.00	4.58	4.83	-0.11	0.24	0.00
25	Provide cost effective care	97.48	3.77	3.81	100.00	3.00	3.92	-2.52	0.77	-0.11
26	Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/ standard precautions)	100.00	4.94	4.91	100.00	4.33	4.83	0.00	0.61	0.08
27	Protect client from injury (e.g., falls, electrical hazards)	99.36	4.43	4.83	100.00	3.17	4.67	-0.64	1.26	0.16
28	Verify appropriateness and/or accuracy of a treatment order	99.15	3.94	4.68	100.00	3.08	4.58	-0.85	0.86	0.10
29	Follow procedures for handling biohazardous and hazardous materials	97.29	3.30	4.51	91.67	2.00	4.17	5.62	1.30	0.34
30	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	90.36	2.09	4.30	83.33	1.92	4.50	7.03	0.17	-0.20
31	Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	98.74	4.19	4.45	91.67	2.92	4.58	7.07	1.27	-0.13
32	Acknowledge and document practice errors (e.g., incident report for medication error)	85.95	0.63	4.48	91.67	0.67	4.42	-5.72	-0.04	0.06
33	Ensure proper identification of client when providing care	99.68	4.80	4.88	100.00	4.25	4.92	-0.32	0.55	-0.04
34	Facilitate appropriate and safe use of equipment	99.16	4.02	4.47	100.00	3.75	4.42	-0.84	0.27	0.05
35	Educate client on safety issues (e.g., home, school, transportation)	96.04	2.86	4.10	91.67	1.17	3.75	4.37	1.69	0.35

Table 11.	Average Frequency and Importance Ratings (Total Group) a	nd Percent Per	forming from F	RN Practice An	alysis Survey a	nd RN Practice	Analysis Surve	ey SME Panel		
		Newly Lic	Newly Licensed RN Survey Ratings SME Ratings Results			ults Rating Differences			es	
Activity Number	Activity	Apply to Setting (%)	Average Frequency (Total Group)	Average Importance (Total Group)	Apply to Setting (%)	Average Frequency (Total Group)	Average Importance (Total Group)	Apply to Setting Difference	Total Group Frequency Difference	Total Group Importance Difference
36	Implement emergency response plans (e.g., internal/ external disaster, bomb threat, community planning)	72.03	0.48	4.18	75.00	0.00	4.17	-2.97	0.48	0.01
37	Follow requirements for use of restraints and/or safety devices (e.g., least restrictive restraints, timed client monitoring)	80.67	1.74	4.25	75.00	0.92	4.25	5.67	0.82	0.00
38	Educate client and staff regarding infection control measures	95.16	2.52	4.35	91.67	1.58	4.33	3.49	0.94	0.02
39	Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	97.45	3.42	4.68	91.67	3.50	4.67	5.78	-0.08	0.01
40	Provide prenatal care and education	28.56	0.38	3.66	33.33	0.83	3.83	-4.77	-0.45	-0.17
41	Plan and/or participate in community health education	61.79	0.63	3.37	41.67	0.67	3.50	20.12	-0.04	-0.13
42	Perform targeted screening assessments (e.g., vision, nutrition)	80.77	2.03	3.84	58.33	1.33	3.67	22.44	0.70	0.17
43	Provide information for prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	85.16	1.97	3.96	91.67	1.75	3.67	-6.51	0.22	0.29
44	Provide information about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	94.87	2.36	3.91	91.67	1.92	3.83	3.20	0.44	0.08
45	Provide care and education to a client in labor or antepartum client	21.52	0.35	3.56	33.33	0.58	3.75	-11.81	-0.23	-0.19
46	Provide post-partum care and education	23.00	0.31	3.66	41.67	0.75	3.83	-18.67	-0.44	-0.17
47	Perform comprehensive health assessments	94.45	3.82	4.54	91.67	2.92	4.25	2.78	0.90	0.29
48	Assess client's readiness to learn, learning preferences and barriers to learning	95.37	3.31	4.10	100.00	2.17	3.75	-4.63	1.14	0.35
49	Provide care and education for the newborn less than 1 month old through the infant or toddler client through 2 years	26.67	0.58	3.77	41.67	1.92	4.08	-15.00	-1.34	-0.31
50	Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	39.50	0.71	3.66	33.33	1.42	3.83	6.17	-0.71	-0.17
51	Provide care and education for the adult client ages 18 through 64 years	94.33	4.04	4.28	91.67	3.58	4.42	2.66	0.46	-0.14

Table 11. Average Frequency and Importance Ratings (Total Group) and Percent Performing from RN Practice Analysis Survey and RN Practice Analysis Survey SME Panel										
		Newly Licensed RN Survey Ratings		ey Ratings	SME Ratings Results			Rating Differences		
Activity Number	Activity	Apply to Setting (%)	Average Frequency (Total Group)	Average Importance (Total Group)	Apply to Setting (%)	Average Frequency (Total Group)	Average Importance (Total Group)	Apply to Setting Difference	Total Group Frequency Difference	Total Group Importance Difference
52	Provide care and education for the adult client ages 65 through 85 years and over	86.95	3.47	4.21	83.33	3.17	4.25	3.62	0.30	-0.04
53	Assess client ability to manage care in home environment and plan care accordingly (e.g., equipment, community resources)	84.62	1.99	3.99	100.00	1.08	3.83	-15.38	0.91	0.16
54	Assess and teach clients about health risks based on family, population, and/or community characteristics	87.66	1.92	3.76	91.67	1.25	3.58	-4.01	0.67	0.18
55	Assess psychosocial, spiritual and occupational factors affecting care, and plan interventions	93.93	2.88	3.96	91.67	1.67	3.58	2.26	1.21	0.38
56	Assess client for abuse or neglect and intervene as appropriate	89.61	1.80	4.33	83.33	1.25	3.75	6.28	0.55	0.58
57	Assess client for drug/alcohol dependencies, withdrawal, or toxicities and intervene as appropriate	86.61	1.90	4.07	91.67	1.58	3.92	-5.06	0.32	0.15
58	Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	86.24	2.11	4.07	75.00	1.25	4.00	11.24	0.86	0.07
59	Provide a therapeutic environment	98.54	4.36	4.24	100.00	3.75	4.08	-1.46	0.61	0.16
60	Incorporate client cultural practice and beliefs when planning and providing care	94.60	2.35	3.92	100.00	1.92	3.92	-5.40	0.43	0.00
61	Provide end of life care and education to clients	73.17	1.03	4.10	66.67	0.42	3.92	6.50	0.61	0.18
62	Assess the potential for violence and use safety precautions (e.g., suicide, homicide, self-destructive behavior)	91.20	2.04	4.37	75.00	1.42	4.42	16.20	0.62	-0.05
63	Assess family dynamics to determine plan of care (e.g., structure, bonding, communication, boundaries, coping mechanisms)	91.79	2.46	3.88	91.67	2.08	3.75	0.12	0.38	0.13
64	Assess client in coping with life changes and provide support (e.g., palliative, amputation, new diagnosis)	89.40	2.04	4.19	75.00	1.17	3.75	14.40	0.87	0.44
65	Use therapeutic communication techniques to provide client support	99.38	4.30	4.25	100.00	4.08	4.08	-0.62	0.22	0.17
66	Incorporate behavioral management techniques when caring for a client (e.g., positive reinforcement, setting limits, de-escalation techniques)	93.13	2.49	3.99	91.67	1.58	3.92	1.46	0.91	0.07

Table 11.	Average Frequency and Importance Ratings (Total Group) a	nd Percent Per	forming from F	RN Practice An	alysis Survey a	nd RN Practice	Analysis Surve	y SME Panel		
		Newly Lice	ensed RN Surv	ey Ratings	SN	IE Ratings Res	ults	R	ating Differenc	es
Activity Number	Activity	Apply to Setting (%)	Average Frequency (Total Group)	Average Importance (Total Group)	Apply to Setting (%)	Average Frequency (Total Group)	Average Importance (Total Group)	Apply to Setting Difference	Total Group Frequency Difference	Total Group Importance Difference
67	Recognize non-verbal cues to physical and/or psychological stressors	98.85	3.67	4.28	91.67	2.33	3.83	7.18	1.34	0.45
68	Provide care for a client experiencing visual, auditory or cognitive distortions (e.g., hallucinations)	83.65	1.50	3.96	75.00	0.42	3.92	8.65	1.08	0.04
69	Assess and intervene in client performance of activities of daily living	93.49	3.31	4.00	100.00	3.00	4.17	-6.51	0.31	-0.17
70	Provide client nutrition through continuous or intermittent tube feedings	80.08	1.57	4.16	75.00	1.17	4.00	5.08	0.40	0.16
71	Perform post-mortem care	68.50	0.53	3.60	50.00	0.08	3.33	18.50	0.45	0.27
72	Perform irrigations (e.g., of bladder, ear, eye)	77.21	0.80	3.66	66.67	1.00	3.83	10.54	-0.20	-0.17
73	Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	93.63	3.13	4.17	91.67	1.83	3.75	1.96	1.30	0.42
74	Perform skin assessment and implement measures to maintain skin integrity and prevent skin breakdown (e.g., turning, repositioning, pressure-relieving support surfaces)	96.75	3.95	4.58	91.67	2.25	4.33	5.08	1.70	0.25
75	Assess and manage client with an alteration in elimination (e.g., bowel, urinary)	94.33	3.30	4.16	83.33	2.67	4.00	11.00	0.63	0.16
76	Apply, maintain or remove orthopedic devices (e.g., traction, splints, braces, casts)	72.97	1.08	3.67	75.00	0.33	3.33	-2.03	0.75	0.34
77	Apply and maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	87.91	2.86	4.22	83.33	1.75	3.75	4.58	1.11	0.47
78	Provide nonpharmacological comfort measures (e.g., light dimming, warm blanket)	98.41	3.72	3.88	91.67	2.00	3.58	6.74	1.72	0.30
79	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)	67.37	0.88	3.31	75.00	0.42	3.25	-7.63	0.46	0.06
80	Manage the client's nutritional intake (e.g., adjust diet, monitor height and weight)	93.45	2.93	3.96	91.67	2.33	3.83	1.78	0.60	0.13
81	Assess client need for sleep/rest and intervene as needed	92.78	2.99	3.83	91.67	2.00	3.83	1.11	0.99	0.00

Table 11. Average Frequency and Importance Ratings (Total Group) and Percent Performing from RN Practice Analysis Survey and RN Practice Analysis Survey SME Panel													
		Newly Lic	ensed RN Surv	ey Ratings	SN	IE Ratings Res	ults	R	ating Differenc	es			
Activity Number	Activity	Apply to Setting (%)	Average Frequency (Total Group)	Average Importance (Total Group)	Apply to Setting (%)	Average Frequency (Total Group)	Average Importance (Total Group)	Apply to Setting Difference	Total Group Frequency Difference	Total Group Importance Difference			
82	Evaluate client intake and output and intervene as needed	94.47	3.53	4.30	83.33	3.00	4.00	11.14	0.53	0.30			
83	Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	90.84	3.05	4.13	83.33	1.50	3.83	7.51	1.55	0.30			
84	Assess client need for pain management	99.20	4.49	4.50	100.00	3.75	4.33	-0.80	0.74	0.17			
85	Evaluate appropriateness and accuracy of medication order for client	98.99	4.35	4.81	100.00	3.92	4.58	-1.01	0.43	0.23			
86	Prepare and administer medications, using rights of medication administration	98.87	4.67	4.88	100.00	4.67	4.83	-1.13	0.00	0.05			
87	Perform calculations needed for medication administration	96.49	3.04	4.75	91.67	2.00	4.58	4.82	1.04	0.17			
88	Monitor intravenous infusion and maintain site (e.g., central, PICC, epidural and venous access devices)	89.93	3.33	4.61	83.33	3.50	4.67	6.60	-0.17	-0.06			
89	Administer controlled substances within regulatory guidelines (e.g., witness, waste)	95.31	3.64	4.61	83.33	3.00	4.42	11.98	0.64	0.19			
90	Handle and maintain medication in a safe and controlled environment	99.55	4.71	4.78	100.00	4.33	4.50	-0.45	0.38	0.28			
91	Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)	99.10	4.22	4.80	100.00	3.58	4.83	-0.90	0.64	-0.03			
92	Titrate dosage of medication based on assessment and ordered parameters (e.g., giving insulin according to blood glucose levels, titrating medication to maintain a specific blood pressure)	91.21	2.98	4.72	83.33	2.42	4.75	7.88	0.56	-0.03			
93	Administer blood products and evaluate client response	74.24	0.92	4.62	75.00	1.42	4.75	-0.76	-0.50	-0.13			
94	Access venous access devices, including tunneled, implanted and central lines	81.51	2.09	4.32	66.67	2.00	4.67	14.84	0.09	-0.35			
95	Educate client about medications	97.98	3.81	4.43	100.00	3.33	4.42	-2.02	0.48	0.01			
96	Evaluate client response to medication (e.g., therapeutic effects, side effects, adverse reactions)	99.32	4.50	4.66	100.00	3.42	4.67	-0.68	1.08	-0.01			
97	Administer parenteral nutrition and evaluate client response (i.e., TPN)	70.18	0.91	4.05	66.67	1.00	4.17	3.51	-0.09	-0.12			

Recognize trends and changes in client condition and

Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction,

intervene as needed

negative pressure wound therapy)

	CTIVITY STATEMENT PERFORMANCE FINDINGS Average Frequency and Importance Ratings (Total Group) ar	nd Percent Per	forming from I	RN Practice An	alysis Survey a	nd RN Practice	Analysis Surve	ey SME Panel		
		Newly Lic	ensed RN Surv	ey Ratings	SN	IE Ratings Res	ults	R	ating Differenc	es
Activity Number	Activity	Apply to Setting (%)	Average Frequency (Total Group)	Average Importance (Total Group)	Apply to Setting (%)	Average Frequency (Total Group)	Average Importance (Total Group)	Apply to Setting Difference	Total Group Frequency Difference	Total Group Importance Difference
98	Administer pharmacological measures for pain management	96.95	3.93	4.41	100.00	3.67	4.33	-3.05	0.26	0.08
99	Participate in medication reconciliation process	88.71	2.14	4.22	91.67	2.08	4.17	-2.96	0.06	0.05
100	Assess and respond to changes in client vital signs	99.21	3.87	4.78	100.00	3.33	4.67	-0.79	0.54	0.11
101	Perform focused assessment	97.53	4.09	4.56	91.67	4.25	4.50	5.86	-0.16	0.06
102	Monitor the results of diagnostic testing and intervene as needed	93.79	2.83	4.37	91.67	3.00	4.42	2.12	-0.17	-0.05
103	Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)	97.87	3.96	4.56	91.67	3.75	4.50	6.20	0.21	0.06
104	Evaluate responses to procedures and treatments	97.76	3.69	4.42	100.00	3.42	4.33	-2.24	0.27	0.09
105	Provide preoperative and postoperative education	76.13	1.48	4.09	83.33	1.00	3.75	-7.20	0.48	0.34
106	Provide preoperative care	67.94	1.02	3.94	66.67	1.17	3.75	1.27	-0.15	0.19
107	Manage client during and/or following a procedure with moderate sedation	72.18	1.21	4.30	66.67	1.25	3.92	5.51	-0.04	0.38
108	Obtain blood specimens peripherally or through central line	80.25	1.82	4.01	66.67	1.83	4.08	13.58	-0.01	-0.07
109	Use precautions to prevent injury and/or complications associated with a procedure or diagnosis	93.95	3.16	4.38	83.33	2.83	4.00	10.62	0.33	0.38
110	Educate client about treatments and procedures	94.97	3.11	4.20	91.67	2.33	4.00	3.30	0.78	0.20
111	Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)	92.70	2.16	4.00	100.00	2.08	3.75	-7.30	0.08	0.25
112	Insert, maintain or remove a gastric tube	71.06	1.01	3.88	75.00	1.25	4.08	-3.94	-0.24	-0.20
113	Insert, maintain or remove a urinary catheter	90.48	1.94	4.06	91.67	1.50	4.17	-1.19	0.44	-0.11
114	Insert, maintain or remove a peripheral intravenous line	85.10	2.40	4.17	91.67	2.50	4.42	-6.57	-0.10	-0.25

98.88

80.52

3.43

1.50

4.69

4.15

100.00

75.00

2.58

1.42

4.67

4.08

-1.12

5.52

0.85

0.08

0.02

0.07

115

Table 11. Average Frequency and Importance Ratings (Total Group) and Percent Performing from RN Practice Analysis Survey and RN Practice Analysis Survey SME Panel												
		Newly Lic	ensed RN Surv	ey Ratings	SIV	IE Ratings Res	ults	R	ating Differend	:es		
Activity Number	Activity	Apply to Setting (%)	Average Frequency (Total Group)	Average Importance (Total Group)	Apply to Setting (%)	Average Frequency (Total Group)	Average Importance (Total Group)	Apply to Setting Difference	Total Group Frequency Difference	Total Group Importance Difference		
117	Perform emergency care procedures (e.g., cardio-pulmonary resuscitation, respiratory support, automated external defibrillator)	76.46	0.60	4.79	83.33	0.25	4.75	-6.87	0.35	0.04		
118	Monitor and care for clients on a ventilator	46.86	0.77	4.29	25.00	0.83	4.17	21.86	-0.06	0.12		
119	Perform wound care or dressing change	93.74	2.19	4.11	100.00	1.83	4.50	-6.26	0.36	-0.39		
120	Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	55.73	0.52	3.99	58.33	0.67	4.17	-2.60	-0.15	-0.18		
121	Provide ostomy care and education (e.g., tracheal, enteral)	76.89	1.12	3.94	83.33	1.08	3.92	-6.44	0.04	0.02		
122	Provide postoperative care	74.33	1.51	4.15	75.00	1.33	3.83	-0.67	0.18	0.32		
123	Perform and manage care of client receiving peritoneal dialysis	50.84	0.35	3.83	25.00	0.08	3.50	25.84	0.27	0.33		
124	Perform hemodialysis or continuous renal replacement therapy	32.77	0.22	3.94	25.00	0.33	3.42	7.77	-0.11	0.52		
125	Perform suctioning (e.g., oral, nasopharyngeal, endotracheal, tracheal)	80.00	1.33	4.25	83.33	1.08	4.33	-3.33	0.25	-0.08		
126	Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	79.98	1.83	4.02	75.00	1.42	3.83	4.98	0.41	0.19		
127	Manage the care of a client on telemetry	69.16	2.31	4.24	41.67	0.92	4.08	27.49	1.39	0.16		
128	Manage the care of a client with impaired ventilation/ oxygenation	86.66	2.21	4.55	91.67	2.17	4.58	-5.01	0.04	-0.03		
129	Maintain optimal temperature of client (e.g., cooling and/or warming blanket)	81.57	1.64	3.98	75.00	1.17	4.00	6.57	0.47	-0.02		
130	Implement and monitor phototherapy	29.29	0.20	3.42	27.27	0.09	3.45	2.02	0.11	-0.03		
131	Manage the care of a client with a pacing device (e.g., pacemaker, vagus nerve stimulator)	79.35	1.26	4.15	50.00	0.58	4.08	29.35	0.68	0.07		
132	Monitor and maintain arterial lines	52.66	0.73	4.11	16.67	0.83	3.67	35.99	-0.10	0.44		
133	Manage the care of the client with a fluid and electrolyte imbalance	88.91	2.35	4.41	83.33	1.92	4.42	5.58	0.43	-0.01		
134	Manage the care of a client with alteration in hemodynamics, tissue perfusion and hemostasis (e.g., cerebral, cardiac, peripheral)	80.45	1.84	4.39	75.00	1.58	4.50	5.45	0.26	-0.11		

Table 11.	Table 11. Average Frequency and Importance Ratings (Total Group) and Percent Performing from RN Practice Analysis Survey and RN Practice Analysis Survey SME Panel													
		Newly Lice	ensed RN Surv	ey Ratings	SN	IE Ratings Res	ults	Rating Differences						
Activity Number	Activity	Apply to Setting (%)	Average Frequency (Total Group)	Average Importance (Total Group)	Apply to Setting (%)	Average Frequency (Total Group)	Average Importance (Total Group)	Apply to Setting Difference	Total Group Frequency Difference	Total Group Importance Difference				
135	Evaluate the effectiveness of the treatment regimen for a client with an acute or chronic diagnosis	94.39	3.37	4.35	83.33	2.83	4.33	11.06	0.54	0.02				
136	Identify pathophysiology related to an acute or chronic condition (e.g., signs and symptoms)	94.96	3.24	4.43	91.67	3.08	4.42	3.29	0.16	0.01				
137	Manage the care of a client receiving hemodialysis	64.44	0.81	4.10	50.00	0.75	3.91	14.44	0.06	0.19				
138	Recognize signs and symptoms of complications and intervene appropriately when providing client care	97.98	3.08	4.77	100.00	3.08	4.75	-2.02	0.00	0.02				
139	Educate client regarding an acute or chronic condition	96.30	3.22	4.29	100.00	2.67	4.33	-3.70	0.55	-0.04				

	Activity Applicability to Setting and Average Frequency of Performance	Annhute	A	-				
Activity Number	Activity	Apply to Setting		erage Freque		Average F	requency (T	otal Group)
		%	N	Avg	Std. Err	N	Avg	Std. Err
1	Perform procedures necessary to safely admit, transfer or discharge a client	95.30	918	3.14	0.06	963	2.99	0.06
2	Provide and receive hand off of care (report) on assigned clients	97.40	933	3.63	0.05	958	3.53	0.05
3	Assign and supervise care provided by others (e.g., LPN/VN, assistive personnel, other RNs)	92.10	875	3.45	0.06	950	3.18	0.06
4	Advocate for client rights and needs	99.60	949	3.71	0.05	953	3.70	0.05
5	Prioritize the delivery of client care	99.00	949	4.55	0.03	959	4.50	0.04
6	Participate in performance improvement/quality improvement process	90.70	851	2.04	0.06	938	1.85	0.06
7	Collaborate with interprofessional team members when providing client care (e.g., language interpreter, health care professionals)	98.80	950	3.96	0.05	962	3.91	0.05
8	Receive and/or transcribe health care provider orders	97.60	924	3.47	0.06	947	3.39	0.06
9	Integrate advance directives into client plan of care	85.50	800	1.75	0.07	936	1.50	0.06
10	Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)	74.60	714	0.81	0.05	957	0.60	0.04
11	Verify that the client received appropriate procedure education and consents to care and procedures	96.00	925	2.97	0.06	964	2.85	0.06
12	Provide education to clients and staff about client rights and responsibilities	96.90	907	2.94	0.06	936	2.85	0.06
13	Recognize the need for referrals and obtain necessary orders	96.10	925	2.69	0.06	963	2.58	0.06
14	Initiate, evaluate, and update plan of care (e.g., care map, clinical pathway)	95.10	907	3.30	0.06	954	3.13	0.06
15	Maintain client confidentiality and privacy	99.90	930	4.72	0.03	931	4.72	0.03
16	Recognize limitations of self and others and seek assistance	99.10	942	3.38	0.05	951	3.35	0.05
17	Report client conditions as required by law (e.g., abuse/neglect and communicable disease)	80.20	773	1.00	0.06	964	0.80	0.05
18	Manage conflict among clients and health care staff	89.90	834	1.41	0.06	928	1.26	0.05
19	Utilize valid resources to enhance the care provided to a client (e.g., evidenced-based research, information technology, policies and procedures)	97.40	935	3.41	0.05	960	3.32	0.06
20	Recognize ethical dilemmas and take appropriate action	90.00	857	1.12	0.05	952	1.01	0.05
21	Use approved abbreviations and standard terminology when documenting care	98.70	926	4.44	0.04	938	4.38	0.04
22	Organize workload to manage time effectively	100.00	950	4.50	0.03	950	4.50	0.03
23	Practice in a manner consistent with a code of ethics for registered nurses	99.90	956	4.74	0.03	957	4.73	0.03
24	Provide care within the legal scope of practice	99.90	932	4.82	0.02	933	4.82	0.02
25	Provide cost effective care	97.50	929	3.86	0.05	953	3.77	0.05

Table 12.	Activity Applicability to Setting and Average Frequency of Performance							
Activity Number	Activity	Apply to Setting		erage Freque etting-Speci		Average F	requency (To	otal Group)
		%	N	Avg	Std. Err	N	Avg	Std. Err
26	Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions)	100.00	955	4.94	0.01	955	4.94	0.01
27	Protect client from injury (e.g., falls, electrical hazards)	99.40	934	4.45	0.04	940	4.43	0.04
28	Verify appropriateness and/or accuracy of a treatment order	99.20	937	3.97	0.05	945	3.94	0.05
29	Follow procedures for handling biohazardous and hazardous materials	97.30	934	3.39	0.06	960	3.30	0.06
30	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	90.40	844	2.31	0.07	934	2.09	0.07
31	Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	98.70	944	4.24	0.04	956	4.19	0.04
32	Acknowledge and document practice errors (e.g., incident report for medication error)	86.00	820	0.73	0.05	954	0.63	0.04
33	Ensure proper identification of client when providing care	99.70	937	4.82	0.02	940	4.80	0.02
34	Facilitate appropriate and safe use of equipment	99.20	941	4.05	0.05	949	4.02	0.05
35	Educate client on safety issues (e.g., home, school, transportation)	96.00	922	2.98	0.06	960	2.86	0.06
36	Implement emergency response plans (e.g., internal/external disaster, bomb threat, community planning)	72.00	672	0.67	0.05	933	0.48	0.04
37	Follow requirements for use of restraints and/or safety devices (e.g., least restrictive restraints, timed client monitoring)	80.70	772	2.15	0.07	957	1.74	0.07
38	Educate client and staff regarding infection control measures	95.20	905	2.64	0.06	951	2.52	0.06
39	Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	97.40	917	3.51	0.06	941	3.42	0.06
40	Provide prenatal care and education	28.60	271	1.33	0.12	949	0.38	0.04
41	Plan and/or participate in community health education	61.80	595	1.03	0.07	963	0.63	0.04
42	Perform targeted screening assessments (e.g., vision, nutrition)	80.80	752	2.51	0.07	931	2.03	0.07
43	Provide information for prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	85.20	815	2.31	0.07	957	1.97	0.06
44	Provide information about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	94.90	906	2.48	0.06	955	2.36	0.06
45	Provide care and education to a client in labor or antepartum client	21.50	201	1.65	0.15	934	0.35	0.04
46	Provide post-partum care and education	23.00	218	1.35	0.13	948	0.31	0.04
47	Perform comprehensive health assessments	94.50	902	4.05	0.05	955	3.82	0.06
48	Assess client's readiness to learn, learning preferences and barriers to learning	95.40	886	3.47	0.06	929	3.31	0.06
49	Provide care and education for the newborn less than 1 month old through the infant or toddler client through 2 years	26.70	256	2.17	0.13	960	0.58	0.05

ACTIVITY STATEMENT PERFORMANCE FINDINGS

Table 12.	Activity Applicability to Setting and Average Frequency of Performance							
Activity Number	Activity	Apply to Setting		erage Freque etting-Speci		Average F	requency (Te	otal Group)
		%	N	Avg	Std. Err	N	Avg	Std. Err
50	Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	39.50	376	1.81	0.11	952	0.71	0.05
51	Provide care and education for the adult client ages 18 through 64 years	94.30	881	4.28	0.05	934	4.04	0.05
52	Provide care and education for the adult client ages 65 through 85 years and over	86.90	826	3.99	0.05	950	3.47	0.06
53	Assess client ability to manage care in home environment and plan care accordingly (e.g., equipment, community resources)	84.60	814	2.36	0.07	962	1.99	0.06
54	Assess and teach clients about health risks based on family, population, and/or community characteristics	87.70	817	2.19	0.07	932	1.92	0.06
55	Assess psychosocial, spiritual and occupational factors affecting care, and plan interventions	93.90	897	3.07	0.06	955	2.88	0.06
56	Assess client for abuse or neglect and intervene as appropriate	89.60	845	2.01	0.07	943	1.80	0.06
57	Assess client for drug/alcohol dependencies, withdrawal, or toxicities and intervene as appropriate	86.60	815	2.19	0.07	941	1.90	0.06
58	Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/ dependencies, depression, dementia, eating disorders)	86.20	821	2.45	0.07	952	2.11	0.06
59	Provide a therapeutic environment	98.50	943	4.42	0.04	957	4.36	0.04
60	Incorporate client cultural practice and beliefs when planning and providing care	94.60	876	2.48	0.07	926	2.35	0.07
61	Provide end of life care and education to clients	73.20	698	1.41	0.07	954	1.03	0.05
62	Assess the potential for violence and use safety precautions (e.g., suicide, homicide, self-destructive behavior)	91.20	871	2.23	0.07	955	2.04	0.07
63	Assess family dynamics to determine plan of care (e.g., structure, bonding, communication, boundaries, coping mechanisms)	91.80	861	2.68	0.06	938	2.46	0.06
64	Assess client in coping with life changes and provide support (e.g., palliative, amputation, new diagnosis)	89.40	852	2.29	0.06	953	2.04	0.06
65	Use therapeutic communication techniques to provide client support	99.40	955	4.33	0.04	961	4.30	0.04
66	Incorporate behavioral management techniques when caring for a client (e.g., positive reinforcement, setting limits, de-escalation techniques)	93.10	868	2.67	0.06	932	2.49	0.06
67	Recognize non-verbal cues to physical and/or psychological stressors	98.80	944	3.71	0.05	955	3.67	0.05
68	Provide care for a client experiencing visual, auditory or cognitive distortions (e.g., hallucinations)	83.60	798	1.79	0.07	954	1.50	0.06
69	Assess and intervene in client performance of activities of daily living	93.50	876	3.54	0.06	937	3.31	0.06
70	Provide client nutrition through continuous or intermittent tube feedings	80.10	760	1.96	0.07	949	1.57	0.06
71	Perform post-mortem care	68.50	659	0.77	0.06	962	0.53	0.04
72	Perform irrigations (e.g., of bladder, ear, eye)	77.20	715	1.04	0.06	926	0.80	0.05

Table 12.	Activity Applicability to Setting and Average Frequency of Performance							
Activity Number	Activity	Apply to Setting		erage Freque etting-Speci		Average F	requency (To	otal Group)
		%	N	Avg	Std. Err	N	Avg	Std. Err
73	Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	93.60	897	3.35	0.06	958	3.13	0.06
74	Perform skin assessment and implement measures to maintain skin integrity and prevent skin breakdown (e.g., turning, repositioning, pressure-relieving support surfaces)	96.80	924	4.09	0.05	955	3.95	0.05
75	Assess and manage client with an alteration in elimination (e.g., bowel, urinary)	94.30	881	3.50	0.06	934	3.30	0.06
76	Apply, maintain or remove orthopedic devices (e.g., traction, splints, braces, casts)	73.00	648	1.47	0.07	888	1.08	0.06
77	Apply and maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	87.90	785	3.25	0.07	893	2.86	0.07
78	Provide nonpharmacological comfort measures (e.g., light dimming, warm blanket)	98.40	866	3.78	0.05	880	3.72	0.05
79	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)	67.40	603	1.31	0.07	895	0.88	0.05
80	Manage the client's nutritional intake (e.g., adjust diet, monitor height and weight)	93.40	827	3.13	0.06	885	2.93	0.07
81	Assess client need for sleep/rest and intervene as needed	92.80	823	3.22	0.06	887	2.99	0.06
82	Evaluate client intake and output and intervene as needed	94.50	837	3.74	0.06	886	3.53	0.06
83	Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	90.80	813	3.36	0.06	895	3.05	0.07
84	Assess client need for pain management	99.20	873	4.53	0.04	880	4.49	0.04
85	Evaluate appropriateness and accuracy of medication order for client	99.00	879	4.39	0.04	888	4.35	0.04
86	Prepare and administer medications, using rights of medication administration	98.90	878	4.72	0.03	888	4.67	0.03
87	Perform calculations needed for medication administration	96.50	852	3.15	0.06	883	3.04	0.06
88	Monitor intravenous infusion and maintain site (e.g., central, PICC, epidural and venous access devices)	89.90	795	3.71	0.06	884	3.33	0.07
89	Administer controlled substances within regulatory guidelines (e.g., witness, waste)	95.30	853	3.82	0.06	895	3.64	0.06
90	Handle and maintain medication in a safe and controlled environment	99.50	877	4.73	0.03	881	4.71	0.03
91	Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)	99.10	885	4.26	0.04	893	4.22	0.05
92	Titrate dosage of medication based on assessment and ordered parameters (e.g., giving insulin according to blood glucose levels, titrating medication to maintain a specific blood pressure)	91.20	809	3.26	0.07	887	2.98	0.07
93	Administer blood products and evaluate client response	74.20	660	1.24	0.07	889	0.92	0.05
94	Access venous access devices, including tunneled, implanted and central lines	81.50	723	2.56	0.08	887	2.09	0.07

Table 12.	Activity Applicability to Setting and Average Frequency of Performance							
Activity Number	Activity	Apply to Setting		erage Freque etting-Speci		Average F	requency (To	otal Group)
		%	N	Avg	Std. Err	N	Avg	Std. Err
95	Educate client about medications	98.00	874	3.89	0.05	892	3.81	0.06
96	Evaluate client response to medication (e.g., therapeutic effects, side effects, adverse reactions)	99.30	872	4.53	0.03	878	4.50	0.04
97	Administer parenteral nutrition and evaluate client response (i.e., TPN)	70.20	626	1.30	0.07	892	0.91	0.05
98	Administer pharmacological measures for pain management	96.90	858	4.06	0.05	885	3.93	0.06
99	Participate in medication reconciliation process	88.70	786	2.41	0.07	886	2.14	0.07
100	Assess and respond to changes in client vital signs	99.20	876	3.90	0.05	883	3.87	0.05
101	Perform focused assessment	97.50	868	4.19	0.05	890	4.09	0.05
102	Monitor the results of diagnostic testing and intervene as needed	93.80	831	3.02	0.06	886	2.83	0.06
103	Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)	97.90	875	4.05	0.05	894	3.96	0.05
104	Evaluate responses to procedures and treatments	97.80	873	3.77	0.05	893	3.69	0.06
105	Provide preoperative and postoperative education	76.10	673	1.94	0.08	884	1.48	0.06
106	Provide preoperative care	67.90	604	1.50	0.07	889	1.02	0.06
107	Manage client during and/or following a procedure with moderate sedation	72.20	641	1.68	0.08	888	1.21	0.06
108	Obtain blood specimens peripherally or through central line	80.20	711	2.26	0.07	886	1.82	0.07
109	Use precautions to prevent injury and/or complications associated with a procedure or diagnosis	93.90	838	3.36	0.06	892	3.16	0.07
110	Educate client about treatments and procedures	95.00	850	3.28	0.06	895	3.11	0.06
111	Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)	92.70	825	2.33	0.07	890	2.16	0.07
112	Insert, maintain or remove a gastric tube	71.10	631	1.43	0.07	888	1.01	0.06
113	Insert, maintain or remove a urinary catheter	90.50	808	2.15	0.07	893	1.94	0.06
114	Insert, maintain or remove a peripheral intravenous line	85.10	754	2.82	0.07	886	2.40	0.07
115	Recognize trends and changes in client condition and intervene as needed	98.90	881	3.47	0.06	891	3.43	0.06
116	Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	80.50	719	1.87	0.07	893	1.50	0.06
117	Perform emergency care procedures (e.g., cardio-pulmonary resuscitation, respiratory support, automated external defibrillator)	76.50	682	0.79	0.06	892	0.60	0.05
118	Monitor and care for clients on a ventilator	46.90	418	1.63	0.10	892	0.77	0.05
119	Perform wound care or dressing change	93.70	839	2.34	0.06	895	2.19	0.06
120	Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	55.70	496	0.93	0.07	890	0.52	0.04

Table 12. Activity Applicability to Setting and Average Frequency of Performance										
Activity Number	Activity	Apply to Setting		erage Freque etting-Speci		Average F	requency (To	otal Group)		
		%	N	Avg	Std. Err	N	Avg	Std. Err		
121	Provide ostomy care and education (e.g., tracheal, enteral)	76.90	682	1.46	0.07	887	1.12	0.06		
122	Provide postoperative care	74.30	663	2.04	0.08	892	1.51	0.07		
123	Perform and manage care of client receiving peritoneal dialysis	50.80	453	0.70	0.07	891	0.35	0.04		
124	Perform hemodialysis or continuous renal replacement therapy	32.80	293	0.68	0.09	894	0.22	0.03		
125	Perform suctioning (e.g., oral, nasopharyngeal, endotracheal, tracheal)	80.00	716	1.67	0.08	895	1.33	0.07		
126	Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	80.00	711	2.29	0.07	889	1.83	0.07		
127	Manage the care of a client on telemetry	69.20	619	3.35	0.08	895	2.31	0.08		
128	Manage the care of a client with impaired ventilation/oxygenation	86.70	773	2.55	0.07	892	2.21	0.07		
129	Maintain optimal temperature of client (e.g., cooling and/or warming blanket)	81.60	726	2.01	0.07	890	1.64	0.07		
130	Implement and monitor phototherapy	29.30	261	0.67	0.09	891	0.20	0.03		
131	Manage the care of a client with a pacing device (e.g., pacemaker, vagus nerve stimulator)	79.40	711	1.59	0.07	896	1.26	0.06		
132	Monitor and maintain arterial lines	52.70	465	1.38	0.09	883	0.73	0.05		
133	Manage the care of the client with a fluid and electrolyte imbalance	88.90	794	2.65	0.07	893	2.35	0.07		
134	Manage the care of a client with alteration in hemodynamics, tissue perfusion and hemostasis (e.g., cerebral, cardiac, peripheral)	80.40	720	2.29	0.07	895	1.84	0.07		
135	Evaluate the effectiveness of the treatment regimen for a client with an acute or chronic diagnosis	94.40	841	3.57	0.06	891	3.37	0.06		
136	Identify pathophysiology related to an acute or chronic condition (e.g., signs and symptoms)	95.00	848	3.41	0.06	893	3.24	0.06		
137	Manage the care of a client receiving hemodialysis	64.40	578	1.26	0.07	897	0.81	0.05		
138	Recognize signs and symptoms of complications and intervene appropriately when providing client care	98.00	871	3.14	0.06	889	3.08	0.06		
139	Educate client regarding an acute or chronic condition	96.30	860	3.34	0.06	893	3.22	0.06		

Table 13. Average Total Group and Setting-Specific Importance Ratings											
Activity		Average Imp	oortance (Sett	ing-Specific)	Average li	mportance (To	tal Group)				
Number	Activity	N	Avg	Std. Err.	Ν	Avg	Std. Err.				
1	Perform procedures necessary to safely admit, transfer or discharge a client	903	4.36	0.02	941	4.34	0.02				
2	Provide and receive hand off of care (report) on assigned clients	915	4.62	0.02	935	4.58	0.02				
3	Assign and supervise care provided by others (e.g., LPN/VN, assistive personnel, other RNs)	858	4.11	0.03	921	4.05	0.03				
4	Advocate for client rights and needs	936	4.59	0.02	940	4.59	0.02				
5	Prioritize the delivery of client care	930	4.66	0.02	940	4.65	0.02				
6	Participate in performance improvement/ quality improvement process	833	3.90	0.03	903	3.84	0.03				
7	Collaborate with interprofessional team members when providing client care (e.g., language interpreter, health care professionals)	930	4.49	0.02	941	4.49	0.02				
8	Receive and/or transcribe health care provider orders	894	4.55	0.02	914	4.52	0.02				
9	Integrate advance directives into client plan of care	782	4.04	0.03	893	3.98	0.03				
10	Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)	688	4.50	0.03	911	4.48	0.02				
11	Verify that the client received appropriate procedure education and consents to care and procedures	906	4.47	0.02	939	4.46	0.02				
12	Provide education to clients and staff about client rights and responsibilities	887	4.20	0.03	912	4.18	0.03				
13	Recognize the need for referrals and obtain necessary orders	905	4.14	0.03	938	4.12	0.03				
14	Initiate, evaluate, and update plan of care (e.g., care map, clinical pathway)	883	3.98	0.03	925	3.95	0.03				
15	Maintain client confidentiality and privacy	915	4.69	0.02	916	4.69	0.02				
16	Recognize limitations of self and others and seek assistance	924	4.48	0.02	932	4.48	0.02				
17	Report client conditions as required by law (e.g., abuse/neglect and communicable disease)	746	4.43	0.03	922	4.43	0.03				
18	Manage conflict among clients and health care staff	816	3.86	0.03	895	3.82	0.03				
19	Utilize valid resources to enhance the care provided to a client (e.g., evidenced-based research, information technology, policies and procedures)	919	4.26	0.03	940	4.23	0.03				
20	Recognize ethical dilemmas and take appropriate action	824	4.13	0.03	906	4.12	0.03				
21	Use approved abbreviations and standard terminology when documenting care	913	4.12	0.03	924	4.11	0.03				
22	Organize workload to manage time effectively	933	4.51	0.02	933	4.51	0.02				

Table 13.	Average Total Group and Setting-Specific						
Activity Number			oortance (Set			mportance (To	
Number	Activity	N	Avg	Std. Err.	N	Avg	Std. Err.
23	Practice in a manner consistent with a code of ethics for registered nurses	944	4.69	0.02	944	4.69	0.02
24	Provide care within the legal scope of practice	913	4.83	0.01	913	4.83	0.01
25	Provide cost effective care	918	3.82	0.03	938	3.81	0.03
26	Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions)	933	4.91	0.01	933	4.91	0.01
27	Protect client from injury (e.g., falls, electrical hazards)	917	4.84	0.01	922	4.83	0.01
28	Verify appropriateness and/or accuracy of a treatment order	925	4.68	0.02	933	4.68	0.02
29	Follow procedures for handling biohazardous and hazardous materials	918	4.52	0.02	942	4.51	0.02
30	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	822	4.35	0.03	898	4.30	0.03
31	Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	933	4.47	0.02	944	4.45	0.02
32	Acknowledge and document practice errors (e.g., incident report for medication error)	788	4.48	0.02	907	4.48	0.02
33	Ensure proper identification of client when providing care	923	4.88	0.01	926	4.88	0.01
34	Facilitate appropriate and safe use of equipment	922	4.47	0.02	929	4.47	0.02
35	Educate client on safety issues (e.g., home, school, transportation)	901	4.13	0.03	935	4.10	0.03
36	Implement emergency response plans (e.g., internal/external disaster, bomb threat, community planning)	649	4.21	0.03	876	4.18	0.03
37	Follow requirements for use of restraints and/or safety devices (e.g., least restrictive restraints, timed client monitoring)	755	4.35	0.03	911	4.25	0.03
38	Educate client and staff regarding infection control measures	881	4.36	0.03	921	4.35	0.03
39	Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	901	4.68	0.02	922	4.68	0.02
40	Provide prenatal care and education	257	3.99	0.07	840	3.66	0.05
41	Plan and/or participate in community health education	568	3.55	0.04	901	3.37	0.03
42	Perform targeted screening assessments (e.g., vision, nutrition)	734	3.93	0.03	882	3.84	0.03
43	Provide information for prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	793	4.02	0.03	920	3.96	0.03

Table 13.	Average Total Group and Setting-Specific						
Activity Number	A		portance (Set			mportance (To	
44	Activity Provide information about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	N 879	Avg 3.94	Std. Err. 0.03	N 921	Avg 3.91	Std. Err. 0.03
45	Provide care and education to a client in labor or antepartum client	194	3.88	0.08	810	3.56	0.05
46	Provide post-partum care and education	205	3.99	0.07	829	3.66	0.04
47	Perform comprehensive health assessments	883	4.59	0.02	931	4.54	0.02
48	Assess client's readiness to learn, learning preferences and barriers to learning	865	4.12	0.03	898	4.10	0.03
49	Provide care and education for the newborn less than 1 month old through the infant or toddler client through 2 years	239	4.21	0.06	826	3.77	0.05
50	Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	360	4.01	0.05	857	3.66	0.04
51	Provide care and education for the adult client ages 18 through 64 years	860	4.31	0.02	907	4.28	0.03
52	Provide care and education for the adult client ages 65 through 85 years and over	805	4.29	0.02	907	4.21	0.03
53	Assess client ability to manage care in home environment and plan care accordingly (e.g., equipment, community resources)	792	4.08	0.03	920	3.99	0.03
54	Assess and teach clients about health risks based on family, population, and/or community characteristics	794	3.81	0.03	890	3.76	0.03
55	Assess psychosocial, spiritual and occupational factors affecting care, and plan interventions	883	3.98	0.03	932	3.96	0.03
56	Assess client for abuse or neglect and intervene as appropriate	822	4.38	0.03	906	4.33	0.03
57	Assess client for drug/alcohol dependencies, withdrawal, or toxicities and intervene as appropriate	790	4.13	0.03	897	4.07	0.03
58	Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	799	4.12	0.03	907	4.07	0.03
59	Provide a therapeutic environment	920	4.27	0.02	930	4.24	0.03
60	Incorporate client cultural practice and beliefs when planning and providing care	851	3.94	0.03	891	3.92	0.03
61	Provide end of life care and education to clients	674	4.23	0.03	886	4.10	0.03
62	Assess the potential for violence and use safety precautions (e.g., suicide, homicide, self-destructive behavior)	848	4.42	0.03	921	4.37	0.03

	Average Total Group and Setting-Specific		portance (Set	ting-Specific)	Average Importance (Total Group)		
Activity Number	Activity	N	Avg	Std. Err.	N	Avg	Std. Err.
63	Assess family dynamics to determine plan of care (e.g., structure, bonding, communication, boundaries, coping mechanisms)	842	3.93	0.03	905	3.88	0.03
64	Assess client in coping with life changes and provide support (e.g., palliative, amputation, new diagnosis)	822	4.25	0.02	903	4.19	0.03
65	Use therapeutic communication techniques to provide client support	934	4.25	0.02	939	4.25	0.02
66	Incorporate behavioral management techniques when caring for a client (e.g., positive reinforcement, setting limits, de-escalation techniques)	847	4.00	0.03	900	3.99	0.03
67	Recognize non-verbal cues to physical and/or psychological stressors	930	4.29	0.02	939	4.28	0.02
68	Provide care for a client experiencing visual, auditory or cognitive distortions (e.g., hallucinations)	769	4.04	0.03	915	3.96	0.03
69	Assess and intervene in client performance of activities of daily living	857	4.04	0.03	906	4.00	0.03
70	Provide client nutrition through continuous or intermittent tube feedings	740	4.25	0.03	900	4.16	0.03
71	Perform post-mortem care	626	3.73	0.04	894	3.60	0.04
72	Perform irrigations (e.g., of bladder, ear, eye)	688	3.77	0.04	867	3.66	0.04
73	Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	881	4.21	0.02	928	4.17	0.03
74	Perform skin assessment and implement measures to maintain skin integrity and prevent skin breakdown (e.g., turning, repositioning, pressure-relieving support surfaces)	902	4.62	0.02	928	4.58	0.02
75	Assess and manage client with an alteration in elimination (e.g., bowel, urinary)	862	4.21	0.03	905	4.16	0.03
76	Apply, maintain or remove orthopedic devices (e.g., traction, splints, braces, casts)	620	3.80	0.04	819	3.67	0.04
77	Apply and maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	771	4.30	0.03	866	4.22	0.03
78	Provide nonpharmacological comfort measures (e.g., light dimming, warm blanket)	848	3.90	0.03	860	3.88	0.03
79	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)	572	3.52	0.04	810	3.31	0.04
80	Manage the client's nutritional intake (e.g., adjust diet, monitor height and weight)	808	4.02	0.03	860	3.96	0.03

	Average Total Group and Setting-Specific						
Activity Number	Activity	Average Im	portance (Set	Std. Err.	Average II	nportance (To Avg	Std. Err.
	Assess client need for sleep/rest and	IN	Avg	Sta. En.	IN	Avg	Sta. Err.
81	intervene as needed	802	3.87	0.03	858	3.83	0.03
82	Evaluate client intake and output and intervene as needed	816	4.36	0.03	857	4.30	0.03
83	Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	795	4.19	0.03	867	4.13	0.03
84	Assess client need for pain management	855	4.51	0.02	860	4.50	0.02
85	Evaluate appropriateness and accuracy of medication order for client	867	4.81	0.02	874	4.81	0.02
86	Prepare and administer medications, using rights of medication administration	858	4.89	0.01	866	4.88	0.01
87	Perform calculations needed for medication administration	837	4.77	0.02	863	4.75	0.02
88	Monitor intravenous infusion and maintain site (e.g., central, PICC, epidural and venous access devices)	779	4.69	0.02	854	4.61	0.03
89	Administer controlled substances within regulatory guidelines (e.g., witness, waste)	838	4.65	0.02	873	4.61	0.02
90	Handle and maintain medication in a safe and controlled environment	859	4.79	0.02	862	4.78	0.02
91	Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)	872	4.80	0.02	875	4.80	0.02
92	Titrate dosage of medication based on assessment and ordered parameters (e.g., giving insulin according to blood glucose levels, titrating medication to maintain a specific blood pressure)	789	4.77	0.02	854	4.72	0.02
93	Administer blood products and evaluate client response	630	4.80	0.02	829	4.62	0.03
94	Access venous access devices, including tunneled, implanted and central lines	697	4.44	0.03	836	4.32	0.03
95	Educate client about medications	856	4.44	0.02	874	4.43	0.02
96	Evaluate client response to medication (e.g., therapeutic effects, side effects, adverse reactions)	855	4.67	0.02	859	4.66	0.02
97	Administer parenteral nutrition and evaluate client response (i.e., TPN)	600	4.22	0.03	819	4.05	0.04
78	Administer pharmacological measures for pain management	839	4.44	0.02	862	4.41	0.02
99	Participate in medication reconciliation process	768	4.28	0.03	844	4.22	0.03
100	Assess and respond to changes in client vital signs	860	4.79	0.02	867	4.78	0.02
101	Perform focused assessment	854	4.59	0.02	872	4.56	0.02
102	Monitor the results of diagnostic testing and intervene as needed	814	4.42	0.03	857	4.37	0.03

Table 13.	Average Total Group and Setting-Specific	Importance R	atings				
Activity			portance (Set		Average Importance (Total Group)		
Number	Activity	N	Avg	Std. Err.	N	Avg	Std. Err.
103	Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)	860	4.57	0.02	875	4.56	0.02
104	Evaluate responses to procedures and treatments	850	4.44	0.02	867	4.42	0.02
105	Provide preoperative and postoperative education	652	4.24	0.03	827	4.09	0.03
106	Provide preoperative care	579	4.11	0.03	816	3.94	0.04
107	Manage client during and/or following a procedure with moderate sedation	621	4.47	0.03	828	4.30	0.03
108	Obtain blood specimens peripherally or through central line	688	4.11	0.03	838	4.01	0.03
109	Use precautions to prevent injury and/ or complications associated with a procedure or diagnosis	814	4.41	0.03	856	4.38	0.03
110	Educate client about treatments and procedures	826	4.25	0.02	865	4.20	0.03
111	Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)	802	4.02	0.03	851	4.00	0.03
112	Insert, maintain or remove a gastric tube	604	4.03	0.03	814	3.88	0.04
113	Insert, maintain or remove a urinary catheter	786	4.12	0.03	856	4.06	0.03
114	Insert, maintain or remove a peripheral intravenous line	729	4.25	0.03	843	4.17	0.03
115	Recognize trends and changes in client condition and intervene as needed	863	4.69	0.02	871	4.69	0.02
116	Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	688	4.24	0.03	848	4.15	0.03
117	Perform emergency care procedures (e.g., cardio-pulmonary resuscitation, respiratory support, automated external defibrillator)	646	4.85	0.02	821	4.79	0.02
118	Monitor and care for clients on a ventilator	398	4.56	0.04	802	4.29	0.04
119	Perform wound care or dressing change	814	4.14	0.03	863	4.11	0.03
120	Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	472	4.17	0.04	805	3.99	0.04
121	Provide ostomy care and education (e.g., tracheal, enteral)	656	4.11	0.03	822	3.94	0.03
122	Provide postoperative care	638	4.30	0.03	834	4.15	0.04
123	Perform and manage care of client receiving peritoneal dialysis	433	4.02	0.05	808	3.83	0.04
124	Perform hemodialysis or continuous renal replacement therapy	276	4.13	0.06	778	3.94	0.05
125	Perform suctioning (e.g., oral, nasopharyngeal, endotracheal, tracheal)	687	4.36	0.03	842	4.25	0.03

Table 13. Average Total Group and Setting-Specific Importance Ratings							
Activity		Average Im	portance (Sett	ing-Specific)	Average lı	mportance (To	tal Group)
Number	Activity	N	Avg	Std. Err.	Ν	Avg	Std. Err.
126	Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	695	4.09	0.03	838	4.02	0.03
127	Manage the care of a client on telemetry	604	4.45	0.03	834	4.24	0.04
128	Manage the care of a client with impaired ventilation/oxygenation	748	4.62	0.02	850	4.55	0.03
129	Maintain optimal temperature of client (e.g., cooling and/or warming blanket)	705	4.05	0.03	837	3.98	0.03
130	Implement and monitor phototherapy	241	3.83	0.07	767	3.42	0.05
131	Manage the care of a client with a pacing device (e.g., pacemaker, vagus nerve stimulator)	691	4.26	0.03	849	4.15	0.03
132	Monitor and maintain arterial lines	438	4.34	0.04	790	4.11	0.04
133	Manage the care of the client with a fluid and electrolyte imbalance	772	4.50	0.02	851	4.41	0.03
134	Manage the care of a client with alteration in hemodynamics, tissue perfusion and hemostasis (e.g., cerebral, cardiac, peripheral)	693	4.51	0.03	844	4.39	0.03
135	Evaluate the effectiveness of the treatment regimen for a client with an acute or chronic diagnosis	823	4.39	0.02	859	4.35	0.03
136	Identify pathophysiology related to an acute or chronic condition (e.g., signs and symptoms)	820	4.47	0.02	856	4.43	0.03
137	Manage the care of a client receiving hemodialysis	552	4.21	0.04	826	4.10	0.04
138	Recognize signs and symptoms of complications and intervene appropriately when providing client care	847	4.79	0.02	859	4.77	0.02
139	Educate client regarding an acute or chronic condition	841	4.31	0.02	866	4.29	0.03

SUMMARY

Respondents to the 2014 RN Practice Analysis found the activities listed in the survey to be representative of the work they performed in their practice settings. In general, the importance ratings of SMEs and respondents were similar, supporting the validity of the results. The reliability of the survey instrument was quite good. In addition, activities with the lowest average total group frequency and importance ratings corresponded, in general, to those activities performed in specialized areas of nursing practice.

CONCLUSIONS

The 2014 RN Practice Analysis used several methods to describe the practice of newly licensed RNs in the U.S.: (1) document reviews; (2) activity logs of newly licensed RNs; (3) subject matter experts' knowledge; and (4) a large scale survey. The reliability of the survey instrument was quite good. In addition, there was evidence to support the validity of the activity statement ratings. Based on evidence, the findings of this study can be used to evaluate and support an RN test plan.

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APPENDIX A: 2014 RN PRACTICE ANALYSIS METHODOLOGY EXPERT

Terry Ackerman, PhD, is a professor at the University of North Carolina at Greensboro (UNCG). His research specializations include unidimensional and multidimensional item response theory, differential item/test functioning, and computerized testing. Dr. Ackerman has published extensively in journals such as *Applied Psychological Measurement, Journal of Educational Measurement, Journal of the American Statistical Association* and *Journal of Educational Statistics*. Some leadership roles that exemplify Dr. Ackerman's service to the fields of assessment and measurement include acting as President of the National Council on Measurement in Education, Chair of the U.S. Department of Defense Advisory Committee, member of the Psychometric Oversight Committee for the American Institute of Certified Public Accountants, and current chair of the GRE Technical Advisory Committee. At UNCG, Dr. Ackerman serves as the Associate Dean of Research and Assessment for the School of Education. He is also a Senior Fellow for the Office of Assessment, Evaluation, and Research Services (OAERS) and teaches Intermediate Statistical Methods in Education and Multidimensional Item Response Theory.

Tzu-Yun (Katherine) Chin, PhD, is an assistant director of psychometric consulting at Buros Center for Testing at the University of Nebraska-Lincoln. Her works in Buros Center include developing grant activities, providing technical advice and outreach efforts to improve testing, assessment, and measurement practices through consultation and education, with special emphases in psychology and education. Her research interests include value-added models, classification accuracy of diagnostic methods, survey response styles, survey response latency, and analyzing panelist data in standard settings. Dr. Chin has published in journals such as *Journal of Applied Testing Technology and Psychological Reports*.

Yongwei Yang, PhD, is a principal researcher, Methodology and Predictive Analytics, Gallup, Inc. His work in Gallup involves managing and conducting research. This includes designing and implementing research-based organizational interventions as well as evaluating the business impact of such interventions. It also includes leading the development of testing and survey tools that are business-relevant and psychometrically sound. His research interests include valid and defensible use of testing and survey outcomes, testing and surveys in multi-country, multi-cultural, and multi-lingual settings, analytics and modeling for complex organizational issues (recruiting, hiring, performance management, well-being, retention, etc.), improvements to measurement through improving items and questionnaire designs, administration procedures, and scoring or information extraction methods, and applications of technology-enhanced assessments. Dr. Yang has published in journals such as *Social Science Computer Review*, *International Journal of Social Research Methodology, Journal of Cross-Cultural Psychology, Journal of Applied Testing Technology, International Journal Journal of Testing and Applied Measurement in Education.*

APPENDIX B: SUBJECT MATTER EXPERT PANEL

Member: Ismael Abregonde, RN

Board: Arizona State Board of Nursing (Area I)

Specialty: Neurology, Trauma, Epilepsy Monitoring, Critical Care, Neurosurgery

Abregonde has 23 years of nursing experience and is currently the RN Clinical Education Specialist at Banner Good Samaritan Medical Center. In this role, he orients and supervises entry-level graduate nurses during their orientation process.

Member:	Allison Armstrong, RN, CPN
Board:	District of Columbia Board of Nursing (Area IV)
Specialty:	Pediatrics

Armstrong has nine years of nursing experience and is a Clinical Instructor for an acute care pediatric unit at Children's National Medical Center. She is responsible for providing education, servicing as a resource, as well as overseeing the orientation process for newly licensed nurses at her institution.

Member:	Marny Carlson, MS, RN-BC
Board:	Minnesota Board of Nursing (Area II)
Specialty:	Geriatrics

Carlson has 20 years of nursing experience and is a Nursing Education Specialist at Mayo Clinic Rochester. In this role, she teaches, mentors and supervises newly licensed registered nurses in a general medical/acute care setting. She also is responsible for building and teaching in the institution's Nurse Residency Program for graduate nurses.

Member:	Teofila M.P. Cruz, MSN, APRN, FNP-C
Board:	Guam Board of Nurse Examiners (Area I)
Specialty:	Community Health, Emergency Room

Cruz has 5 years of nursing experience and is a nurse practitioner for the Department of Public Health and Social Services. She acts as a mentor and preceptor to entry level graduate nurses and advises them on how to manage and triage patients.

Member:	Sean Dillon, RN
Board:	Association of Registered Nurses of Newfoundland and Labrador – Canada (Associate Member)

Specialty: Emergency Room, Mental Health

Dillon has 7 years of nursing experience and is currently a nurse at two locations: Helping Hands, where he is a corrections nurse working with the inmate population, and Eastern Health, where he works in the emergency department. He has been assigned on several occasions to mentor new graduates, helping the new graduate make an easy transition from school to the work place.

Member:	Robin Glenn, RN, EMT
Board:	Indiana State Board of Nursing (Area II)
Specialty:	Correctional Nursing

Glenn is a newly licensed nurse, having obtained her license in June 2013. She is currently employed by the Vanderburgh County Sheriff's Department and works in the field of correctional nursing. She has been an EMT since 1998 and has worked in correctional health care since 2004 at the Sheriff's Department.

Member:	Heather Lucy, MSN, RN
Board:	Pennsylvania State Board of Nursing (Area IV)
Specialty:	OBGYN/ Postpartum

Lucy has 10 years of nursing experience and is currently a staff nurse at Excela Health – Westmoreland Hospital. She is working at the Family Additions Maternity Center on the labor and delivery section of the unit.

Member:	Katherine Myer, RN
Board:	Georgia Board of Nursing (Area III)
Specialty:	Pediatrics

Myer is a newly licensed nurse having obtained her license in June 2013. She is currently employed by the Southeast Georgia Health System and works on a pediatric floor.

Member:	Jean Rea, MN, RN
Board:	North Carolina Board of Nursing (Area III)
Specialty:	Academia, Nurse Residency Program

Rea has 29 years of nursing experience and is currently a Clinical Nurse Educator at Duke University Hospital. She assesses, plans, implements and evaluates the educational activities designed to best assist the new graduate nurse in their transition from student to professional nurse.

Member:	Lacy Renauld
Board:	Saskatchewan Registered Nurses' Association – Canada (Associate Member)
Specialty:	Internal Medicine

Renauld has nine years of nursing experience and is employed by Regina Qu'Appelle Health Region. In her role as the clinical resource nurse, she is involved with the mentoring and orientating of new graduate nurses to the organization.

Member:Kari Robbins, RNBoard:College and Association of Registered Nurses of Alberta – Canada (Associate Member)Specialty:Ambulatory Services, Home Parental Therapy

Robbins has 16 years of nursing experience and is employed at Covenant Health where she is a home parental therapy nurse. She provides education on central catheter care and maintenance to newly licensed nurses to ensure that the nurse is following the newest guidelines regarding catheter care.

- Member: Laura Schilling, RN
- Board: Washington State Nursing Care Quality Assurance Commission (Area I)
- Specialty: Oncology, Medical-Surgical

Schilling has nine years of nursing experience and currently is a staff nurse on a medical oncology unit at Yakima Valley Memorial Hospital. She is often assigned as a preceptor for new graduate nurses.

APPENDIX C: 2014 RN PRACTICE ANALYSIS SURVEY

Paper Form 1

NCSBN

 $National\ Council\ of\ State\ Boards\ of\ Nursing$

National Council of State Boards of Nursing

REGISTERED NURSING SURVEY

This survey is being performed by the National Council of State Boards of Nursing (NCSBN) on behalf of your board nursing/regulatory body. The survey is part of a comprehensive study of the practice of newly licensed registered nurses (RNs) in the NCSBN areas using the NCLEX[®] examination for primary licensure decisions. Please complete and return this form as soon as possible. This is your opportunity to contribute to the development of the NCLEX[®] examination that future candidates will take.

INSTRUCTIONS

Please read each question carefully and respond by <u>filling in the oval</u> of the response that most closely represents your answer. Choose the answer that <u>best</u> applies to your practice and fill in the appropriate oval(s). A few questions ask you to write in information. Print your answer legibly in the space provided.

You will notice that many questions ask you to report what you did on your <u>last day of work</u>. It is important that we obtain information from nurses experiencing both typical and unusual workdays, so please answer the questions according to what you did on your <u>last</u> day of work even if that day was not typical.

As used in this survey, the **"client"** can be an individual, family, or group which includes significant others and population. "Clients" are the same as "residents" or "patients." Your answers will be kept confidential and your individual responses to the questions will not be released.

MARKING INSTRUCTIONS

Correct mark Incorrect marks • If you want to change an answer, erase completely.

- 1. What type(s) of nursing license do you hold? (Select ALL that apply)
 - ⊂ RN
 - O LPN/VN
- 2. Are you currently working as an RN in the U.S. or a Member Board jurisdiction?
 - ⊖ Yes
 - No → Skip to Section 5: Demographic Information
- 3. In your current position, do you provide direct care to clients?
 - Note: Faculty supervision of student clinical experiences is not considered "direct care."
 - \bigcirc Yes, 20 or more hours per week, on average \rightarrow Continue to Section 1: Nursing Activities
 - Yes, less than 20 hours per week, on average → Skip to Section 5: Demographic Information
 - \bigcirc No \rightarrow Skip to Section 5: Demographic Information

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SECTION 1: NURSING ACTIVITIES

This section contains a list of activities descriptive of nursing practice in a variety of settings. Please note that some activities may not apply to your setting. For each activity, two questions are asked. Please answer both questions.

QUESTION A - FREQUENCY: If the activity is performed in your work setting, how often (0 Times, 1 Time, 2 Times, 3 Times, 4 Times, or 5 + Times) did you personally perform the activity on the last day you worked? If it is never performed in your work setting or is not applicable, then select "NEVER performed in work setting" and then respond to Question B - Importance.

QUESTION B - IMPORTANCE: How important is performing this nursing activity in regard to client safety? Consider the importance with regard to the risk of unnecessary complications, impairment of function, or serious distress to clients. Rate all activities.

NOTE: Inclusion of an activity on this practice analysis survey does not imply that the activity is or would be included in the RN scope of practice defined by any specific jurisdiction. You must refer to your local board of nursing/regulatory body for information about your scope of practice. A - FREQUENCY B - IMPORTANCE

setting, mark "NEVER performed in work setting," still select the importance rating as noted in Question B and then move on to the next activity. If an activity is performed in your work setting, mark 0-5 + reflecting the frequency of performing the activity on your last day of work , then complete Question B. QUESTION B – IMPORTANCE – Rate the overall importance of this activity considering client safety, and/or threat of complications or distress with 1 = Not Important, 2 = Minimally Important, 3 = Moderately Important, 4 = Important, 5 = Critically Important.	NEVER performed in work setting	0 Times	ime	2 Times	Times	Times	or more Times				: Important	
	NE	1 O	11	2 Ti	3 T	4 T	20	п —	2 7	ш ЭЭ	4	
1. Perform procedures necessary to safely admit, transfer or discharge a client				2			(5+)		2	3	(4)	C
2. Assign and supervise care provided by others (e.g., LPN/VN, assistive personnel,												Ì
other RNs)					3		5.	1			4	C
3. Prioritize the delivery of client care										3		
4. Collaborate with interprofessional team members when providing client care												
(e.g., language interpreter, health care professionals)					3						4	C
5. Integrate advance directives into client plan of care							5			3		
6. Verify that the client received appropriate procedure education and consents to												
care and procedures			1		3			1			4	C
7. Recognize the need for referrals and obtain necessary orders				2						3		
8. Maintain client confidentiality and privacy				2						3		
9. Report client conditions as required by law (e.g., abuse/neglect and												
communicable disease)		0	1	2	3	4	5.	1	2	3	4	(
0. Utilize valid resources to enhance the care provided to a client (e.g., evidenced-												
based research, information technology, policies and procedures)			1		3		5.	1	2		4	C
1. Use approved abbreviations and standard terminology when documenting care		0	1	2	3	4	5.	1	2	3	4	C
2. Practice in a manner consistent with a code of ethics for registered nurses			1		3		5.	1	2	3	4	C
3. Provide cost effective care				2						3		
4. Protect client from injury (e.g., falls, electrical hazards)				2				1	2	3	4	C
5. Follow procedures for handling biohazardous and hazardous materials	\mathbb{N}	0	1	2	3	4	5+)	1	2	3	4	0
6. Use ergonomic principles when providing care (e.g., safe patient handling,												
proper lifting)				2						3		
7. Ensure proper identification of client when providing care	\mathbb{N}	0	1	2	3	4	5+	1	2	3	4	C
8. Educate client on safety issues (e.g., home, school, transportation)		0	1	2	3	4	5.	1	2	3	4	C
9. Follow requirements for use of restraints and/or safety devices (e.g., least												
restrictive restraints, timed client monitoring)	\square	0	1	2	3	4	5+	1	2	3	4	C
20. Assess client for allergies and intervene as needed (e.g., food, latex,												
environmental allergies)		0			3		5.				(4)	Ć

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1.	Plan and/or participate in community health education													
22.	Provide information for prevention and treatment of high risk health behaviors													
	(e.g., smoking cessation, safe sexual practice, needle exchange)		ס	D	2	3		57			2	3	4	5
	Provide care and education to a client in labor or antepartum client	\mathbb{N}												
	Perform comprehensive health assessments			D	2	3	4	5.			2	3	4	5
25.	Provide care and education for the newborn less than 1 month old through the					_								
06	infant or toddler client through 2 years													
	Provide care and education for the adult client ages 18 through 64 years Assess client ability to manage care in home environment and plan care		<u>ەر</u>	10	2)	3	4)	6+			2	3	4	5
_/.	accordingly (e.g., equipment, community resources)				_	G		5				0		
28.	Assess psychosocial, spiritual and occupational factors affecting care, and plan				2	9	Ţ	9			2	J	(÷	
_0.	interventions		0		2	3		(5÷)			2	3	4	5
29.	Assess client for drug/alcohol dependencies, withdrawal, or toxicities and													
	intervene as appropriate			D	2	3	4	5+			2	3	4	5
	Provide a therapeutic environment									1	2	3	4	5
	Provide end of life care and education to clients	\mathbb{N}	0	D	2	3	4	57			2	3	4	5
32.	Assess family dynamics to determine plan of care (e.g., structure, bonding,													
1.2	communication, boundaries, coping mechanisms)													
	Use therapeutic communication techniques to provide client support Recognize non-verbal cues to physical and/or psychological stressors													
	Assess and intervene in client performance of activities of daily living													
	Perform post-mortem care													
	Assist client to compensate for a physical or sensory impairment (e.g., assistive													
	devices, positioning, compensatory techniques)			D	2	3	4	5+			2	3	4	5
38.	Assess and manage client with an alteration in elimination (e.g., bowel, urinary)				2	3	4	5.			2	3	4	5
39.	Apply and maintain devices used to promote venous return (e.g., anti-embolic													
	stockings, sequential compression devices)			D	2	3	4	57			2	3	4	5
10.	Recognize complementary therapies and identify potential contraindications													
11	(e.g., aromatherapy, acupressure, supplements)													
	Assess client need for sleep/rest and intervene as needed Implement measures to promote circulation (e.g., active or passive range of		<u>ا</u> ر		2	3	4	<u>(</u>			2	3	4	G
	motion, positioning and mobilization)		0		2	3		53			Ø	3	4	G
	Evaluate appropriateness and accuracy of medication order for client										(2)	3		5
	Perform calculations needed for medication administration													
15.	Administer controlled substances within regulatory guidelines (e.g., witness,													
	waste)		0	D	2	3	4	5+			2	3	4	5
6.	Review pertinent data prior to medication administration (e.g., contraindications,													
-	lab results, allergies, potential interactions)								_					_
	Administer blood products and evaluate client response													
	Educate client about medications													
ŧ9.	Administer parenteral nutrition and evaluate client response (i.e., TPN)			_)(L	2)	رى	4	5			2	S	44)	1 <u>5</u>

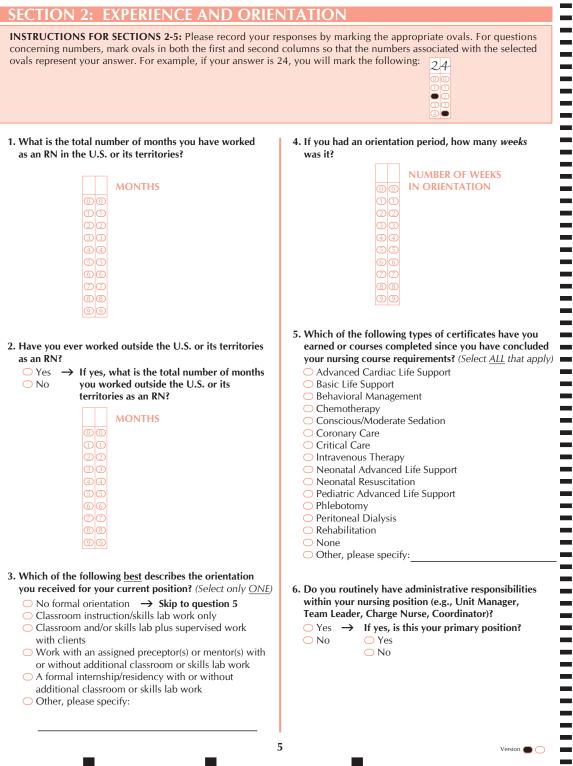
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<u>set</u> rati <u>is p</u> per QU cor 1 =	VESTION A – FREQUENCY – <u>If an activity does not apply to your work</u> ting, mark "NEVER performed in work setting," still select the importance ng as noted in Question B and then move on to the next activity. <u>If an activity</u> performed in your work setting, mark 0-5 + reflecting the frequency of forming the activity on your <u>last day of work</u> , then complete Question B. VESTION B – IMPORTANCE – Rate the overall importance of this activity nsidering client safety, and/or threat of complications or distress with Not Important, 2 = Minimally Important, 3 = Moderately Important, Important, 5 = Critically Important.	NEVER performed in work setting	0 Times	1 Time	2 Times	3 Times	4 Times	5 or more Times		п	П		П	I
51.	Perform focused assessment				2	3	4	5.	C	D	2(3	Ð	G
52.	Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose													
	monitoring)		0		0	3		5 7	C	D	20	3	4	C
53.	Provide preoperative and postoperative education				2							3		
	Manage client during and/or following a procedure with moderate sedation				0	3	4	5 .	C	D	20	3	4	C
55.	Use precautions to prevent injury and/or complications associated with a													
	procedure or diagnosis				2					_	_	3		
	Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urin											3		
	Insert, maintain or remove a urinary catheter				2							3		
	Recognize trends and changes in client condition and intervene as needed		0		2	3	4	5 .	C	D	20	3	4	6
59.	Perform emergency care procedures (e.g., cardio-pulmonary resuscitation,													
	respiratory support, automated external defibrillator)				2							3		
	Perform wound care or dressing change				0							3		
	Provide ostomy care and education (e.g., tracheal, enteral)				2							3		
	Perform and manage care of client receiving peritoneal dialysis				2							3		
	Perform suctioning (e.g., oral, nasopharyngeal, endotracheal, tracheal)				0							3		
	Manage the care of a client on telemetry				0							3		
	Maintain optimal temperature of client (e.g., cooling and/or warming blanket)		0		2	3	4	57	C	DC	20	3	4	(5
66.	Manage the care of a client with a pacing device (e.g., pacemaker, vagus nerve													
	stimulator)				2							3		
	Manage the care of the client with a fluid and electrolyte imbalance		0		2	3		5 .	C	DC	20	3	4	G
	Evaluate the effectiveness of the treatment regimen for a client with an acute or chronic diagnosis				02							3		
69.	Manage the care of a client receiving hemodialysis				2							3		
	Educate client regarding an acute or chronic condition	N			0	3	4	67	C	DC	2)	3	4)	G

- Very well
- Well
- Adequately
- Poorly

Please list any important activities you believe are missing from the survey:

4



 Which of the following <u>best</u> describes <u>most</u> of your clients on the last day you worked? (Select <u>ALL</u> that apply) Well clients, possibly with minor illnesses OB (Maternity) clients Clients with stabilized chronic conditions Clients with unstabilized chronic conditions Clients with acute conditions, including clients with medical, surgical or critical conditions Clients at end-of-life Clients with behavioral/emotional conditions Other, please specify: 	 4. Which of the following <u>best</u> describes the type of facility/organization where your employment setting specialty area is located? (Select only <u>ONE</u>) Hospital Long-term care facility Community-based or ambulatory care facility/ organization (including public health department, visiting nurses association, home health, physician Advanced Practice RN/Nurse Practitioner (NP)/demoffice, clinic, school, prison, etc.) Other, please specify:
 2. Which of the following <u>best</u> describes the ages of <u>most</u> of your clients on the last day you worked? (<i>Select <u>AIL</u> that apply</i>) Newborns (less than 1 month) Adolescent (ages 13-17) Infants/toddler (1 month-2 years) Adult (ages 65-85) School (ages 3-5) Adult (over age 85) 3. Which of the following choices <u>best</u> describes your employment setting/specialty area <u>on the last day you worked</u>? If you worked mainly in one setting, fill in the appropriate oval for that one setting, fill in the appropriate oval for that one setting. If you worked in more than one setting, fill in the appropriate oval for all settings where you spent at least one-half of your time. (<i>Select <u>no more than TWO</u> answers</i>) Critical care (e.g., ICU, CCU, step-down units, pediatric/ neonatal intensive care, emergency department, post-anesthesia recovery unit) Medical-surgical unit or any of its sub-specialties (e.g., oncology, orthopedics, neurology) Pediatrics Nursery Labor and delivery Postpartum unit Psychiatry or any of its sub-specialties (e.g., detox) Assisted Living Operating room, including outpatient surgery and surgicenters Nursing home, skilled or intermediate care Other long-term care (e.g., residential care, developmental disability) Rehabilitation Subacute unit Transitional care unit Physician/Advanced Practice RN/Nurse Practitioner (NP)/ Dentist office Occupational health Outpatient clinic Home health, including visiting nurses associations Public health Hospice care Prison/Correctional Facility/Jail Short Stay/Observational Step-down/Progressive Care Other, please specify: 	 5. If you work in a hospital or nursing home, how large is it? (Select only <u>ONE</u>) Less than 50 beds 50-99 beds 100-299 beds 300-499 beds 500 or more beds 1 do not know 1 do not work in a hospital or nursing home 6. Which of the following best describes your shift or typical work day? (Select only <u>ONE</u>) Days Evenings Nights Rotating shifts Other, please specify: 7. What is the length of your shift <u>on a typical work of (Select only ONE</u>) 8 hours 10 hours 12 hours Other, please specify: 8. Which best describes the location of your employn setting? (Select only <u>ONE</u>) Urban/Metropolitan area Suburban Rural

SECTION 4: DESCRIPTION OF YOUR LAST DAY OF WORK 1. How many hours did you worked in the last shift you work on the last shift you worked? 2. How many clients were you responsible for on the last day you worked? 2. How many clients were you responsible for on the last day you worked? 2. How many clients were you responsible for on the last day you worked? 2. How many clients were you responsible for on the last day you worked? 2. How many clients were you responsible for on the last day you worked? 3. How many clients to whom you were assigned to provide direct care, indirect care (provided through others such as LPN/VNs or unlicensed assistive personnel), or any performance of tasks or other responsibility for care during all or any part of your time in the work setting. Image: HOURS Image: NUMBER OF CLIENTS Image: Description of the provide direct care (provided tasks or other responsibility for care during all or any part of your time in the work setting. Image: Description of the provide direct care (provided tasks or other responsibility for care during all or any part of your time in the work setting. Image: Description of the provide direct care (provided tasks or other responsibility for care during all or any part of your time in the work setting. Image: Description of the provide direct care (provided tasks or other responsibility for care during all or any part of your time in the work setting. Image: Description of the provide direct care (provided tasks or other responsibility for care during all or any part of your time

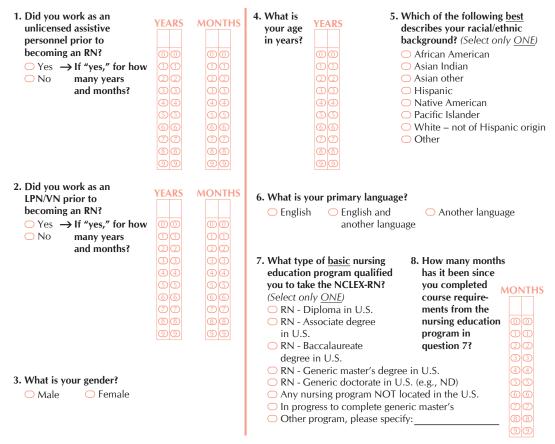
3. How much of your time was spent performing each of the following types of activities on the <u>last day you worked</u>? For each of the sets of activities please rate the approximate amount of time you spent on that type of activity <u>on the last day you worked</u> rounded to the nearest hour. For example, if you spent about 2 and ¼ hours on a set of activities, select the option "2." If you spent 3 and ¾ hours on a set of activities, select the option "4." Numerous categories may be performed simultaneously; therefore total hours spent may be greater than total hours of shift worked.

Approximate Amount of T	ime (Hours)
Spent on Set of Acti	

Set of Activities			Spe	nt on	Set o	of Act	ivitie	S		
1. Management of Care: Provide and direct nursing care that enhances	0	1	2	3	4	5	6	7	8	>8
the care delivery setting to protect clients and health care personnel.	0	1	2	3	4	5	6	Ø	8	63
2. Safety and Infection Control: Protect clients and health care personnel from health and environmental hazards.	0	1	2	3	4	5	6	Ø	8	53
3. Health Promotion and Maintenance: Provide and direct nursing care of the client that incorporates the knowledge of expected growth and development principles, prevention and/or early detection of health problems, and strategies to achieve optimal health.	0	1	2	3	4	5	6	7	8	63
4. Psychosocial Integrity: Provide and direct nursing care that promotes and supports the emotional, mental and social well being of the client experiencing stressful events, as well as clients with acute or chronic mental illness.	0		2	3	4	5	6	Ø	8	63
5. Basic Care and Comfort: Provide comfort and assistance in the performance of activities of daily living.	0	1	2	3	4	5	6	Ø	8	63
6. Pharmacological and Parenteral Therapies: Provide care related to the administration of medications and parenteral therapies.	0	1	2	3	4	5	6	7	8	53
7. Reduction of Risk Potential: Reduce the likelihood that clients will develop complications or health problems related to existing conditions, treatments or procedures.	0	1	2	3	4	5	6	Ø	8	63
8. Physiological Adaptation: Manage and provide care for clients with acute, chronic or life threatening physical health conditions.	0	1	2	3	4	5	6	Ø	8	63

SECTION 5: DEMOGRAPHIC INFORMATION

In this section you are asked to provide background information that will be summarized to describe the group that completed this survey. No individual responses will be reported.



SECTION 6: COMMENTS

If we need additional information in order to clarify the results of this study, we may call and/or e-mail some participants. If you would be willing to answer a few additional questions by phone or e-mail, please provide an email address and number where you can be reached during the day or early evening.

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Name:		umber with	n Area Code:
E-mail Address:	()	-	-
	000		
You may write any comments or suggestions that you have in the space below.	101	111	0000
	000	222	0000
	333	333	3333
	(4)(4)(4)	(4)(4)(4)	(4)(4)(4)(4)
	555	555	5555
	666	666	6666
	000	000	0000
	888	888	8888
	000	999	9999
THANK YOU FOR PARTICIPATING IN THIS IMPO	RTANT W	ORK!	
8			

Image: Mathematical State Boards of Nursing

National Council of State Boards of Nursing

REGISTERED NURSING SURVEY

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INSTRUCTIONS

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You will notice that many questions ask you to report what you did on your <u>last day of work</u>. It is important that we obtain information from nurses experiencing both typical and unusual workdays, so please answer the questions according to what you did on your **last** day of work even if that day was not typical.

As used in this survey, the **"client"** can be an individual, family, or group which includes significant others and population. "Clients" are the same as "residents" or "patients." Your answers will be kept confidential and your individual responses to the questions will not be released.

MARKING INSTRUCTIONS

● ✓ ⊠ ● Correct mark	 Use a No. 2 pencil. Make heavy dark marks that fill the oval completely. If you want to change an answer, erase completely.
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1. What type(s) of nursing license do you hold?

(Select ALL that apply) RN LPN/VN

2. Are you currently working as an RN in the U.S. or a Member Board jurisdiction?

- Yes
- No → Skip to Section 5: Demographic Information

3. In your current position, do you provide direct care to clients?

- Note: Faculty supervision of student clinical experiences is not considered "direct care."
- \bigcirc Yes, 20 or more hours per week, on average \rightarrow Continue to Section 1: Nursing Activities
- Yes, less than 20 hours per week, on average → Skip to Section 5: Demographic Information
- \bigcirc No \rightarrow Skip to Section 5: Demographic Information

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SECTION 1: NURSING ACTIVITIES

This section contains a list of activities descriptive of nursing practice in a variety of settings. Please note that some activities may not apply to your setting. For each activity, two questions are asked. Please answer both questions.

QUESTION A - FREQUENCY: If the activity is performed in your work setting, how often (0 Times, 1 Time, 2 Times, 3 Times, 4 Times, or 5+ Times) did you personally perform the activity on the last day you worked? If it is never performed in your work setting or is not applicable, then select "NEVER performed in work setting" and then respond to Question B - Importance.

QUESTION B - IMPORTANCE: How important is performing this nursing activity in regard to client safety? Consider the importance with regard to the risk of unnecessary complications, impairment of function, or serious distress to clients. Rate all activities.

NOTE: Inclusion of an activity on this practice analysis survey does not imply that the activity is or would be included in the RN scope of practice defined by any specific jurisdiction. You must refer to your local board of nursing/regulatory body for information about your scope of practice. A - FREQUENCY **B - IMPORTANCE**

				LQ.		inc.		U	- 1/1			17	
QUESTION A – FREQUENCY – If an activity does not apply to your work setting, mark "NEVER performed in work setting," still select the importance rating as noted in Question B and then move on to the next activity. If an activity is performed in your work setting, mark 0-5 + reflecting the frequency of performing the activity on your last day of work, then complete Question B. QUESTION B – IMPORTANCE – Rate the overall importance of this activity considering client safety, and/or threat of complications or distress with 1 = Not Important, 2 = Minimally Important, 3 = Moderately Important, 4 = Important, 5 = Critically Important.	NEVER performed in work setting	0 Times	1 Time	2 Times	3 Times	4 Times	5 or more Times		Ш	Ш		Ш	
1. Provide and receive hand off of care (report) on assigned clients	N					4			1	2	3	4	G
2. Advocate for client rights and needs)(4)			1	2	3	4	
3. Participate in performance improvement/quality improvement process						4			1	2	3	4	C
4. Receive and/or transcribe health care provider orders)(4)					3		
5. Report unsafe practice of health care personnel and intervene as appropriate													
(e.g., substance abuse, improper care, staffing practices)	N	0		0	3	4	5÷		\bigcirc	2	3	4	C
6. Provide education to clients and staff about client rights and responsibilities	N	0	1	2	3	4	5.		1	2	3	4	C
7. Initiate, evaluate, and update plan of care (e.g., care map, clinical pathway)						4					3		
8. Recognize limitations of self and others and seek assistance	N	0	1	2	3	4	5.		1	2	3	4	C
9. Manage conflict among clients and health care staff						4				2	3	4	C
0. Recognize ethical dilemmas and take appropriate action	N	0	1	2	3	4	5.		1	2	3	4	C
1. Organize workload to manage time effectively	N	0	1	0	3	4	5 +		1	2	3	4	C
2. Provide care within the legal scope of practice	N	0	1	2	3	4	5+		1	2	3	4	C
3. Apply principles of infection control (e.g., hand hygiene, surgical asepsis,													
isolation, sterile technique, universal/standard precautions)	N	0	1		3	4	5+		1	2	3	4	C
4. Verify appropriateness and/or accuracy of a treatment order	N	0	1	2	3	4	5+		1	2	3	4	C
15. Follow security plan and procedures (e.g., newborn nursery security, violence,													
controlled access)	N	0	1	2	3	4	5+		\bigcirc	2	3	4	C
16. Acknowledge and document practice errors (e.g., incident report for medicatio	n												
error)		0	1	2)(4)	5.)					4	
 Facilitate appropriate and safe use of equipment 	N	0	1	2	3	4	5+		1	2	3	4	C
8. Implement emergency response plans (e.g., internal/external disaster, bomb													
threat, community planning)		0	1	2	3	4					3	4	C
9. Educate client and staff regarding infection control measures						4					3		
20. Provide prenatal care and education)(4)			1	2	3	4	C
21. Perform targeted screening assessments (e.g., vision, nutrition)		0	1	0	3	4	5 +		1	2	3	4	C
22. Provide information about health promotion and maintenance recommendatio													
(e.g., physician visits, immunizations)	N	0	1	2	3)(4)							

SECTION 1: NURSING ACTIVITIES (continued)

QUESTION A – FREQUENCY – <u>If an activity does not apply to your work</u> <u>setting</u>, mark "NEVER performed in work setting," still select the importance rating as noted in Question B and then move on to the next activity. <u>If an activity</u> <u>is performed in your work setting</u>, mark 0-5 + reflecting the frequency of performing the activity on your **last day of work**, then complete Question B.

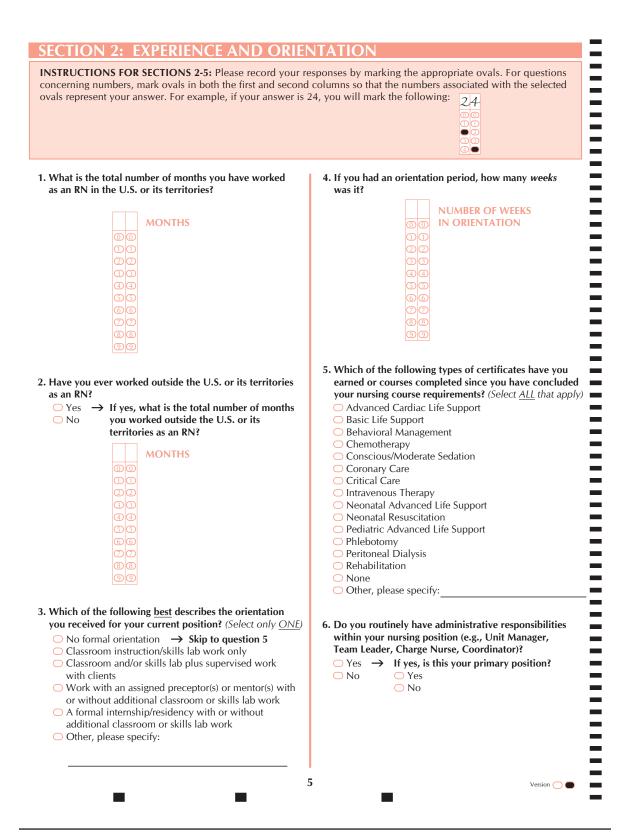
QUESTION B – IMPORTANCE – Rate the overall importance of this activity considering client safety, and/or threat of complications or distress with 1 = Not Important, 2 = Minimally Important, 3 = Moderately Important, 4 = Important, 5 = Critically Important.

- 23. Provide post-partum care and education
- 24. Assess client's readiness to learn, learning preferences and barriers to learning
- Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years
- 26. Provide care and education for the adult client ages 65 through 85 years and over
- Assess and teach clients about health risks based on family, population, and/or community characteristics
- 28. Assess client for abuse or neglect and intervene as appropriate
- 29. Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)
- Incorporate client cultural practice and beliefs when planning and providing ca
 Assess the potential for violence and use safety precautions (e.g., suicide,
- homicide, self-destructive behavior)32. Assess client in coping with life changes and provide support (e.g., palliative, amputation, new diagnosis)
- Incorporate behavioral management techniques when caring for a client (e.g., positive reinforcement, setting limits, de-escalation techniques)
- 34. Provide care for a client experiencing visual, auditory or cognitive distortions (e.g., hallucinations)
- 35. Provide client nutrition through continuous or intermittent tube feedings
- 36. Perform irrigations (e.g., of bladder, ear, eye)
- 37. Perform skin assessment and implement measures to maintain skin integrity and prevent skin breakdown (e.g., turning, repositioning, pressure-relieving support surfaces)
- 38. Apply, maintain or remove orthopedic devices (e.g., traction, splints, braces, casts,
- 39. Provide nonpharmacological comfort measures (e.g., light dimming, warm blanket)
- Manage the client's nutritional intake (e.g., adjust diet, monitor height and weig
 Evaluate client intake and output and intervene as needed
- 42. Assess client need for pain management
- 43. Prepare and administer medications, using rights of medication administration
- 44. Monitor intravenous infusion and maintain site (e.g., central, PICC, epidural and venous access devices)
- 45. Handle and maintain medication in a safe and controlled environment
- 46. Titrate dosage of medication based on assessment and ordered parameters (e.g., giving insulin according to blood glucose levels, titrating medication to maintain a specific blood pressure)
- 47. Access venous access devices, including tunneled, implanted and central lines
- 48. Evaluate client response to medication (e.g., therapeutic effects, side effects, adverse reactions)
- 49. Administer pharmacological measures for pain management

50. Assess and respond to changes in client vital signs

	A	- 1	RE	Q	UEI	NC	Y	В	- 1/	٨P	OR	TA	N	CE -
	NEVER performed in work setting	0 Times	1 Time	2 Times	3 Times	4 Times	5 or more Times		1 = Not Important	2 = Minimally Important	3 = Moderately Important	4 = Important	5 = Critically Important	
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per QL cor 1 =	berformed in your work setting, mark 0-5 + reflecting the frequency of forming the activity on your last day of work , then complete Question B. JESTION B – IMPORTANCE – Rate the overall importance of this activity his dering client safety, and/or threat of complications or distress with Not Important, 2 = Minimally Important, 3 = Moderately Important, Important, 5 = Critically Important.	NEVER performed in work setting	les	Je	nes	Times	Times	or more Times	Not Important	Minimally Important	Moderately Important	Important	
		NEVE	0 Times	1 Time	2 Times	Lin	4 Tin		- -	Ш	П	Ш	
51	Monitor the results of diagnostic testing and intervene as needed					3					m		
	Evaluate responses to procedures and treatments					3					3		
	Provide preoperative care					3					3		
	Obtain blood specimens peripherally or through central line					3					3		
	Educate client about treatments and procedures					3					3		
56.	Insert, maintain or remove a gastric tube					3			1	2	3	4	0
	Insert, maintain or remove a peripheral intravenous line					3					3		
58.	Monitor and maintain devices and equipment used for drainage (e.g., surgical												
	wound drains, chest tube suction, negative pressure wound therapy)		0	1	2	3	4	5 .	1	2	3	4	0
	Monitor and care for clients on a ventilator					3					3		
	Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)					3			1	2	3	4	0
	Provide postoperative care					3					3		
	Perform hemodialysis or continuous renal replacement therapy					3					3		
	Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)					3					3		
	Manage the care of a client with impaired ventilation/oxygenation					3					3		
	Implement and monitor phototherapy					3					3		
	Monitor and maintain arterial lines		0	1	2	3	4	5 .	1	2	3	4	0
67.	Manage the care of a client with alteration in hemodynamics, tissue perfusion												
6.0	and hemostasis (e.g., cerebral, cardiac, peripheral)	N	0	1	2	3	4	5÷	1	2	3	4	0
68.	Identify pathophysiology related to an acute or chronic condition (e.g., signs												
(0)	and symptoms)		\odot	0	2	3	4)	(5+)	1	2	3	4	C
69.	Recognize signs and symptoms of complications and intervene appropriately when providing client care												
	when providing client care	\odot	0	U	2	3	4	(5+)	(1)	2	3	4	10
70.	How well did the survey cover the important activities a newly licensed RN she setting? Very well Well Adequately Poorly	ould	l p	DSS	ess	, re	ga	rdles	s of th	ie p	ora	ctio	D
	Please list any important activities you believe are missing from the survey:												_



. Which of the following <u>best</u> describes <u>most</u> of your clients on the last day you worked? (Select <u>ALL</u> that apply)	4. Which of the following <u>best</u> describes the type of facility/organization where your employment setting
○ Well clients, possibly with minor illnesses	specialty area is located? (Select only ONE)
OB (Maternity) clients	○ Hospital
Clients with stabilized chronic conditions	Long-term care facility
Clients with unstabilized chronic conditions	Community-based or ambulatory care facility/
 Clients with acute conditions, including clients with 	organization (including public health department,
medical, surgical or critical conditions Clients at end-of-life	visiting nurses association, home health, physician,
 Clients at end-oi-me Clients with behavioral/emotional conditions 	Advanced Practice RN/Nurse Practitioner (NP)/den office, clinic, school, prison, etc.)
Other, please specify:	Other,
	please specify:
. Which of the following best describes the ages of	
most of your clients on the last day you worked?	5. If you work in a hospital or nursing home, how large
(Select <u>ALL</u> that apply)	is it? (Select only <u>ONE</u>)
○ Newborns (less than 1 month) ○ Adolescent (ages 13-17)	 Less than 50 beds
○ Infants/toddler (1 month-2 years) ○ Adult (ages 18-64)	○ 50-99 beds
 Preschool (ages 3-5) School Age (ages 6-12) Adult (ages 65-85) Adult (over age 85) 	 100-299 beds 300-499 beds
	\bigcirc 500-499 beds \bigcirc 500 or more beds
	◯ I do not know
B. Which of the following choices <u>best</u> describes your employment	I do not work in a hospital or nursing home
setting/specialty area <u>on the last day you worked</u> ? If you worked mainly in one setting, fill in the appropriate oval for that one	
setting. If you worked in more than one setting, fill in the	6. Which of the following best describes your shift on
appropriate oval for all settings where you spent at least one-half	typical work day? (Select only ONE)
of your time. (Select no more than TWO answers)	Days
Critical care (e.g., ICU, CCU, step-down units, pediatric/	Evenings
neonatal intensive care, emergency department,	○ Nights
post-anesthesia recovery unit)	Rotating shifts Other place specify
 Medical-surgical unit or any of its sub-specialties (e.g., oncology, orthopedics, neurology) 	Other, please specify:
 Pediatrics 	
O Nursery	7. What is the length of your shift on a typical work da
Labor and delivery	(Select only <u>ONE</u>)
O Postpartum unit	○ 8 hours
 Psychiatry or any of its sub-specialties (e.g., detox) Assisted Living 	 10 hours 12 hours
 Assisted Living Operating room, including outpatient surgery and surgicenters 	 Varied 8 hours and 12 hours
 Operating room, including outpatient surgery and surgeenters Nursing home, skilled or intermediate care 	 Other, please specify:
Other long-term care (e.g., residential care, developmental	
disability)	0 Which boot describes the least in stress of
C Rehabilitation	 Which <u>best</u> describes the location of your employments setting? (Select only ONE)
 Subacute unit Transitional care unit 	Urban/Metropolitan area
 Physician/Advanced Practice RN/Nurse Practitioner (NP)/ 	Suburban
Dentist office	O Rural
 Occupational health 	
Outpatient clinic	
O Home health, including visiting nurses associations	
O Public health	
 Public health Student/school health 	
 Public health Student/school health Hospice care 	
 Public health Student/school health Hospice care Prison/Correctional Facility/Jail 	
 Public health Student/school health Hospice care 	

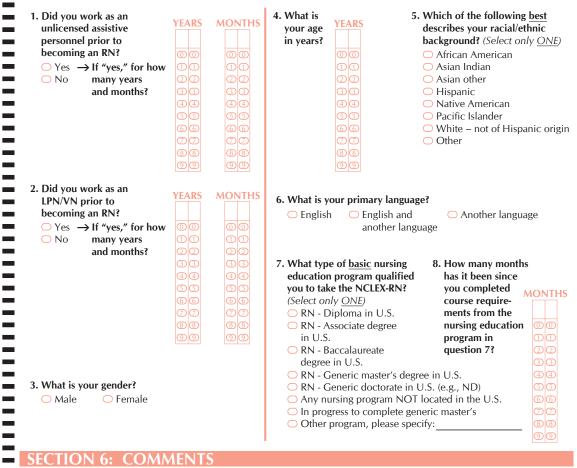
1. How many hours did you 2. How many clients were you responsible for on the last day you worked? This includes clients to whom you were assigned to provide direct care, indirect care (provided work on the last shift you worked? through others such as LPN/VNs or unlicensed assistive personnel), or any performance of tasks or other responsibility for care during all or any part of your time in the work setting.

	HOURS				NUMBER OF CLIENTS
00	D			0	
10		D		1	
00		2	00	2	
C		3	03	3	
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C		5	05	5	
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8		6	08	8	
C	D	Q	DO	9	

			UMBI	ER OF	CLIE	NTS					
low much of your time was	spent performing each of the following	Ð	ofac	tivitio	s on t	ho las	t dav i		orkod	2 Eor	aach
of the sets of activities pleas worked rounded to the nea option "2." If you spent 3 a	e rate the approximate amount of time rest hour. For example, if you spent a und ¾ hours on a set of activities, sele herefore total hours spent may be grea	e you about ect th ter th	spent 2 an e opt an tot	on th d ¼ h ion "4	at typ iours 4." Ni urs of	oe of a on a s umero shift	activit set of ous ca work	ty <u>on</u> activ atego ed.	<u>the la</u> ities, ries m	<u>st day</u> selec ay be	<u>you</u> t the
Set of A	ctivities		T. I.		nt on						
	le and direct nursing care that enhances	0	1	2	3	4	5	6	7	8	>8
, , ,	rotect clients and health care personnel.	0	1	2	3	4	5	6	7	8	 S3 S3
Health Promotion and Maint of the client that incorporates	enance: Provide and direct nursing care the knowledge of expected growth and vention and/or early detection of health	0	0	2	3	4	5	6	7	8	53
and supports the emotional, n	de and direct nursing care that promotes nental and social well being of the client as well as clients with acute or chronic	0	1	2	3	4	5	6	7	8	53
Basic Care and Comfort: Pro	ovide comfort and assistance in the daily living.	0	1	2	3	4	5	6	Ø	8	63
performance of activities of c											53
performance of activities of c Pharmacological and Parente	eral Therapies: Provide care related to tions and parenteral therapies.	0	1	2	3	4	5	6		8	
Performance of activities of c Pharmacological and Parent the administration of medicat Reduction of Risk Potential:	tions and parenteral therapies. Reduce the likelihood that clients will alth problems related to existing	0	1	2	3	4	(5)	6	0	8	63

SECTION 5: DEMOGRAPHIC INFORMATION

In this section you are asked to provide background information that will be summarized to describe the group that completed this survey. No individual responses will be reported.



SECTION 6: COMMENTS

If we need additional information in order to clarify the results of this study, we may call and/or e-mail some participants. If you would be willing to answer a few additional questions by phone or e-mail, please provide an email address and number where you can be reached during the day or early evening.

Name:	Daytime or Early Evening Phone Number with Area Code:				
E-mail Address:	().		-		
You may write any comments or suggestions that you have in the space below.	$\mathbf{D}\mathbf{D}\mathbf{D}$				
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THANK YOU FOR PARTICIPATING IN THIS IMPC	RTANT WO	ORK!			
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Web Form 1

INSTRUCTIONS

This survey is being performed by the National Council of State Boards of Nursing (NCSBN) on behalf of your board of nursing/regulatory body. The survey is part of a comprehensive study of the practice of newly licensed registered nurses (RNs) in the NCSBN areas using the NCLEX[®] examination for primary licensure decisions. Please complete this survey as soon as possible. This is your opportunity to contribute to the development of the NCLEX[®] examination that future candidates will take.

Instructions:

Please read each question carefully and respond by selecting the option that most closely represents your answer. Choose the answer that <u>best</u> applies to your practice and select the appropriate response(s). A few questions ask you to enter information.

You will notice that many questions ask you to report what you did on your **<u>last day of work</u>**. It is important that we obtain information from nurses experiencing both typical and unusual workdays, so please answer the questions according to what you did on your **<u>last</u>** day of work even if that day was not typical.

As used in this survey, the "client" can be an individual, family, or group which includes significant others and population. "Clients" are the same as "residents" or "patients." Your answers will be kept confidential and your individual responses to the questions will not be released.

Survey Progression:

To progress through the survey, please use the navigation buttons located at the bottom of each page:

Continue to the next page of the survey by clicking the Continue to the Next Page link.

Go back to the previous page in the survey by clicking on the *Previous Page* link. This will allow you to move back in the survey to look over the previous answers.

Finish the survey, by clicking the Submit the Survey link on the Thank You page.

INTRODUCTION

1. What type(s) of nursing license do you hold? (Select ALL that apply) RN LPN/VN

INTRODUCTION

2. Are you currently working as an RN in the U.S. or a Member Board jurisdiction?

⊖ Yes

O No

()

() No

INTRODUCTION

3. In your current position, do you provide direct care to clients? (*Note: Faculty supervision of student clinical experiences is not considered "direct care."*)

Yes, 20 or more hours per week, on average

Yes, less than 20 hours per week, on average

SECTION 1: NURSING ACTIVITIES

This section contains a list of activities descriptive of nursing practice in a variety of settings. Please note that some activities may not apply to your setting. For each activity, two questions are asked. Please answer both questions.

QUESTION A - FREQUENCY: If the activity is performed in your work setting, how often (0 Times, 1 Time, 2 Times, 3 Times, 4 Times, or 5+ Times) did you personally perform the activity on the last day you worked? If it is never performed in your work setting or is not applicable, then select "NEVER performed in work setting" and then respond to Question B - Importance.

QUESTION B - IMPORTANCE: How important is performing this nursing activity in regard to client safety? Consider the importance with regard to the risk of unnecessary complications, impairment of function, or serious distress to clients. Rate all activities.

NOTE: Inclusion of an activity on this practice analysis survey does not imply that the activity is or would be included in the RN scope of practice defined by any specific jurisdiction. You must refer to your local board of nursing/regulatory body for information about your scope of practice.

Question A – FREQUENCY - <u>If an activity does not apply to your work setting</u>, choose "Never performed in work setting", still select the importance rating as noted in Question B and then move on to the next activity. <u>If an activity is performed in your</u> <u>work setting</u> select 0-5+ reflecting the frequency of performing the activity on your <u>last day of work</u>, then complete Question B.

Question B – IMPORTANCE - Rate the overall importance of this activity considering client safety, and/or threat of complications or distress with 1 = Not Important, 2 = Minimally Important, 3 = Moderately Important, 4 = Important, 5 = Critically Important.

	A - Frequency	B - Importance
1 Perform procedures necessary to safely admit, transfer or discharge a client	V	•
2 Advocate for client rights and needs	•	•
3 Collaborate with interprofessional team members when providing client care (e.g., language interpreter, health care professionals)	T	•
4 Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)		•
5 Recognize the need for referrals and obtain necessary orders	V	
6 Recognize limitations of self and others and seek assistance	v	
7 Utilize valid resources to enhance the care provided to a client (e.g., evidenced-based research, information technology, policies and procedures)	_	
8 Organize workload to manage time effectively	•	
9 Provide cost effective care	•	•
10 Verify appropriateness and/or accuracy of a treatment order	•	•
11 Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	×	
12 Facilitate appropriate and safe use of equipment	•	
13 Follow requirements for use of restraints and/or safety devices (e.g., least restrictive restraints, timed client monitoring)	T	
14 Provide prenatal care and education	•	•
15 Provide information for prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	•	
16 Provide post-partum care and education	•	•
17 Provide care and education for the newborn less than 1 month old through the infant or toddler client through 2 years	T	×

18 Provide care and education for the adult client ages 65 through 85 years and over	V	_
19 Assess psychosocial, spiritual and occupational factors affecting care, and plan interventions	_	_
20 Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	T	T
21 Provide end of life care and education to clients		•
22 Assess client in coping with life changes and provide support (e.g., palliative, amputation, new diagnosis)		T
23 Recognize non-verbal cues to physical and/or psychological stressors	×	T
24 Provide client nutrition through continuous or intermittent tube feedings	×	T
25 Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	×	

SECTION 1: NURSING ACTIVITIES

	A - Frequency	B - Importance
26 Apply, maintain or remove orthopedic devices (e.g., traction, splints, braces, casts)		
27 Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)	T	Y
28 Evaluate client intake and output and intervene as needed		
29 Evaluate appropriateness and accuracy of medication order for client		
30 Monitor intravenous infusion and maintain site (e.g., central, PICC, epidural and venous access devices)		
31 Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)		T
32 Access venous access devices, including tunneled, implanted and central lines		
33 Administer parenteral nutrition and evaluate client response (i.e., TPN)		
34 Assess and respond to changes in client vital signs	•	
35 Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)		
36 Provide preoperative care	•	•
37 Use precautions to prevent injury and/or complications associated with a procedure or diagnosis		V
38 Insert, maintain or remove a gastric tube	•	
39 Recognize trends and changes in client condition and intervene as needed	•	•
40 Monitor and care for clients on a ventilator	•	
41 Provide ostomy care and education (e.g., tracheal, enteral)	•	
42 Perform hemodialysis or continuous renal replacement therapy		
43 Manage the care of a client on telemetry	•	_
44 Implement and monitor phototherapy	•	_
45 Manage the care of the client with a fluid and electrolyte imbalance		
46 Identify pathophysiology related to an acute or chronic condition (e.g., signs and symptoms)	_	
47 Educate client regarding an acute or chronic	•	

condition

48. How well did the survey cover the important activities a newly licensed RN should possess, regardless of the practice setting?

Very well
Well
Adequately

) Poorly

49. Please list any important activities you believe are missing from the survey

Page 9

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SECTION 2: EXPERIENCE AND ORIENTATION	
1.What is the total number of months you have worked as an RN in the U.S or its territories? Please enter a positive, whole number only (e.g., 20).	
2a. Have you ever worked outside the U.S. or its territories as an RN?	
Ves No	

SECTION 2: EXPERIENCE AND ORIENTATION
2b. If yes, what is the total number of months you worked outside the U.S. or its territories as an RN? Please enter a positive, whole number only (e.g., 7).
Months:

SECTION 2: EXPERIENCE AND ORIENTATION
3. Which of the following <u>best</u> describes the orientation you received for your current position? (Select only ONE)
No formal orientation
Classroom instruction/skills lab work only
Classroom and/or skills lab plus supervised work with clients
Work with an assigned preceptor(s) or mentor(s) with or without additional classroom or skills lab work
A formal internship/residency with or without additional classroom or skills lab work
Other (please specify):

SE	CTION 2: EX	PERIENCE A	ATION		
	-	an orientation ve, whole num	-	s it? Please	

SECTION 2: EXPERIENCE AND ORIENTATION

5. Which of the following types of certificates have you earned or courses completed since you have concluded your nursing course requirements? (Select ALL that apply)

Advanced Cardiac Life Support
Basic Life Support
Behavioral Management
Chemotherapy
Conscious/Moderate Sedation
Coronary Care
Critical Care
Intravenous Therapy
Neonatal Advanced Life Support
Neonatal Resuscitation
Pediatric Advanced Life Support
Phlebotomy
Peritoneal Dialysis
Rehabilitation
None
Other (please specify)

SECTION 2: EXPERIENCE AND ORIENTATION

6a. Do you routinely have administrative responsibilities within your nursing position (e.g., Unit Manager, Team Leader, Charge Nurse, Coordinator)?

Yes

SECTION 2: EXPERIENCE AND ORIENTATION

6b. If yes, is this your primary position?

O Yes

O No

SECTION 3: WORK ENVIRONMENT			
	ich of the following <u>best</u> describes <u>most</u> of your clients on the last day you ed? (Select ALL that apply)		
we	ell clients, possibly with minor illnesses		
OE	B (Maternity) clients		
Cli	ients with stabilized chronic conditions		
Cli	ients with unstabilized chronic conditions		
Cli	ients with acute conditions, including clients with medical, surgical or critical conditions		
Cli	ients at end-of-life		
Cli	ients with behavioral/emotional conditions		
Ot	ther (please specify)		
day y	hich of the following best describes the ages of most of your clients on the last rou worked? (Select ALL that apply) ewborn (less than 1 month) fant/toddler (1 month-2 years) reschool (ages 3-5) chool Age (ages 6-12) dolescent (ages 13-17) full (ages 18-64)		
Ad	dult (over age 85)		

3. Which of the following choices <u>best</u> describes your employment setting/specialty area <u>on the last day you worked</u>? If you worked mainly in one setting, select the appropriate choice for that one setting. If you worked in more than one setting, select the appropriate choices for all settings where you spent at least one-half of your time. (Select no more than TWO answers)

Critical care (e.g., ICU, CCU, step-down units,	Subacute unit
pediatric/neonatal intensive care, emergency department, post-	Transitional care unit
anesthesia recovery unit)	
Medical-surgical unit or any of its sub-specialties (e.g., oncology, orthopedics, neurology)	Physician/Advanced Practice RN/Nurse Practitioner (NP)/Dentist office
Pediatrics	Occupational health
Nursery	Outpatient clinic
Labor and delivery	Home health, including visiting nurses associations
Postpartum unit	Public health
Psychiatry or any of its sub-specialties (e.g., detox)	Student/school health
Assisted Living	Hospice care
Operating room, including outpatient surgery and surgicenters	Prison/Correctional Facility/Jail
Nursing home, skilled or intermediate care	Short Stay/Observational
Other long-term care (e.g., residential care, developmental disability)	Step-down/Progressive Care
Rehabilitation	
Other (please specify)	
4. Which of the following <u>best</u> describes the	type of facility/organization where your
employment setting/specialty area is locate	d? (Select only ONE)
Hospital	
C Long-term care facility	
Community-based or ambulatory care facility/organization (inclu health, physician/Advanced Practice RN/Nurse Practitioner (NP)/denti-	uding public health department, visiting nurses association, home st office, clinic, school, prison, etc.)
Other (please specify)	

: only
: only
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t only
. only

SECTION 4: DESCRIPTION OF YOUR LAST DAY OF WORK
1. How many hours did you work on the <u>last shift you worked</u> ? Please enter a positive, whole number only and round up (e.g., 20).
2. How many clients were you responsible for on the <u>last day you worked</u> ? This includes clients to whom you were assigned to provide direct care, indirect care (provided through others such as LPN/VNs or unlicensed assistive personnel), or any performance of tasks or other responsibility for care during all or any part of your time in the work setting. Please enter a positive, whole number only and round up
(e.g., 5).
Number of clients:
Page 20

3. How much of your time was spent performing each of the following types of activities on the <u>last day you worked</u>? For each of the sets of activities please rate the approximate amount of time you spent on that type of activity <u>on the last day you worked</u> rounded to the nearest hour. For example, if you spent about 2 and ¼ hours on a set of activities, select the option "2". If you spent 3 and ¾ hours on a set of activities, select the option "2". If you spent 3 and ¾ hours on a set of activities, select the option "4." Numerous categories may be performed simultaneously; therefore total hours spent may be greater than total hours or shift worked.

Sets of Activities

Approximate Amount of Time	e (Hours) Spent on Set of Activities
	0 1 2 3 4 5 6 7 8 8+
1. Management of Care: Provide and direct nursing care that enhances the care delivery setting to protect clients and health care personnel.	0000000000
 Safety and Infection Control: Protect clients and health care personnel from health and environmental hazards. 	0000000000
3. Health Promotion and Maintenance: Provide and direct nursing care of the client that incorporates the knowledge of expected growth and development principles, prevention and/or early detection of health problems, and strategies to achieve optimal health.	0000000000 °
4. Psychosocial Integrity: Provide and direct nursing care that promotes and supports the emotional, mental and social well being of the client experiencing stressful events, as well as clients with acute or chronic mental illness.	0000000000
5. Basic Care and Comfort: Provide comfort and assistance in the performance of activities of daily living.	0000000000
 Pharmacological and Parenteral Therapies: Provide care related to the administration of medications and parenteral therapies. 	0000000000
 Reduction of Risk Potential: Reduce the likelihood that clients will develop complications or health problems related to existing conditions, treatments or procedures. 	0000000000
8. Physiological Adaptation: Manage and provide care for clients with acute, chronic or life threatening physical health conditions.	0000000000

SECTION 5: DEMOGRAPHIC INFORMATION

In this section you are asked to provide background information that will be summarized to describe the group that completed this survey. No individual responses will be reported.

1a. Did you work as an unlicensed assistive personnel prior to becoming an RN?



ECTION 5: DEMOGRAPHIC INFORMATION		
1b. If yes, for how many years and months? Please enter positive, whole nu (e.g., 10).	mbers	
Years: Months:		
	Page 23	

SECTION 5: DEMOGRAPHIC INFORMATION

2a. Did you work as an LPN/VN prior to becoming an RN?

Yes

SI	SECTION 5: DEMOGRAPHIC INFORMATION			
	2b. If y (e.g., 10	res, for how many years and months? Please enter positive, whole numl 0).	bers	
	Years: Months:			
			Page 25	

SECTION 5: DEMOGRAPHIC INFORMATION		
3. What is your gender? Male Female		
4. What is your age in years? Please answer with a positive, whole numbers (e.g., 35).		
5. Which of the following <u>best</u> describes your racial/ethnic background? (Select only ONE)		
African American Asian Indian Asian Other Hispanic Native American Pacific Islander Vhite - Not of Hispanic Origin Other		
 English and another language Another language 		

RN - Diploma in U	J.S.				
RN - Associate de	gree in U.S.				
RN - Baccalaurea	te degree in U.S.				
RN - Generic mas	ter's degree in U.S.				
RN - Generic doct	orate in U.S. (e.g., ND)				
Any nursing prog	ram NOT located in the U.S.				
In progress to cor	nplete generic master's				
Other program (pl	ease specify)				
8. How many m	nonths has it been s	ince you comp	leted course	requirements	from the

SECTIONS 6: COMMENTS

If we need additional information in order to clarify the results of this study, we may call and/or e-mail some participants. If you would be willing to answer a few additional questions by phone or e-mail, please provide a number where you can be reached during the day or early evening.

Name:	
Daytime or Early Evening	
Phone Number with Area	
Code:	
E-mail address:	

You may write any comments or suggestions that you have in the space below.

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^

Thank you!

Thank you for your participation in this important study.

To finalize your survey, please click the **Submit Survey** button below.

Web Form 2

INSTRUCTIONS

This survey is being performed by the National Council of State Boards of Nursing (NCSBN) on behalf of your board of nursing/regulatory body. The survey is part of a comprehensive study of the practice of newly licensed registered nurses (RNs) in the NCSBN areas using the NCLEX[®] examination for primary licensure decisions. Please complete this survey as soon as possible. This is your opportunity to contribute to the development of the NCLEX[®] examination that future candidates will take.

Instructions:

Please read each question carefully and respond by selecting the option that most closely represents your answer. Choose the answer that <u>best</u> applies to your practice and select the appropriate response(s). A few questions ask you to enter information.

You will notice that many questions ask you to report what you did on your <u>last day of work</u>. It is important that we obtain information from nurses experiencing both typical and unusual workdays, so please answer the questions according to what you did on your <u>last</u> day of work even if that day was not typical.

As used in this survey, the "client" can be an individual, family, or group which includes significant others and population. "Clients" are the same as "residents" or "patients." Your answers will be kept confidential and your individual responses to the questions will not be released.

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INTRODUCTION 1. What type(s) of nursing license do you hold? (Select ALL that apply) RN LPN/VN

INTRODUCTION

2. Are you currently working as an RN in the U.S. or a Member Board jurisdiction?

Ves No

INTRODUCTION

No No

3. In your current position, do you provide direct care to clients? (*Note: Faculty supervision of student clinical experiences is not considered "direct care."*)

Yes, 20 or more hours per week, on average

Yes, less than 20 hours per week, on average

SECTION 1: NURSING ACTIVITIES

This section contains a list of activities descriptive of nursing practice in a variety of settings. Please note that some activities may not apply to your setting. For each activity, two questions are asked. Please answer both questions.

QUESTION A - FREQUENCY: If the activity is performed in your work setting, how often (0 Times, 1 Time, 2 Times, 3 Times, 4 Times, or 5+ Times) did you personally perform the activity on the last day you worked? If it is never performed in your work setting or is not applicable, then select "NEVER performed in work setting" and then respond to Question B - Importance.

QUESTION B - IMPORTANCE: How important is performing this nursing activity in regard to client safety? Consider the importance with regard to the risk of unnecessary complications, impairment of function, or serious distress to clients. Rate all activities.

NOTE: Inclusion of an activity on this practice analysis survey does not imply that the activity is or would be included in the RN scope of practice defined by any specific jurisdiction. You must refer to your local board of nursing/regulatory body for information about your scope of practice.

Question A – FREQUENCY - <u>If an activity does not apply to your work setting</u>, choose "Never performed in work setting", still select the importance rating as noted in Question B and then move on to the next activity. <u>If an activity is performed in your</u> <u>work setting</u> select 0-5+ reflecting the frequency of performing the activity on your last day of work, then complete Question B.

Question B – IMPORTANCE - Rate the overall importance of this activity considering client safety, and/or threat of complications or distress with 1 = Not Important, 2 = Minimally Important, 3 = Moderately Important, 4 = Important, 5 = Critically Important.

	A - Frequency	B - Importance
1 Provide and receive hand off of care (report) on assigned clients		•
2 Prioritize the delivery of client care	•	•
3 Receive and/or transcribe health care provider orders		*
4 Verify that the client received appropriate procedure education and consents to care and procedures		
5 Initiate, evaluate, and update plan of care (e.g., care map, clinical pathway)	Y	×
6 Report client conditions as required by law (e.g., abuse/neglect and communicable disease)	T	v
7 Recognize ethical dilemmas and take appropriate action		*
8 Practice in a manner consistent with a code of ethics for registered nurses	T	×
9 Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions)		¥
10 Follow procedures for handling biohazardous and hazardous materials	T	×
11 Acknowledge and document practice errors (e.g., incident report for medication error)		•
12 Educate client on safety issues (e.g., home, school, transportation)	T	×
13 Educate client and staff regarding infection control measures	×	x
14 Plan and/or participate in community health education	T	×
15 Provide information about health promotion and maintenance recommendations (e.g., physician visits, immunizations)		
16 Perform comprehensive health assessments	•	•
17 Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	×	×

18 Assess client ability to manage care in home environment and plan care accordingly (e.g., equipment, community resources)	T	T
19 Assess client for abuse or neglect and intervene as appropriate	•	
20 Provide a therapeutic environment		
21 Assess the potential for violence and use safety precautions (e.g., suicide, homicide, self-destructive behavior)	_	_
22 Use therapeutic communication techniques to provide client support	T	T
23 Provide care for a client experiencing visual, auditory or cognitive distortions (e.g., hallucinations)	•	
24 Perform post-mortem care		Y
25 Perform skin assessment and implement measures to maintain skin integrity and prevent skin breakdown (e.g., turning, repositioning, pressure-relieving support surfaces)	T	T

SECTION 1: NURSING ACTIVITIES

	A - Frequency	B - Importance
26 Apply and maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	×	×
27 Manage the client's nutritional intake (e.g., adjust diet, monitor height and weight)		
28 Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	V	_
29 Prepare and administer medications, using rights of medication administration	T	x
30 Administer controlled substances within regulatory guidelines (e.g., witness, waste)		
31 Titrate dosage of medication based on assessment and ordered parameters (e.g., giving insulin according to blood glucose levels, titrating medication to maintain a specific blood pressure)		
32 Educate client about medications	•	
33 Administer pharmacological measures for pain management	-	
34 Perform focused assessment		
35 Evaluate responses to procedures and treatments	•	v
36 Manage client during and/or following a procedure with moderate sedation	-	•
37 Educate client about treatments and procedures	~	▼
38 Insert, maintain or remove a urinary catheter	v	v
39 Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	×	
40 Perform wound care or dressing change	•	
41 Provide postoperative care		•
42 Perform suctioning (e.g., oral, nasopharyngeal, endotracheal, tracheal)	×	×
43 Manage the care of a client with impaired ventilation/oxygenation	Y	x
44 Manage the care of a client with a pacing device (e.g., pacemaker, vagus nerve stimulator)	T	•
45 Manage the care of a client with alteration in hemodynamics, tissue perfusion and hemostasis (e.g., cerebral, cardiac, peripheral)	•	
46 Manage the care of a client receiving hemodialysis		V

48. How well did the survey cover the important activities a newly licensed RN should possess, regardless of the practice setting?
Very well
Adequately
Poorly
49. Please list any important activities you believe are missing from the survey

SECTION 2: EXPERIENCE AND ORIENTA	ΓΙΟΝ
1.What is the total number of months you hat territories? Please enter a positive, whole no Months:	
2a. Have you ever worked outside the U.S. o	or its territories as an RN?
Yes	
No	

SECTION 2: EXPERIENCE AND ORIENTATION

2b. If yes, what is the total number of months you worked outside the U.S. or its territories as an RN? Please enter a positive, whole number only (e.g., 7).

Months:

SECTION 2: EXPERIENCE AND ORIENTATION

3. Which of the following <u>best</u> describes the orientation you received for your current position? (Select only ONE)

No formal orientation

Classroom instruction/skills lab work only

Classroom and/or skills lab plus supervised work with clients

Work with an assigned preceptor(s) or mentor(s) with or without additional classroom or skills lab work

A formal internship/residency with or without additional classroom or skills lab work

Other (please specify):

SECTION 2: EXPERIENCE AND ORIENTATION
4. If you had an orientation period, how many weeks was it? Please enter a positive, whole number only (e.g., 10). Weeks:

Which of the following types of certificates have you earned or courses completed nce you have concluded your nursing course requirements? (Select ALL that apply) Advanced Cardiac Life Support Basic Life Support Behavioral Management Chemotherapy Conscious/Moderate Sedation Coronary Care Critical Care Intravenous Therapy Neonatal Resuscitation Pediatric Advanced Life Support Phelootomy Peritoneal Dialysis Rehabilitation None Other (please specify)		N 2: EXPERIENCE AND ORIENTATION
Basic Life Support Behavioral Management Chemotherapy Conscious/Moderate Sedation Coronary Care Critical Care Intravenous Therapy Neonatal Advanced Life Support Neonatal Resuscitation Pediatric Advanced Life Support Phebotomy Peritoneal Dialysis Rehabilitation None		
Behavioral Management Chemotherapy Conscious/Moderate Sedation Coronary Care Critical Care Intravenous Therapy Neonatal Advanced Life Support Neonatal Resuscitation Peliatric Advanced Life Support Phlebotomy Penitoneal Dialysis Rehabilitation None	Adv	ranced Cardiac Life Support
Chemotherapy Conscious/Moderate Sedation Coronary Care Critical Care Intravenous Therapy Neonatal Advanced Life Support Neonatal Resuscitation Pediatric Advanced Life Support Phiebotomy Phiebotomy Rehabilitation None	Bas	ic Life Support
Conscious/Moderate Sedation Coronary Care Critical Care Intravenous Therapy Neonatal Advanced Life Support Neonatal Resuscitation Peliatric Advanced Life Support Phlebotomy Peritoneal Dialysis Rehabilitation None	Beł	navioral Management
Coronary Care Critical Care Intravenous Therapy Neonatal Advanced Life Support Neonatal Resuscitation Pediatric Advanced Life Support Phlebotomy Peritoneal Dialysis Rehabilitation None	Che	amotherapy
Critical Care Intravenous Therapy Neonatal Advanced Life Support Neonatal Resuscitation Pediatric Advanced Life Support Phlebotomy Peritoneal Dialysis Rehabilitation None	Cor	scious/Moderate Sedation
Intravenous Therapy Neonatal Advanced Life Support Neonatal Resuscitation Pediatric Advanced Life Support Phlebotomy Peritoneal Dialysis Rehabilitation None	Cor	onary Care
Neonatal Advanced Life Support Neonatal Resuscitation Pediatric Advanced Life Support Phlebotomy Peritoneal Dialysis Rehabilitation None	Crit	ical Care
Neonatal Resuscitation Pediatric Advanced Life Support Phlebotomy Peritoneal Dialysis Rehabilitation None	Intr	avenous Therapy
Pediatric Advanced Life Support Phlebotomy Peritoneal Dialysis Rehabilitation None	Neo	onatal Advanced Life Support
Phlebotomy Peritoneal Dialysis Rehabilitation None	Neo	onatal Resuscitation
Peritoneal Dialysis Rehabilitation None	Peo	diatric Advanced Life Support
Rehabilitation	Phl	ebotomy
] None	Per	itoneal Dialysis
	Rel	nabilitation
Other (please specify)	Nor	1e
	Oth	er (please specify)

SECTION 2: EXPERIENCE AND ORIENTATION

6a. Do you routinely have administrative responsibilities within your nursing position (e.g., Unit Manager, Team Leader, Charge Nurse, Coordinator)?

◯ Yes

O No

SECTION 2: EXPERIENCE AND ORIENTATION

6b. If yes, is this your primary position?

O Yes

O No

SECTI	ON 3: WORK ENVIRONMENT
	Vhich of the following <u>best</u> describes <u>most</u> of your clients on the last day you rked? (Select ALL that apply)
	Well clients, possibly with minor illnesses
	OB (Maternity) clients
	Clients with stabilized chronic conditions
	Clients with unstabilized chronic conditions
	Clients with acute conditions, including clients with medical, surgical or critical conditions
	Clients at end-of-life
	Clients with behavioral/emotional conditions
	Other (please specify)
	Vhich of the following <u>best</u> describes the ages of <u>most</u> of your clients on the last you worked? (Select ALL that apply) Newborn (less than 1 month)
	Infant/toddler (1 month-2 years)
	Preschool (ages 3-5)
	School Age (ages 6-12)
	Adolescent (ages 13-17)
	Adult (ages 18-64)
	Adult (ages 65-85)
	Adult (over age 85)

3. Which of the following choices <u>best</u> describes your employment setting/specialty area <u>on the last day you worked</u>? If you worked mainly in one setting, select the appropriate choice for that one setting. If you worked in more than one setting, select the appropriate choices for all settings where you spent at least one-half of your time. (Select <u>no more than TWO</u> answers)

Critical care (e.g., ICU, CCU, step-down units,	Subacute unit		
pediatric/neonatal intensive care, emergency department, post- anesthesia recovery unit)	Transitional care unit		
Medical-surgical unit or any of its sub-specialties (e.g., oncology, orthopedics, neurology)	Physician/Advanced Practice RN/Nurse Practitioner (NP)/Dentist office		
Pediatrics	Occupational health		
Nursery	Outpatient clinic		
Labor and delivery	Home health, including visiting nurses associations		
Postpartum unit	Public health		
Psychiatry or any of its sub-specialties (e.g., detox)	Student/school health		
Assisted Living	Hospice care		
Operating room, including outpatient surgery and surgicenters	Prison/Correctional Facility/Jail		
Nursing home, skilled or intermediate care	Short Stay/Observational		
Other long-term care (e.g., residential care, developmental disability)	Step-down/Progressive Care		
Rehabilitation			
Other (please specify)			
Which of the following <u>best</u> describes the type of facility/organization where your employment setting/specialty area is located? (Select only ONE)			
O Long term care facility			
Community based or embulatory and facility/organization (inclu	uding sublic boolth department visiting surges apposition, howe		
	Iding public health department, visiting nurses association, home st office, clinic, school, prison, etc.)		
Community-based or ambulatory care facility/organization (inclu			
Community-based or ambulatory care facility/organization (inclu health, physician/Advanced Practice RN/Nurse Practitioner (NP)/denti			
Community-based or ambulatory care facility/organization (inclu health, physician/Advanced Practice RN/Nurse Practitioner (NP)/denti			
Community-based or ambulatory care facility/organization (inclu health, physician/Advanced Practice RN/Nurse Practitioner (NP)/denti			
Community-based or ambulatory care facility/organization (inclu health, physician/Advanced Practice RN/Nurse Practitioner (NP)/denti			

5. If	you work in a hospital or nursing home, how large is it? (Select only ONE)
\bigcirc	Less than 50 beds
\bigcirc	50-99 beds
С	100-299 beds
)	300-499 beds
С	500 or more beds
\sum	do not know
\mathcal{D}	do not work in a hospital or nursing home
	hich of the following <u>best</u> describes your shift <u>on a typical work day</u> ? (Select only
$\overline{\ }$	Days
\leq	Evenings
\leq	lights
)	Rotating shifts
)	Other (please specify)
. w	hat is the length of your shift <u>on a typical work day</u> ? (Select only ONE)
	3 hours
$\overline{}$	10 hours
\leq	12 hours
\leq	/aried 8 hours and 12 hours
	Dther (please specify)
l	
3. W	hich <u>best</u> describes the location of your employment setting?
\bigcirc	Jrban/Metropolitan area
\sim	Suburban
\sim	Rural

-	hours did you work on the <u>last shift you worked</u> ? Please enter a e number only and round up (e.g., 20).
Hours:	
includes client (provided thro any performan	clients were you responsible for on the <u>last day you worked</u> ? This ts to whom you were assigned to provide direct care, indirect care ough others such as LPN/VNs or unlicensed assistive personnel), or nce of tasks or other responsibility for care during all or any part of you ork setting. Please enter a positive, whole number only and round up
(e.g., 5).	
Number of clients:	

3. How much of your time was spent performing each of the following types of activities on the <u>last day you worked</u>? For each of the sets of activities please rate the approximate amount of time you spent on that type of activity <u>on the last day you worked</u> rounded to the nearest hour. For example, if you spent about 2 and ¼ hours on a set of activities, select the option "2". If you spent 3 and ¾ hours on a set of activities, select the option "2". If you spent 3 and ¾ hours on a set of activities, select the option "4." Numerous categories may be performed simultaneously; therefore total hours spent may be greater than total hours or shift worked.

Sets of Activities

Approximate Amount of Time (Hours) Spent on Set of Activities

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 Reduction of Risk Potential: Reduce the likelihood that clients will develop complications or health problems related to existing conditions, treatments or procedures.

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0000000000

0000000000

In this section you are asked to provide background information that will be summarized to describe the group that completed this survey. No individual responses will be reported.

1a. Did you work as an unlicensed assistive personnel prior to becoming an RN?

\bigcirc	Yes
\bigcirc	No

1b. If yes, for how many years and months? Please enter positive, whole numbers

(e.g., 10).

Years:	
Months:	

2a. Did you work as an LPN/VN prior to becoming an RN?

Yes

2b. If yes, for how many years and months? Please enter positive, whole numbers

(e.g., 10).

Years:	
Months:	

SECTION 5: DEMOGRAPHIC INFORMATION	
3. What is your gender? Male Female	
4. What is your age in years? Please answer with a positive, whole numbers (e.g., 35).	
5. Which of the following <u>best</u> describes your racial/ethnic background? (Select only ONE)	
 African American Asian Indian Asian Other Hispanic Native American Pacific Islander White – Not of Hispanic Origin Other 	
6. What is your primary language? English English and another language Another language	

7. What type of <u>basic</u> nursing education program qualified you to take the NCLEX-RN®?
(Select only ONE)
RN - Diploma in U.S.
RN - Associate degree in U.S.
RN - Baccalaureate degree in U.S.
RN - Generic master's degree in U.S.
RN - Generic doctorate in U.S. (e.g., ND)
Any nursing program NOT located in the U.S.
In progress to complete generic master's
Other program (please specify)
8. How many months has it been since you completed course requirements from the
above nursing education program? Please enter a positive, whole number (e.g., 15)
Months:

SECTIONS 6: COMMENTS

If we need additional information in order to clarify the results of this study, we may call and/or e-mail some participants. If you would be willing to answer a few additional questions by phone or e-mail, please provide a number where you can be reached during the day or early evening.

Name:		· · ·			
Daytime or Early Evening Phone Number with Area Code:					
E-mail address:					
ou may write any o	comments or s	suggestions	that you have ir	n the space be	low.
			-		×

Thank you!

Thank you for your participation in this important study.

To finalize your survey, please click the **Submit Survey** button below.

Web Form 3

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INTRODUCTION 1. What type(s) of nursing license do you hold? (Select ALL that apply) RN LPN/VN

INTRODUCTION

2. Are you currently working as an RN in the U.S. or a Member Board jurisdiction?

⊖ Yes

O No

()

() No

INTRODUCTION

3. In your current position, do you provide direct care to clients? (*Note: Faculty supervision of student clinical experiences is not considered "direct care."*)

Yes, 20 or more hours per week, on average

Yes, less than 20 hours per week, on average

SECTION 1: NURSING ACTIVITIES

This section contains a list of activities descriptive of nursing practice in a variety of settings. Please note that some activities may not apply to your setting. For each activity, two questions are asked. Please answer both questions.

QUESTION A - FREQUENCY: If the activity is performed in your work setting, how often (0 Times, 1 Time, 2 Times, 3 Times, 4 Times, or 5+ Times) did you personally perform the activity on the last day you worked? If it is never performed in your work setting or is not applicable, then select "NEVER performed in work setting" and then respond to Question B - Importance.

QUESTION B - IMPORTANCE: How important is performing this nursing activity in regard to client safety? Consider the importance with regard to the risk of unnecessary complications, impairment of function, or serious distress to clients. Rate all activities.

NOTE: Inclusion of an activity on this practice analysis survey does not imply that the activity is or would be included in the RN scope of practice defined by any specific jurisdiction. You must refer to your local board of nursing/regulatory body for information about your scope of practice.

Question A – FREQUENCY - <u>If an activity does not apply to your work setting</u>, choose "Never performed in work setting", still select the importance rating as noted in Question B and then move on to the next activity. <u>If an activity is performed in your</u> <u>work setting</u> select 0-5+ reflecting the frequency of performing the activity on your <u>last day of work</u>, then complete Question B.

Question B – IMPORTANCE - Rate the overall importance of this activity considering client safety, and/or threat of complications or distress with 1 = Not Important, 2 = Minimally Important, 3 = Moderately Important, 4 = Important, 5 = Critically Important.

	A - Frequency	B - Importance
1 Assign and supervise care provided by others (e.g., LPN/VN, assistive personnel, other RNs)	V	•
2 Participate in performance improvement/quality improvement process	V	
3 Integrate advance directives into client plan of care	•	_
4 Provide education to clients and staff about client rights and responsibilities	•	•
5 Maintain client confidentiality and privacy	•	_
6 Manage conflict among clients and health care staff	V	•
7 Use approved abbreviations and standard terminology when documenting care	×	
8 Provide care within the legal scope of practice	•	_
9 Protect client from injury (e.g., falls, electrical hazards)	×	
10 Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	×	•
11 Ensure proper identification of client when providing care	×	
12 Implement emergency response plans (e.g., internal/external disaster, bomb threat, community planning)	•	•
13 Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	V	
14 Perform targeted screening assessments (e.g., vision, nutrition)	v	•
15 Provide care and education to a client in labor or antepartum client	×	
16 Assess client's readiness to learn, learning preferences and barriers to learning	×	•
17 Provide care and education for the adult client ages 18 through 64 years	•	•
18 Assess and teach clients about health risks based on family, population, and/or community characteristics	Y	

19 Assess client for drug/alcohol dependencies, withdrawal, or toxicities and intervene as appropriate	•		
20 Incorporate client cultural practice and beliefs when planning and providing care	•		
21 Assess family dynamics to determine plan of care (e.g., structure, bonding, communication, boundaries, coping mechanisms)	_		
22 Incorporate behavioral management techniques when caring for a client (e.g., positive reinforcement, setting limits, de-escalation techniques)		T	
23 Assess and intervene in client performance of activities of daily living	•		
24 Perform irrigations (e.g., of bladder, ear, eye)	~	V	
25 Assess and manage client with an alteration in elimination (e.g., howel, urinary)	•	•	

SECTION 1: NURSING ACTIVITIES

	A - Frequency	B - Importance
26 Provide nonpharmacological comfort measures (e.g., light dimming, warm blanket)		•
27 Assess client need for sleep/rest and intervene as needed		•
28 Assess client need for pain management	Y	_
29 Perform calculations needed for medication administration		•
30 Handle and maintain medication in a safe and controlled environment		•
31 Administer blood products and evaluate client response		T
32 Evaluate client response to medication (e.g., therapeutic effects, side effects, adverse reactions)		•
33 Participate in medication reconciliation process	•	•
34 Monitor the results of diagnostic testing and intervene as needed		•
35 Provide preoperative and postoperative education	T	•
36 Obtain blood specimens peripherally or through central line		•
37 Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)		
38 Insert, maintain or remove a peripheral intravenous line		•
39 Perform emergency care procedures (e.g., cardio- pulmonary resuscitation, respiratory support, automated external defibrillator)	Y	•
40 Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)		T
41 Perform and manage care of client receiving peritoneal dialysis		T
42 Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)		•
43 Maintain optimal temperature of client (e.g., cooling and/or warming blanket)		T
44 Monitor and maintain arterial lines	T	
45 Evaluate the effectiveness of the treatment regimen for a client with an acute or chronic diagnosis	Y	×
46 Recognize signs and symptoms of complications and intervene appropriately when providing client		•

) Very well) Adequately) Poorly Decise list any important activities you believe are missing from the survey (**************	8. How well did the essess, regardless	e survey cover th s of the practice s		tivities a newl	y licensed RN s
) Well) Adequately) Poorly	Very well				
) Adequately) Poorly					
) Poorly					
ease list any important activities you believe are missing from the survey	<u>)</u> · · · · · · · · · · · · · · · · · · ·				
ease list any important activities you believe are missing from the survey					
	lease list any imp	ortant activities	you believe are	e missing from	the survey
					~

SECTION 2: EXPERIENCE AND ORIENTATION	
1.What is the total number of months you have worked as an RN in the U.S or its territories? Please enter a positive, whole number only (e.g., 20).	
Org Org No	

Months:	an RN? Please ente		

SECTION	2. EXDE		ENTATION
SECTION	Z. EAPE		

3. Which of the following <u>best</u> describes the orientation you received for your current position? (Select only ONE)

\bigcirc	No formal orientation
0	Classroom instruction/skills lab work only
0	Classroom and/or skills lab plus supervised work with clients
\bigcirc	Work with an assigned preceptor(s) or mentor(s) with or without additional classroom or skills lab work
\bigcirc	A formal internship/residency with or without additional classroom or skills lab work

Other (please specify):

S	ECTION 2: E>	(PERIENCE AND	ORIENTATION			
		an orientation perio ve, whole number o		eks was it? Please)	
	Weeks:					

SECTION 2: EXPERIENCE AND ORIENTATION

5. Which of the following types of certificates have you earned or courses completed since you have concluded your nursing course requirements? (Select ALL that apply)

Advanced Cardiac Life Support
Basic Life Support
Behavioral Management
Chemotherapy
Conscious/Moderate Sedation
Coronary Care
Critical Care
Intravenous Therapy
Neonatal Advanced Life Support
Neonatal Resuscitation
Pediatric Advanced Life Support
Phlebotomy
Peritoneal Dialysis
Rehabilitation
None
Other (please specify)

SECTION 2: EXPERIENCE AND ORIENTATION

6a. Do you routinely have administrative responsibilities within your nursing position (e.g., Unit Manager, Team Leader, Charge Nurse, Coordinator)?

Yes

SECTION 2: EXPERIENCE AND ORIENTATION

6b. If yes, is this your primary position?

O Yes

	Vell clients, possibly with minor illnesses
0	DB (Maternity) clients
	Clients with stabilized chronic conditions
0	Clients with unstabilized chronic conditions
	Clients with acute conditions, including clients with medical, surgical or critical conditions
	Clients at end-of-life
0	Clients with behavioral/emotional conditions
	Dther (please specify)
I	nfant/toddler (1 month-2 years)
F	Preschool (ages 3-5)
	School Age (ages 6-12)
,	Adolescent (ages 13-17)
/	Adult (ages 18-64)
_ /	Adult (ages 65-85)
	Adult (over age 85)
/	
/	
/	
/	
/	

3. Which of the following choices <u>best</u> describes your employment setting/specialty area <u>on the last day you worked</u>? If you worked mainly in one setting, select the appropriate choice for that one setting. If you worked in more than one setting, select the appropriate choices for all settings where you spent at least one-half of your time. (Select no more than TWO answers)

Critical care (e.g., ICU, CCU, step-down units, pediatric/neonatal intensive care, emergency department, post-	Subacute unit
anesthesia recovery unit)	Transitional care unit
Medical-surgical unit or any of its sub-specialties (e.g.,	Physician/Advanced Practice RN/Nurse Practitioner (NP)/Dentist
oncology, orthopedics, neurology)	office
Pediatrics	Occupational health
Nursery	Outpatient clinic
Labor and delivery	Home health, including visiting nurses associations
Postpartum unit	Public health
Psychiatry or any of its sub-specialties (e.g., detox)	Student/school health
Assisted Living	Hospice care
Operating room, including outpatient surgery and surgicenters	Prison/Correctional Facility/Jail
Nursing home, skilled or intermediate care	Short Stay/Observational
Other long-term care (e.g., residential care, developmental disability)	Step-down/Progressive Care
Rehabilitation	
Other (please specify)	
4. Which of the following <u>best</u> describes the	type of facility/organization where your
employment setting/specialty area is located	d? (Select only ONE)
Hospital	
C Long-term care facility	
Community-based or ambulatory care facility/organization (inclu health, physician/Advanced Practice RN/Nurse Practitioner (NP)/dentis	ding public health department, visiting nurses association, home st office, clinic, school, prison, etc.)
Other (please specify)	

Less than 50		
	beds	
50-99 beds		
0 100-299 beds	3	
300-499 beds	5	
500 or more b	beds	
I do not know		
I do not work	in a hospital or nursing home	
5. Which of t ONE)	he following <u>best</u> describes your shift <u>on a typical work day</u> ? (Select o	nıy
Days		
Evenings		
Nights		
Rotating shift	S	
Other (please	specify)	
\sim	e length of your shift <u>on a typical work day</u> ? (Select only ONE)	
7. What is th	e length of your shift <u>on a typical work day</u> ? (Select only ONE)	
\sim	e length of your shift <u>on a typical work day</u> ? (Select only ONE)	
8 hours	e length of your shift <u>on a typical work day</u> ? (Select only ONE)	
8 hours	e length of your shift <u>on a typical work day</u> ? (Select only ONE)	
8 hours 10 hours 12 hours	s and 12 hours	
8 hours 10 hours 12 hours Varied 8 hour	s and 12 hours	

SECTION 4: DESCRIPTION OF YOUR LAST DAY OF WORK	
1. How many hours did you work on the <u>last shift you worked</u> ? Please enter a positive, whole number only and round up (e.g., 20).	
2. How many clients were you responsible for on the <u>last day you worked</u> ? Th includes clients to whom you were assigned to provide direct care, indirect ca (provided through others such as LPN/VNs or unlicensed assistive personnel any performance of tasks or other responsibility for care during all or any part time in the work setting. Please enter a positive, whole number only and round	re), or of your
(e.g., 5).	
	Page 20

3. How much of your time was spent performing each of the following types of activities on the last day you worked? For each of the sets of activities please rate the approximate amount of time you spent on that type of activity on the last day you worked rounded to the nearest hour. For example, if you spent about 2 and ¼ hours on a set of activities, select the option "2". If you spent 3 and 34 hours on a set of activities, select the option "4." Numerous categories may be performed simultaneously; therefore total hours spent may be greater than total hours or shift worked.

Sets of Activities

Approximate Amount of Tim	e (Hours) Spent on Set of Activities
	0 1 2 3 4 5 6 7 8 8+
1. Management of Care: Provide and direct nursing care that enhances the care delivery setting to protect clients and health care personnel.	0000000000
 Safety and Infection Control: Protect clients and health care personnel from health and environmental hazards. 	0000000000
3. Health Promotion and Maintenance: Provide and direct nursing care of the client that incorporates the knowledge of expected growth and development principles, prevention and/or early detection of health problems, and strategies t achieve optimal health.	0000000000 °
4. Psychosocial Integrity: Provide and direct nursing care that promotes and supports the emotional, mental and social well being of the client experiencing stressful events, as well as clients with acute or chronic mental illness.	0000000000
5. Basic Care and Comfort: Provide comfort and assistance in the performance of activities of daily living.	0000000000
 Pharmacological and Parenteral Therapies: Provide care related to the administration of medications and parenteral therapies. 	0000000000
 Reduction of Risk Potential: Reduce the likelihood that clients will develop complications or health problems related to existing conditions, treatments or procedures. 	0000000000
 Physiological Adaptation: Manage and provide care for clients with acute, chronic or life threatening physical health conditions. 	0000000000

SECTION 5: DEMOGRAPHIC INFORMATION

In this section you are asked to provide background information that will be summarized to describe the group that completed this survey. No individual responses will be reported.

1a. Did you work as an unlicensed assistive personnel prior to becoming an RN?



ECTION 5: DEMOGRAPHIC INFORMATION	
1b. If yes, for how many years and months? Please enter positive, whole nun (e.g., 10).	nbers
Years: Months:	
	Page 23

SECTION 5: DEMOGRAPHIC INFORMATION

2a. Did you work as an LPN/VN prior to becoming an RN?

Yes

CTION 5: DEMOGRAPHIC INFORMATION	
2b. If yes, for how many years and months? Please enter positi	ive, whole numbers
(e.g., 10). Years:	
Months:	
	Page 25

SECTION 5: DEMOGRAPHIC INFORMATION
3. What is your gender? Male Female
4. What is your age in years? Please answer with a positive, whole numbers (e.g., 35).
5. Which of the following <u>best</u> describes your racial/ethnic background? (Select only ONE)
Arican American Asian Indian Asian Other Hispanic Native American Pacific Islander White – Not of Hispanic Origin Other 6. What is your primary language? English
C English and another language Another language

🔵 RN - Diploma	in U.S.						
RN - Associate	degree in U.S.						
RN - Baccalau	reate degree in	U.S.					
RN - Generic r	naster's degree	in U.S.					
RN - Generic o	loctorate in U.S	. (e.g., ND)					
Any nursing p	rogram NOT loc	ated in the U.S.					
In progress to	complete gener	ic master's					
Other program	(please specify	1)					
		,					
8. How many	months h	nas it been	since you	completed	course re	quirements	from the

SECTIONS 6: COMMENTS

If we need additional information in order to clarify the results of this study, we may call and/or e-mail some participants. If you would be willing to answer a few additional questions by phone or e-mail, please provide a number where you can be reached during the day or early evening.

Name:	
Daytime or Early Evening	
Phone Number with Area	
Code:	
E-mail address:	

You may write any comments or suggestions that you have in the space below.

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Thank you!

Thank you for your participation in this important study.

To finalize your survey, please click the Submit Survey button below.

APPENDIX D: ACTIVITIES RANK ORDERED BY AVERAGE SETTING-SPECIFIC FREQUENCY

Activity	Activity	Average Frequency (Setting-Specific)			
Number		Ν	Avg	Std. Err	
36	Implement emergency response plans (e.g., internal/external disaster, bomb threat, community planning)	672	0.67	0.05	
130	Implement and monitor phototherapy	261	0.67	0.09	
124	Perform hemodialysis or continuous renal replacement therapy	293	0.68	0.09	
123	Perform and manage care of client receiving peritoneal dialysis	453	0.70	0.07	
32	Acknowledge and document practice errors (e.g., incident report for medication error)	820	0.73	0.05	
71	Perform post-mortem care	659	0.77	0.06	
117	Perform emergency care procedures (e.g., cardio-pulmonary resuscitation, respiratory support, automated external defibrillator)	682	0.79	0.06	
10	Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)	714	0.81	0.05	
120	Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	496	0.93	0.07	
17	Report client conditions as required by law (e.g., abuse/neglect and communicable disease)	773	1.00	0.06	
41	Plan and/or participate in community health education	595	1.03	0.07	
72	Perform irrigations (e.g., of bladder, ear, eye)	715	1.04	0.06	
20	Recognize ethical dilemmas and take appropriate action	857	1.12	0.05	
93	Administer blood products and evaluate client response	660	1.24	0.07	
137	Manage the care of a client receiving hemodialysis	578	1.26	0.07	
97	Administer parenteral nutrition and evaluate client response (i.e., TPN)	626	1.30	0.07	
79	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)	603	1.31	0.07	
40	Provide prenatal care and education	271	1.33	0.12	
46	Provide post-partum care and education	218	1.35	0.13	
132	Monitor and maintain arterial lines	465	1.38	0.09	
18	Manage conflict among clients and health care staff	834	1.41	0.06	
61	Provide end of life care and education to clients	698	1.41	0.07	
112	Insert, maintain or remove a gastric tube	631	1.43	0.07	
121	Provide ostomy care and education (e.g., tracheal, enteral)	682	1.46	0.07	
76	Apply, maintain or remove orthopedic devices (e.g., traction, splints, braces, casts)	648	1.47	0.07	
106	Provide preoperative care	604	1.50	0.07	
131	Manage the care of a client with a pacing device (e.g., pacemaker, vagus nerve stimulator)	711	1.59	0.07	
118	Monitor and care for clients on a ventilator	418	1.63	0.10	
45	Provide care and education to a client in labor or antepartum client	201	1.65	0.15	
125	Perform suctioning (e.g., oral, nasopharyngeal, endotracheal, tracheal)	716	1.67	0.08	
107	Manage client during and/or following a procedure with moderate sedation	641	1.68	0.08	
9	Integrate advance directives into client plan of care	800	1.75	0.07	
68	Provide care for a client experiencing visual, auditory or cognitive distortions (e.g., hallucinations)	798	1.79	0.07	

		Av	erage Freque	ency		
Activity			(Setting-Specific)			
Number	Activity	Ν	Avg	Std. Err		
50	Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	376	1.81	0.11		
116	Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	719	1.87	0.07		
105	Provide preoperative and postoperative education	673	1.94	0.08		
70	Provide client nutrition through continuous or intermittent tube feedings	760	1.96	0.07		
56	Assess client for abuse or neglect and intervene as appropriate	845	2.01	0.07		
129	Maintain optimal temperature of client (e.g., cooling and/or warming blanket)	726	2.01	0.07		
122	Provide postoperative care	663	2.04	0.08		
5	Participate in performance improvement/quality improvement process	851	2.04	0.06		
113	Insert, maintain or remove a urinary catheter	808	2.15	0.07		
37	Follow requirements for use of restraints and/or safety devices (e.g., least restrictive restraints, timed client monitoring)	772	2.15	0.07		
49	Provide care and education for the newborn less than 1 month old through the infant or toddler client through 2 years	256	2.17	0.13		
54	Assess and teach clients about health risks based on family, population, and/or community characteristics	817	2.19	0.07		
57	Assess client for drug/alcohol dependencies, withdrawal, or toxicities and intervene as appropriate	815	2.19	0.07		
62	Assess the potential for violence and use safety precautions (e.g., suicide, homicide, self-destructive behavior)	871	2.23	0.07		
108	Obtain blood specimens peripherally or through central line	711	2.26	0.07		
64	Assess client in coping with life changes and provide support (e.g., palliative, amputation, new diagnosis)	852	2.29	0.06		
134	Manage the care of a client with alteration in hemodynamics, tissue perfusion and hemostasis (e.g., cerebral, cardiac, peripheral)	720	2.29	0.07		
126	Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	711	2.29	0.07		
43	Provide information for prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	815	2.31	0.07		
30	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	844	2.31	0.07		
111	Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)	825	2.33	0.07		
119	Perform wound care or dressing change	839	2.34	0.06		
53	Assess client ability to manage care in home environment and plan care accordingly (e.g., equipment, community resources)	814	2.36	0.07		
79	Participate in medication reconciliation process	786	2.41	0.07		
58	Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	821	2.45	0.07		
60	Incorporate client cultural practice and beliefs when planning and providing care	876	2.48	0.07		
44	Provide information about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	906	2.48	0.06		
42	Perform targeted screening assessments (e.g., vision, nutrition)	752	2.51	0.07		
128	Manage the care of a client with impaired ventilation/oxygenation	773	2.55	0.07		
94	Access venous access devices, including tunneled, implanted and central lines	723	2.56	0.08		
38	Educate client and staff regarding infection control measures	905	2.64	0.06		
133	Manage the care of the client with a fluid and electrolyte imbalance	794	2.65	0.07		

Activities Rank Ordered by Average Setting-Specific Frequency*					
Activity			ency fic)		
Number	Activity	Ν	Avg	Std. Err	
66	Incorporate behavioral management techniques when caring for a client (e.g., positive reinforcement, setting limits, de-escalation techniques)	868	2.67	0.06	
63	Assess family dynamics to determine plan of care (e.g., structure, bonding, communication, boundaries, coping mechanisms)	861	2.68	0.06	
13	Recognize the need for referrals and obtain necessary orders	925	2.69	0.06	
114	Insert, maintain or remove a peripheral intravenous line	754	2.82	0.07	
12	Provide education to clients and staff about client rights and responsibilities	907	2.94	0.06	
11	Verify that the client received appropriate procedure education and consents to care and procedures	925	2.97	0.06	
35	Educate client on safety issues (e.g., home, school, transportation)	922	2.98	0.06	
102	Monitor the results of diagnostic testing and intervene as needed	831	3.02	0.06	
55	Assess psychosocial, spiritual and occupational factors affecting care, and plan interventions	897	3.07	0.06	
80	Manage the client's nutritional intake (e.g., adjust diet, monitor height and weight)	827	3.13	0.06	
1	Perform procedures necessary to safely admit, transfer or discharge a client	918	3.14	0.06	
138	Recognize signs and symptoms of complications and intervene appropriately when providing client care	871	3.14	0.06	
87	Perform calculations needed for medication administration	852	3.15	0.06	
81	Assess client need for sleep/rest and intervene as needed	823	3.22	0.06	
77	Apply and maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	785	3.25	0.07	
92	Titrate dosage of medication based on assessment and ordered parameters (e.g., giving insulin according to blood glucose levels, titrating medication to maintain a specific blood pressure)	809	3.26	0.07	
110	Educate client about treatments and procedures	850	3.28	0.06	
14	Initiate, evaluate, and update plan of care (e.g., care map, clinical pathway)	907	3.30	0.06	
139	Educate client regarding an acute or chronic condition	860	3.34	0.06	
73	Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	897	3.35	0.06	
127	Manage the care of a client on telemetry	619	3.35	0.08	
109	Use precautions to prevent injury and/or complications associated with a procedure or diagnosis	838	3.36	0.06	
83	Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	813	3.36	0.06	
16	Recognize limitations of self and others and seek assistance	942	3.38	0.05	
29	Follow procedures for handling biohazardous and hazardous materials	934	3.39	0.06	
19	Utilize valid resources to enhance the care provided to a client (e.g., evidenced- based research, information technology, policies and procedures)	935	3.41	0.05	
136	Identify pathophysiology related to an acute or chronic condition (e.g., signs and symptoms)	848	3.41	0.06	
3	Assign and supervise care provided by others (e.g., LPN/VN, assistive personnel, other RNs)	875	3.45	0.06	
48	Assess client's readiness to learn, learning preferences and barriers to learning	886	3.47	0.06	
115	Recognize trends and changes in client condition and intervene as needed	881	3.47	0.06	
8	Receive and/or transcribe health care provider orders	924	3.47	0.06	

Activities	Rank Ordered by Average Setting-Specific Frequency*			
Activity		Average Frequency (Setting-Specific)		
Number	Activity	Ν	Avg	Std. Err
75	Assess and manage client with an alteration in elimination (e.g., bowel, urinary)	881	3.50	0.06
39	Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	917	3.51	0.06
69	Assess and intervene in client performance of activities of daily living	876	3.54	0.06
135	Evaluate the effectiveness of the treatment regimen for a client with an acute or chronic diagnosis	841	3.57	0.06
2	Provide and receive hand off of care (report) on assigned clients	933	3.63	0.05
88	Monitor intravenous infusion and maintain site (e.g., central, PICC, epidural and venous access devices)	795	3.71	0.06
4	Advocate for client rights and needs	949	3.71	0.05
67	Recognize non-verbal cues to physical and/or psychological stressors	944	3.71	0.05
82	Evaluate client intake and output and intervene as needed	837	3.74	0.06
104	Evaluate responses to procedures and treatments	873	3.77	0.05
78	Provide nonpharmacological comfort measures (e.g., light dimming, warm blanket)	866	3.78	0.05
89	Administer controlled substances within regulatory guidelines (e.g., witness, waste)	853	3.82	0.06
25	Provide cost effective care	929	3.86	0.05
95	Educate client about medications	874	3.89	0.05
100	Assess and respond to changes in client vital signs	876	3.90	0.05
7	Collaborate with interprofessional team members when providing client care (e.g., language interpreter, health care professionals)	950	3.96	0.05
28	Verify appropriateness and/or accuracy of a treatment order	937	3.97	0.05
52	Provide care and education for the adult client ages 65 through 85 years and over	826	3.99	0.05
103	Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)	875	4.05	0.05
47	Perform comprehensive health assessments	902	4.05	0.05
34	Facilitate appropriate and safe use of equipment	941	4.05	0.05
98	Administer pharmacological measures for pain management	858	4.06	0.05
74	Perform skin assessment and implement measures to maintain skin integrity and prevent skin breakdown (e.g., turning, repositioning, pressure-relieving support surfaces)	924	4.09	0.05
101	Perform focused assessment	868	4.19	0.05
31	Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	944	4.24	0.04
91	Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)	885	4.26	0.04
51	Provide care and education for the adult client ages 18 through 64 years	881	4.28	0.05
65	Use therapeutic communication techniques to provide client support	955	4.33	0.04
85	Evaluate appropriateness and accuracy of medication order for client	879	4.39	0.04
59	Provide a therapeutic environment	943	4.42	0.04
21	Use approved abbreviations and standard terminology when documenting care	926	4.44	0.04
27	Protect client from injury (e.g., falls, electrical hazards)	934	4.45	0.04
22	Organize workload to manage time effectively	950	4.50	0.03
84	Assess client need for pain management	873	4.53	0.04

Activities Rank Ordered by Average Setting-Specific Frequency*					
Activity		Average Frequency (Setting-Specific)			
Number	Activity	Ν	Avg	Std. Err	
96	Evaluate client response to medication (e.g., therapeutic effects, side effects, adverse reactions)	872	4.53	0.03	
5	Prioritize the delivery of client care	949	4.55	0.03	
86	Prepare and administer medications, using rights of medication administration	878	4.72	0.03	
15	Maintain client confidentiality and privacy	930	4.72	0.03	
90	Handle and maintain medication in a safe and controlled environment	877	4.73	0.03	
23	Practice in a manner consistent with a code of ethics for registered nurses	956	4.74	0.03	
33	Ensure proper identification of client when providing care	937	4.82	0.02	
24	Provide care within the legal scope of practice	932	4.82	0.02	
26	Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions)	955	4.94	0.01	

*Activities are rank ordered from least to most frequent

APPENDIX E: ACTIVITIES RANK ORDERED BY AVERAGE TOTAL GROUP FREQUENCY

Activities Rank Ordered by Average Total Group Frequency*				
Activity		Av	erage Freque (Total Group	
Number	Activity	Ν	Avg	Std. Err.
130	Implement and monitor phototherapy	891	0.20	0.03
124	Perform hemodialysis or continuous renal replacement therapy	894	0.22	0.03
46	Provide post-partum care and education	948	0.31	0.04
45	Provide care and education to a client in labor or antepartum client	934	0.35	0.04
123	Perform and manage care of client receiving peritoneal dialysis	891	0.35	0.04
40	Provide prenatal care and education	949	0.38	0.04
36	Implement emergency response plans (e.g., internal/external disaster, bomb threat, community planning)	933	0.48	0.04
120	Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	890	0.52	0.04
71	Perform post-mortem care	962	0.53	0.04
49	Provide care and education for the newborn less than 1 month old through the infant or toddler client through 2 years	960	0.58	0.05
117	Perform emergency care procedures (e.g., cardio-pulmonary resuscitation, respiratory support, automated external defibrillator)	892	0.60	0.05
10	Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)	957	0.60	0.04
32	Acknowledge and document practice errors (e.g., incident report for medication error)	954	0.63	0.04
41	Plan and/or participate in community health education	963	0.63	0.04
50	Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	952	0.71	0.05
132	Monitor and maintain arterial lines	883	0.73	0.05
118	Monitor and care for clients on a ventilator	892	0.77	0.05
17	Report client conditions as required by law (e.g., abuse/neglect and communicable disease)	964	0.80	0.05
72	Perform irrigations (e.g., of bladder, ear, eye)	926	0.80	0.05
137	Manage the care of a client receiving hemodialysis	897	0.81	0.05
79	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)	895	0.88	0.05
97	Administer parenteral nutrition and evaluate client response (i.e., TPN)	892	0.91	0.05
93	Administer blood products and evaluate client response	889	0.92	0.05
20	Recognize ethical dilemmas and take appropriate action	952	1.01	0.05
112	Insert, maintain or remove a gastric tube	888	1.01	0.06
106	Provide preoperative care	889	1.02	0.06
61	Provide end of life care and education to clients	954	1.03	0.05
76	Apply, maintain or remove orthopedic devices (e.g., traction, splints, braces, casts)	888	1.08	0.06
121	Provide ostomy care and education (e.g., tracheal, enteral)	887	1.12	0.06
107	Manage client during and/or following a procedure with moderate sedation	888	1.21	0.06
131	Manage the care of a client with a pacing device (e.g., pacemaker, vagus nerve stimulator)	896	1.26	0.06
18	Manage conflict among clients and health care staff	928	1.26	0.05
125	Perform suctioning (e.g., oral, nasopharyngeal, endotracheal, tracheal)	895	1.33	0.07

Activities Rank Ordered by Average Total Group Frequency*				
Activity		Average Frequency (Total Group)		
Number	Activity	Ν	Avg	Std. Err.
105	Provide preoperative and postoperative education	884	1.48	0.06
9	Integrate advance directives into client plan of care	936	1.50	0.06
68	Provide care for a client experiencing visual, auditory or cognitive distortions (e.g., hallucinations)	954	1.50	0.06
116	Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	893	1.50	0.06
122	Provide postoperative care	892	1.51	0.07
70	Provide client nutrition through continuous or intermittent tube feedings	949	1.57	0.06
129	Maintain optimal temperature of client (e.g., cooling and/or warming blanket)	890	1.64	0.07
37	Follow requirements for use of restraints and/or safety devices (e.g., least restrictive restraints, timed client monitoring)	957	1.74	0.07
56	Assess client for abuse or neglect and intervene as appropriate	943	1.80	0.06
108	Obtain blood specimens peripherally or through central line	886	1.82	0.07
126	Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	889	1.83	0.07
134	Manage the care of a client with alteration in hemodynamics, tissue perfusion and hemostasis (e.g., cerebral, cardiac, peripheral)	895	1.84	0.07
6	Participate in performance improvement/quality improvement process	938	1.85	0.06
57	Assess client for drug/alcohol dependencies, withdrawal, or toxicities and intervene as appropriate	941	1.90	0.06
54	Assess and teach clients about health risks based on family, population, and/or community characteristics	932	1.92	0.06
113	Insert, maintain or remove a urinary catheter	893	1.94	0.06
43	Provide information for prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	957	1.97	0.06
53	Assess client ability to manage care in home environment and plan care accordingly (e.g., equipment, community resources)	962	1.99	0.06
42	Perform targeted screening assessments (e.g., vision, nutrition)	931	2.03	0.07
62	Assess the potential for violence and use safety precautions (e.g., suicide, homicide, self-destructive behavior)	955	2.04	0.07
64	Assess client in coping with life changes and provide support (e.g., palliative, amputation, new diagnosis)	953	2.04	0.06
30	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	934	2.09	0.07
94	Access venous access devices, including tunneled, implanted and central lines	887	2.09	0.07
58	Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	952	2.11	0.06
99	Participate in medication reconciliation process	886	2.14	0.07
111	Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)	890	2.16	0.07
119	Perform wound care or dressing change	895	2.19	0.06
128	Manage the care of a client with impaired ventilation/oxygenation	892	2.21	0.07
127	Manage the care of a client on telemetry	895	2.31	0.08
60	Incorporate client cultural practice and beliefs when planning and providing care	926	2.35	0.07
133	Manage the care of the client with a fluid and electrolyte imbalance	893	2.35	0.07
44	Provide information about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	955	2.36	0.06
114	Insert, maintain or remove a peripheral intravenous line	886	2.40	0.07

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Activities	Rank Ordered by Average Total Group Frequency*				
A		Average Frequency (Total Group)			
Activity Number	Activity	N	Avg	Std. Err.	
63	Assess family dynamics to determine plan of care (e.g., structure, bonding, communication, boundaries, coping mechanisms)	938	2.46	0.06	
66	Incorporate behavioral management techniques when caring for a client (e.g., positive reinforcement, setting limits, de-escalation techniques)	932	2.49	0.06	
38	Educate client and staff regarding infection control measures	951	2.52	0.06	
13	Recognize the need for referrals and obtain necessary orders	963	2.58	0.06	
102	Monitor the results of diagnostic testing and intervene as needed	886	2.83	0.06	
11	Verify that the client received appropriate procedure education and consents to care and procedures	964	2.85	0.06	
12	Provide education to clients and staff about client rights and responsibilities	936	2.85	0.06	
35	Educate client on safety issues (e.g., home, school, transportation)	960	2.86	0.06	
77	Apply and maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	893	2.86	0.07	
55	Assess psychosocial, spiritual and occupational factors affecting care, and plan interventions	955	2.88	0.06	
80	Manage the client's nutritional intake (e.g., adjust diet, monitor height and weight)	885	2.93	0.07	
92	Titrate dosage of medication based on assessment and ordered parameters (e.g., giving insulin according to blood glucose levels, titrating medication to maintain a specific blood pressure)	887	2.98	0.07	
1	Perform procedures necessary to safely admit, transfer or discharge a client	963	2.99	0.06	
81	Assess client need for sleep/rest and intervene as needed	887	2.99	0.06	
87	Perform calculations needed for medication administration	883	3.04	0.06	
83	Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	895	3.05	0.07	
138	Recognize signs and symptoms of complications and intervene appropriately when providing client care	889	3.08	0.06	
110	Educate client about treatments and procedures	895	3.11	0.06	
73	Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	958	3.13	0.06	
14	Initiate, evaluate, and update plan of care (e.g., care map, clinical pathway)	954	3.13	0.06	
109	Use precautions to prevent injury and/or complications associated with a procedure or diagnosis	892	3.16	0.07	
3	Assign and supervise care provided by others (e.g., LPN/VN, assistive personnel, other RNs)	950	3.18	0.06	
139	Educate client regarding an acute or chronic condition	893	3.22	0.06	
136	Identify pathophysiology related to an acute or chronic condition (e.g., signs and symptoms)	893	3.24	0.06	
29	Follow procedures for handling biohazardous and hazardous materials	960	3.30	0.06	
75	Assess and manage client with an alteration in elimination (e.g., bowel, urinary)	934	3.30	0.06	
48	Assess client's readiness to learn, learning preferences and barriers to learning	929	3.31	0.06	
69	Assess and intervene in client performance of activities of daily living	937	3.31	0.06	
19	Utilize valid resources to enhance the care provided to a client (e.g., evidenced- based research, information technology, policies and procedures)	960	3.32	0.06	
88	Monitor intravenous infusion and maintain site (e.g., central, PICC, epidural and venous access devices)	884	3.33	0.07	
16	Recognize limitations of self and others and seek assistance	951	3.35	0.05	

Activities Rank Ordered by Average Total Group Frequency*					
		Average Frequency (Total Group)			
Activity Number	Activity	N	Avg	Std. Err.	
135	Evaluate the effectiveness of the treatment regimen for a client with an acute or chronic diagnosis	891	3.37	0.06	
8	Receive and/or transcribe health care provider orders	947	3.39	0.06	
39	Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	941	3.42	0.06	
115	Recognize trends and changes in client condition and intervene as needed	891	3.43	0.06	
52	Provide care and education for the adult client ages 65 through 85 years and over	950	3.47	0.06	
82	Evaluate client intake and output and intervene as needed	886	3.53	0.06	
2	Provide and receive hand off of care (report) on assigned clients	958	3.53	0.05	
89	Administer controlled substances within regulatory guidelines (e.g., witness, waste)	895	3.64	0.06	
67	Recognize non-verbal cues to physical and/or psychological stressors	955	3.67	0.05	
104	Evaluate responses to procedures and treatments	893	3.69	0.06	
4	Advocate for client rights and needs	953	3.70	0.05	
78	Provide nonpharmacological comfort measures (e.g., light dimming, warm blanket)	880	3.72	0.05	
25	Provide cost effective care	953	3.77	0.05	
95	Educate client about medications	892	3.81	0.06	
47	Perform comprehensive health assessments	955	3.82	0.06	
100	Assess and respond to changes in client vital signs	883	3.87	0.05	
7	Collaborate with interprofessional team members when providing client care (e.g., language interpreter, health care professionals)	962	3.91	0.05	
98	Administer pharmacological measures for pain management	885	3.93	0.06	
28	Verify appropriateness and/or accuracy of a treatment order	945	3.94	0.05	
74	Perform skin assessment and implement measures to maintain skin integrity and prevent skin breakdown (e.g., turning, repositioning, pressure-relieving support surfaces)	955	3.95	0.05	
103	Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)	894	3.96	0.05	
34	Facilitate appropriate and safe use of equipment	949	4.02	0.05	
51	Provide care and education for the adult client ages 18 through 64 years	934	4.04	0.05	
101	Perform focused assessment	890	4.09	0.05	
31	Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	956	4.19	0.04	
91	Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)	893	4.22	0.05	
65	Use therapeutic communication techniques to provide client support	961	4.30	0.04	
85	Evaluate appropriateness and accuracy of medication order for client	888	4.35	0.04	
59	Provide a therapeutic environment	957	4.36	0.04	
<u>2</u> 1	Use approved abbreviations and standard terminology when documenting care	938	4.38	0.04	
<u>2</u> 7	Protect client from injury (e.g., falls, electrical hazards)	940	4.43	0.04	
84	Assess client need for pain management	880	4.49	0.04	
76	Evaluate client response to medication (e.g., therapeutic effects, side effects, adverse reactions)	878	4.50	0.04	
22	Organize workload to manage time effectively	950	4.50	0.03	
5	Prioritize the delivery of client care	959	4.50	0.04	

Activities Rank Ordered by Average Total Group Frequency*				
Activity		Average Frequency (Total Group)		ncy
Number	Activity	N	Avg	Std. Err.
86	Prepare and administer medications, using rights of medication administration	888	4.67	0.03
90	Handle and maintain medication in a safe and controlled environment	881	4.71	0.03
15	Maintain client confidentiality and privacy	931	4.72	0.03
23	Practice in a manner consistent with a code of ethics for registered nurses	957	4.73	0.03
33	Ensure proper identification of client when providing care	940	4.80	0.02
24	Provide care within the legal scope of practice	933	4.82	0.02
26	Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions)	955	4.94	0.01

*Activities are rank ordered from least to most frequent

APPENDIX F: ACTIVITIES RANK ORDERED BY AVERAGE SETTING-SPECIFIC IMPORTANCE

A at is -: to .		Setting	g-Specific Imp	oortance
Activity Number	Activity	N	Avg	Std. Err.
79	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)	572	3.52	0.04
41	Plan and/or participate in community health education	568	3.55	0.04
71	Perform post-mortem care	626	3.73	0.04
72	Perform irrigations (e.g., of bladder, ear, eye)	688	3.77	0.04
76	Apply, maintain or remove orthopedic devices (e.g., traction, splints, braces, casts)	620	3.80	0.04
54	Assess and teach clients about health risks based on family, population, and/or community characteristics	794	3.81	0.03
25	Provide cost effective care	918	3.82	0.03
130	Implement and monitor phototherapy	241	3.83	0.07
18	Manage conflict among clients and health care staff	816	3.86	0.03
81	Assess client need for sleep/rest and intervene as needed	802	3.87	0.03
45	Provide care and education to a client in labor or antepartum client	194	3.88	0.08
6	Participate in performance improvement/quality improvement process	833	3.90	0.03
78	Provide nonpharmacological comfort measures (e.g., light dimming, warm blanket)	848	3.90	0.03
63	Assess family dynamics to determine plan of care (e.g., structure, bonding, communication, boundaries, coping mechanisms)	842	3.93	0.03
42	Perform targeted screening assessments (e.g., vision, nutrition)	734	3.93	0.03
60	Incorporate client cultural practice and beliefs when planning and providing care	851	3.94	0.03
44	Provide information about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	879	3.94	0.03
55	Assess psychosocial, spiritual and occupational factors affecting care, and plan interventions	883	3.98	0.03
14	Initiate, evaluate, and update plan of care (e.g., care map, clinical pathway)	883	3.98	0.03
46	Provide post-partum care and education	205	3.99	0.07
40	Provide prenatal care and education	257	3.99	0.07
66	Incorporate behavioral management techniques when caring for a client (e.g., positive reinforcement, setting limits, de-escalation techniques)	847	4.00	0.03
50	Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	360	4.01	0.05
80	Manage the client's nutritional intake (e.g., adjust diet, monitor height and weight)	808	4.02	0.03
123	Perform and manage care of client receiving peritoneal dialysis	433	4.02	0.05
43	Provide information for prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	793	4.02	0.03
111	Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)	802	4.02	0.03
112	Insert, maintain or remove a gastric tube	604	4.03	0.03
9	Integrate advance directives into client plan of care	782	4.04	0.03
69	Assess and intervene in client performance of activities of daily living	857	4.04	0.03
68	Provide care for a client experiencing visual, auditory or cognitive distortions (e.g., hallucinations)	769	4.04	0.03
129	Maintain optimal temperature of client (e.g., cooling and/or warming blanket)	705	4.05	0.03
53	Assess client ability to manage care in home environment and plan care accordingly (e.g., equipment, community resources)	792	4.08	0.03

	Rank Ordered by Average Setting-Specific Importance*				
Activity		Setting-Specific Importance			
Number	Activity	N	Avg	Std. Err.	
126	Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	695	4.09	0.03	
3	Assign and supervise care provided by others (e.g., LPN/VN, assistive personnel, other RNs)	858	4.11	0.03	
106	Provide preoperative care	579	4.11	0.03	
108	Obtain blood specimens peripherally or through central line	688	4.11	0.03	
121	Provide ostomy care and education (e.g., tracheal, enteral)	656	4.11	0.03	
58	Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	799	4.12	0.03	
48	Assess client's readiness to learn, learning preferences and barriers to learning	865	4.12	0.03	
21	Use approved abbreviations and standard terminology when documenting care	913	4.12	0.03	
113	Insert, maintain or remove a urinary catheter	786	4.12	0.03	
20	Recognize ethical dilemmas and take appropriate action	824	4.13	0.03	
57	Assess client for drug/alcohol dependencies, withdrawal, or toxicities and intervene as appropriate	790	4.13	0.03	
124	Perform hemodialysis or continuous renal replacement therapy	276	4.13	0.06	
35	Educate client on safety issues (e.g., home, school, transportation)	901	4.13	0.03	
13	Recognize the need for referrals and obtain necessary orders	905	4.14	0.03	
119	Perform wound care or dressing change	814	4.14	0.03	
120	Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	472	4.17	0.04	
83	Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	795	4.19	0.03	
12	Provide education to clients and staff about client rights and responsibilities	887	4.20	0.03	
73	Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	881	4.21	0.02	
36	Implement emergency response plans (e.g., internal/external disaster, bomb threat, community planning)	649	4.21	0.03	
49	Provide care and education for the newborn less than 1 month old through the infant or toddler client through 2 years	239	4.21	0.06	
75	Assess and manage client with an alteration in elimination (e.g., bowel, urinary)	862	4.21	0.03	
137	Manage the care of a client receiving hemodialysis	552	4.21	0.04	
97	Administer parenteral nutrition and evaluate client response (i.e., TPN)	600	4.22	0.03	
61	Provide end of life care and education to clients	674	4.23	0.03	
105	Provide preoperative and postoperative education	652	4.24	0.03	
116	Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	688	4.24	0.03	
64	Assess client in coping with life changes and provide support (e.g., palliative, amputation, new diagnosis)	822	4.25	0.02	
110	Educate client about treatments and procedures	826	4.25	0.02	
65	Use therapeutic communication techniques to provide client support	934	4.25	0.02	
114	Insert, maintain or remove a peripheral intravenous line	729	4.25	0.03	
70	Provide client nutrition through continuous or intermittent tube feedings	740	4.25	0.03	
19	Utilize valid resources to enhance the care provided to a client (e.g., evidenced- based research, information technology, policies and procedures)	919	4.26	0.03	
131	Manage the care of a client with a pacing device (e.g., pacemaker, vagus nerve stimulator)	691	4.26	0.03	
59	Provide a therapeutic environment	920	4.27	0.02	

Activity		Setting	Setting-Specific Importance		
Number	Activity	N	Avg	Std. Err.	
79	Participate in medication reconciliation process	768	4.28	0.03	
67	Recognize non-verbal cues to physical and/or psychological stressors	930	4.29	0.02	
52	Provide care and education for the adult client ages 65 through 85 years and over	805	4.29	0.02	
122	Provide postoperative care	638	4.30	0.03	
77	Apply and maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	771	4.30	0.03	
51	Provide care and education for the adult client ages 18 through 64 years	860	4.31	0.02	
139	Educate client regarding an acute or chronic condition	841	4.31	0.02	
132	Monitor and maintain arterial lines	438	4.34	0.04	
30	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	822	4.35	0.03	
37	Follow requirements for use of restraints and/or safety devices (e.g., least restrictive restraints, timed client monitoring)	755	4.35	0.03	
1	Perform procedures necessary to safely admit, transfer or discharge a client	903	4.36	0.02	
125	Perform suctioning (e.g., oral, nasopharyngeal, endotracheal, tracheal)	687	4.36	0.03	
82	Evaluate client intake and output and intervene as needed	816	4.36	0.03	
38	Educate client and staff regarding infection control measures	881	4.36	0.03	
56	Assess client for abuse or neglect and intervene as appropriate	822	4.38	0.03	
135	Evaluate the effectiveness of the treatment regimen for a client with an acute or chronic diagnosis	823	4.39	0.02	
109	Use precautions to prevent injury and/or complications associated with a procedure or diagnosis	814	4.41	0.03	
62	Assess the potential for violence and use safety precautions (e.g., suicide, homicide, self-destructive behavior)	848	4.42	0.03	
102	Monitor the results of diagnostic testing and intervene as needed	814	4.42	0.03	
17	Report client conditions as required by law (e.g., abuse/neglect and communicable disease)	746	4.43	0.03	
104	Evaluate responses to procedures and treatments	850	4.44	0.02	
95	Educate client about medications	856	4.44	0.02	
74	Access venous access devices, including tunneled, implanted and central lines	697	4.44	0.03	
78	Administer pharmacological measures for pain management	839	4.44	0.02	
127	Manage the care of a client on telemetry	604	4.45	0.03	
31	Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	933	4.47	0.02	
107	Manage client during and/or following a procedure with moderate sedation	621	4.47	0.03	
136	Identify pathophysiology related to an acute or chronic condition (e.g., signs and symptoms)	820	4.47	0.02	
11	Verify that the client received appropriate procedure education and consents to care and procedures	906	4.47	0.02	
34	Facilitate appropriate and safe use of equipment	922	4.47	0.02	
32	Acknowledge and document practice errors (e.g., incident report for medication error)	788	4.48	0.02	
16	Recognize limitations of self and others and seek assistance	924	4.48	0.02	
7	Collaborate with interprofessional team members when providing client care (e.g., language interpreter, health care professionals)	930	4.49	0.02	

	Rank Ordered by Average Setting-Specific Importance*			
Activity		Setting-Specific Importance		
Number	Activity	N	Avg	Std. Err.
10	Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)	688	4.50	0.03
133	Manage the care of the client with a fluid and electrolyte imbalance	772	4.50	0.02
84	Assess client need for pain management	855	4.51	0.02
22	Organize workload to manage time effectively	933	4.51	0.02
134	Manage the care of a client with alteration in hemodynamics, tissue perfusion and hemostasis (e.g., cerebral, cardiac, peripheral)	693	4.51	0.03
29	Follow procedures for handling biohazardous and hazardous materials	918	4.52	0.02
8	Receive and/or transcribe health care provider orders	894	4.55	0.02
118	Monitor and care for clients on a ventilator	398	4.56	0.04
103	Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)	860	4.57	0.02
47	Perform comprehensive health assessments	883	4.59	0.02
101	Perform focused assessment	854	4.59	0.02
4	Advocate for client rights and needs	936	4.59	0.02
128	Manage the care of a client with impaired ventilation/oxygenation	748	4.62	0.02
2	Provide and receive hand off of care (report) on assigned clients	915	4.62	0.02
74	Perform skin assessment and implement measures to maintain skin integrity and prevent skin breakdown (e.g., turning, repositioning, pressure-relieving support surfaces)	902	4.62	0.02
89	Administer controlled substances within regulatory guidelines (e.g., witness, waste)	838	4.65	0.02
5	Prioritize the delivery of client care	930	4.66	0.02
96	Evaluate client response to medication (e.g., therapeutic effects, side effects, adverse reactions)	855	4.67	0.02
28	Verify appropriateness and/or accuracy of a treatment order	925	4.68	0.02
39	Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	901	4.68	0.02
88	Monitor intravenous infusion and maintain site (e.g., central, PICC, epidural and venous access devices)	779	4.69	0.02
115	Recognize trends and changes in client condition and intervene as needed	863	4.69	0.02
23	Practice in a manner consistent with a code of ethics for registered nurses	944	4.69	0.02
15	Maintain client confidentiality and privacy	915	4.69	0.02
87	Perform calculations needed for medication administration	837	4.77	0.02
92	Titrate dosage of medication based on assessment and ordered parameters (e.g., giving insulin according to blood glucose levels, titrating medication to maintain a specific blood pressure)	789	4.77	0.02
100	Assess and respond to changes in client vital signs	860	4.79	0.02
138	Recognize signs and symptoms of complications and intervene appropriately when providing client care	847	4.79	0.02
90	Handle and maintain medication in a safe and controlled environment	859	4.79	0.02
93	Administer blood products and evaluate client response	630	4.80	0.02
91	Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)	872	4.80	0.02
85	Evaluate appropriateness and accuracy of medication order for client	867	4.81	0.02
24	Provide care within the legal scope of practice	913	4.83	0.01
27	Protect client from injury (e.g., falls, electrical hazards)	917	4.84	0.01

Activities Rank Ordered by Average Setting-Specific Importance*					
Activity		Setting-Specific Importance			
Number	Activity	Ν	Avg	Std. Err.	
117	Perform emergency care procedures (e.g., cardio-pulmonary resuscitation, respiratory support, automated external defibrillator)	646	4.85	0.02	
33	Ensure proper identification of client when providing care	923	4.88	0.01	
86	Prepare and administer medications, using rights of medication administration	858	4.89	0.01	
26	Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions)	933	4.91	0.01	
*Activities are rank ordered from least to most important					

APPENDIX G: ACTIVITIES RANK ORDERED BY AVERAGE TOTAL GROUP IMPORTANCE

Activities	Activities Rank Ordered by Average Total Group Importance*					
Activity			Total Group Importance			
Number	Activity	N	Avg	Std. Err.		
79	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)	810	3.31	0.04		
41	Plan and/or participate in community health education	901	3.37	0.03		
130	Implement and monitor phototherapy	767	3.42	0.05		
45	Provide care and education to a client in labor or antepartum client	810	3.56	0.05		
71	Perform post-mortem care	894	3.60	0.04		
46	Provide post-partum care and education	829	3.66	0.04		
72	Perform irrigations (e.g., of bladder, ear, eye)	867	3.66	0.04		
40	Provide prenatal care and education	840	3.66	0.05		
50	Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	857	3.66	0.04		
76	Apply, maintain or remove orthopedic devices (e.g., traction, splints, braces, casts)	819	3.67	0.04		
54	Assess and teach clients about health risks based on family, population, and/or community characteristics	890	3.76	0.03		
49	Provide care and education for the newborn less than 1 month old through the infant or toddler client through 2 years	826	3.77	0.05		
25	Provide cost effective care	938	3.81	0.03		
18	Manage conflict among clients and health care staff	895	3.82	0.03		
81	Assess client need for sleep/rest and intervene as needed	858	3.83	0.03		
123	Perform and manage care of client receiving peritoneal dialysis	808	3.83	0.04		
42	Perform targeted screening assessments (e.g., vision, nutrition)	882	3.84	0.03		
6	Participate in performance improvement/quality improvement process	903	3.84	0.03		
112	Insert, maintain or remove a gastric tube	814	3.88	0.04		
63	Assess family dynamics to determine plan of care (e.g., structure, bonding, communication, boundaries, coping mechanisms)	905	3.88	0.03		
78	Provide nonpharmacological comfort measures (e.g., light dimming, warm blanket)	860	3.88	0.03		
44	Provide information about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	921	3.91	0.03		
60	Incorporate client cultural practice and beliefs when planning and providing care	891	3.92	0.03		
106	Provide preoperative care	816	3.94	0.04		
121	Provide ostomy care and education (e.g., tracheal, enteral)	822	3.94	0.03		
124	Perform hemodialysis or continuous renal replacement therapy	778	3.94	0.05		
14	Initiate, evaluate, and update plan of care (e.g., care map, clinical pathway)	925	3.95	0.03		
68	Provide care for a client experiencing visual, auditory or cognitive distortions (e.g., hallucinations)	915	3.96	0.03		
43	Provide information for prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	920	3.96	0.03		
55	Assess psychosocial, spiritual and occupational factors affecting care, and plan interventions	932	3.96	0.03		
80	Manage the client's nutritional intake (e.g., adjust diet, monitor height and weight)	860	3.96	0.03		
9	Integrate advance directives into client plan of care	893	3.98	0.03		
129	Maintain optimal temperature of client (e.g., cooling and/or warming blanket)	837	3.98	0.03		

Activity		Total Group Importance		
Number	Activity	N	Avg	Std. Err.
66	Incorporate behavioral management techniques when caring for a client (e.g., positive reinforcement, setting limits, de-escalation techniques)	900	3.99	0.03
120	Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	805	3.99	0.04
53	Assess client ability to manage care in home environment and plan care accordingly (e.g., equipment, community resources)	920	3.99	0.03
111	Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)	851	4.00	0.03
69	Assess and intervene in client performance of activities of daily living	906	4.00	0.03
108	Obtain blood specimens peripherally or through central line	838	4.01	0.03
126	Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	838	4.02	0.03
3	Assign and supervise care provided by others (e.g., LPN/VN, assistive personnel, other RNs)	921	4.05	0.03
97	Administer parenteral nutrition and evaluate client response (i.e., TPN)	819	4.05	0.04
113	Insert, maintain or remove a urinary catheter	856	4.06	0.03
58	Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	907	4.07	0.03
57	Assess client for drug/alcohol dependencies, withdrawal, or toxicities and intervene as appropriate	897	4.07	0.03
105	Provide preoperative and postoperative education	827	4.09	0.03
137	Manage the care of a client receiving hemodialysis	826	4.10	0.04
48	Assess client's readiness to learn, learning preferences and barriers to learning	898	4.10	0.03
35	Educate client on safety issues (e.g., home, school, transportation)	935	4.10	0.03
61	Provide end of life care and education to clients	886	4.10	0.03
21	Use approved abbreviations and standard terminology when documenting care	924	4.11	0.03
132	Monitor and maintain arterial lines	790	4.11	0.04
119	Perform wound care or dressing change	863	4.11	0.03
13	Recognize the need for referrals and obtain necessary orders	938	4.12	0.03
20	Recognize ethical dilemmas and take appropriate action	906	4.12	0.03
83	Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	867	4.13	0.03
116	Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	848	4.15	0.03
122	Provide postoperative care	834	4.15	0.04
131	Manage the care of a client with a pacing device (e.g., pacemaker, vagus nerve stimulator)	849	4.15	0.03
70	Provide client nutrition through continuous or intermittent tube feedings	900	4.16	0.03
75	Assess and manage client with an alteration in elimination (e.g., bowel, urinary)	905	4.16	0.03
73	Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	928	4.17	0.03
114	Insert, maintain or remove a peripheral intravenous line	843	4.17	0.03
36	Implement emergency response plans (e.g., internal/external disaster, bomb threat, community planning)	876	4.18	0.03
12	Provide education to clients and staff about client rights and responsibilities	912	4.18	0.03
64	Assess client in coping with life changes and provide support (e.g., palliative, amputation, new diagnosis)	903	4.19	0.03
110	Educate client about treatments and procedures	865	4.20	0.03

Activities Rank Ordered by Average Total Group Importance*					
Activity		Total Group Importance			
Number	Activity	N	Avg	Std. Err.	
52	Provide care and education for the adult client ages 65 through 85 years and over	907	4.21	0.03	
77	Apply and maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	866	4.22	0.03	
99	Participate in medication reconciliation process	844	4.22	0.03	
19	Utilize valid resources to enhance the care provided to a client (e.g., evidenced- based research, information technology, policies and procedures)	940	4.23	0.03	
127	Manage the care of a client on telemetry	834	4.24	0.04	
59	Provide a therapeutic environment	930	4.24	0.03	
65	Use therapeutic communication techniques to provide client support	939	4.25	0.02	
125	Perform suctioning (e.g., oral, nasopharyngeal, endotracheal, tracheal)	842	4.25	0.03	
37	Follow requirements for use of restraints and/or safety devices (e.g., least restrictive restraints, timed client monitoring)	911	4.25	0.03	
51	Provide care and education for the adult client ages 18 through 64 years	907	4.28	0.03	
67	Recognize non-verbal cues to physical and/or psychological stressors	939	4.28	0.02	
118	Monitor and care for clients on a ventilator	802	4.29	0.04	
139	Educate client regarding an acute or chronic condition	866	4.29	0.03	
30	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	898	4.30	0.03	
107	Manage client during and/or following a procedure with moderate sedation	828	4.30	0.03	
82	Evaluate client intake and output and intervene as needed	857	4.30	0.03	
94	Access venous access devices, including tunneled, implanted and central lines	836	4.32	0.03	
56	Assess client for abuse or neglect and intervene as appropriate	906	4.33	0.03	
1	Perform procedures necessary to safely admit, transfer or discharge a client	941	4.34	0.02	
38	Educate client and staff regarding infection control measures	921	4.35	0.03	
135	Evaluate the effectiveness of the treatment regimen for a client with an acute or chronic diagnosis	859	4.35	0.03	
62	Assess the potential for violence and use safety precautions (e.g., suicide, homicide, self-destructive behavior)	921	4.37	0.03	
102	Monitor the results of diagnostic testing and intervene as needed	857	4.37	0.03	
109	Use precautions to prevent injury and/or complications associated with a procedure or diagnosis	856	4.38	0.03	
134	Manage the care of a client with alteration in hemodynamics, tissue perfusion and hemostasis (e.g., cerebral, cardiac, peripheral)	844	4.39	0.03	
133	Manage the care of the client with a fluid and electrolyte imbalance	851	4.41	0.03	
98	Administer pharmacological measures for pain management	862	4.41	0.02	
104	Evaluate responses to procedures and treatments	867	4.42	0.02	
17	Report client conditions as required by law (e.g., abuse/neglect and communicable disease)	922	4.43	0.03	
136	Identify pathophysiology related to an acute or chronic condition (e.g., signs and symptoms)	856	4.43	0.03	
95	Educate client about medications	874	4.43	0.02	
31	Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	944	4.45	0.02	
11	Verify that the client received appropriate procedure education and consents to care and procedures	939	4.46	0.02	
34	Facilitate appropriate and safe use of equipment	929	4.47	0.02	

Activities	Rank Ordered by Average Total Group Importance*	Total	Total Group Importance		
Activity Number	Activity	N	Avg	Std. Err.	
32	Acknowledge and document practice errors (e.g., incident report for medication error)	907	4.48	0.02	
16	Recognize limitations of self and others and seek assistance	932	4.48	0.02	
10	Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)	911	4.48	0.02	
7	Collaborate with interprofessional team members when providing client care (e.g., language interpreter, health care professionals)	941	4.49	0.02	
84	Assess client need for pain management	860	4.50	0.02	
22	Organize workload to manage time effectively	933	4.51	0.02	
29	Follow procedures for handling biohazardous and hazardous materials	942	4.51	0.02	
8	Receive and/or transcribe health care provider orders	914	4.52	0.02	
47	Perform comprehensive health assessments	931	4.54	0.02	
128	Manage the care of a client with impaired ventilation/oxygenation	850	4.55	0.03	
103	Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)	875	4.56	0.02	
101	Perform focused assessment	872	4.56	0.02	
2	Provide and receive hand off of care (report) on assigned clients	935	4.58	0.02	
74	Perform skin assessment and implement measures to maintain skin integrity and prevent skin breakdown (e.g., turning, repositioning, pressure-relieving support surfaces)	928	4.58	0.02	
4	Advocate for client rights and needs	940	4.59	0.02	
88	Monitor intravenous infusion and maintain site (e.g., central, PICC, epidural and venous access devices)	854	4.61	0.03	
89	Administer controlled substances within regulatory guidelines (e.g., witness, waste)	873	4.61	0.02	
93	Administer blood products and evaluate client response	829	4.62	0.03	
5	Prioritize the delivery of client care	940	4.65	0.02	
96	Evaluate client response to medication (e.g., therapeutic effects, side effects, adverse reactions)	859	4.66	0.02	
39	Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	922	4.68	0.02	
28	Verify appropriateness and/or accuracy of a treatment order	933	4.68	0.02	
115	Recognize trends and changes in client condition and intervene as needed	871	4.69	0.02	
23	Practice in a manner consistent with a code of ethics for registered nurses	944	4.69	0.02	
15	Maintain client confidentiality and privacy	916	4.69	0.02	
92	Titrate dosage of medication based on assessment and ordered parameters (e.g., giving insulin according to blood glucose levels, titrating medication to maintain a specific blood pressure)	854	4.72	0.02	
87	Perform calculations needed for medication administration	863	4.75	0.02	
138	Recognize signs and symptoms of complications and intervene appropriately when providing client care	859	4.77	0.02	
90	Handle and maintain medication in a safe and controlled environment	862	4.78	0.02	
100	Assess and respond to changes in client vital signs	867	4.78	0.02	
117	Perform emergency care procedures (e.g., cardio-pulmonary resuscitation, respiratory support, automated external defibrillator)	821	4.79	0.02	
91	Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)	875	4.80	0.02	

Activities Rank Ordered by Average Total Group Importance*					
Activity		Total Group Importance			
Number	Activity	N	Avg	Std. Err.	
85	Evaluate appropriateness and accuracy of medication order for client	874	4.81	0.02	
27	Protect client from injury (e.g., falls, electrical hazards)	922	4.83	0.01	
24	Provide care within the legal scope of practice	913	4.83	0.01	
86	Prepare and administer medications, using rights of medication administration	866	4.88	0.01	
33	Ensure proper identification of client when providing care	926	4.88	0.01	
26	Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions)	933	4.91	0.01	
*Activities	are rank ordered from least to most important		·		

APPENDIX H: 2014 RN PRACTICE ANALYSIS SURVEY NONRESPONDER STUDY

Introduction

The National Council of State Boards of Nursing (NCSBN®) conducts practice analysis studies every three years to assess the practice environment and emerging practice changes. Although the response rate for the 2014 RN Practice Analysis had an adequate return rate of approximately 23%, many individuals did not respond to the survey. Out of the 12,000 newly licensed RNs who were invited to take the survey, only 3,699 returned the survey. NCSBN wanted to contact a sample of the invitees who chose not to participate in the survey to ascertain the reasons for not returning the survey and compare a sample of activity statements, as well as demographic information against the RN practice survey respondents.

Background of Study

NCSBN is responsible to its members, the boards of nursing in the U.S. and member board territories for the preparation of psychometrically sound and legally defensible licensure examinations. The periodic performance of practice analysis (i.e., job analysis) studies assists NCSBN in evaluating the validity of the test plan that guides content distribution of the licensure examination.

Findings from the 2014 RN Practice Analysis Nonrespondent Study will provide possible reasons why individuals do not participate in surveys and differences between survey respondents and nonrespondents to determine if the nonrespondents were systematically different in terms of demographics and ratings of the activity statements. This study was conducted to determine if the results for the practice analysis were somehow biased.

Methodology

Sample Selection

A random sample of newly selected RNs who were invited, but did not respond to the RN practice analysis survey was contacted via telephone. The sample was derived from the 6,000 invitees who were mailed the paper form of the RN practice analysis survey. 48 RNs from this sample completed the telephone interview.

Survey Instrument and Process

Nonrespondents were contacted via telephone, using telephone numbers provided by NCSBN. First, nonrespondents were asked about their reasons for not completing the survey. In order to facilitate the gathering of data from nonrespondents, NCSBN developed a list of possible reasons why invitees may not have responded to the survey based on prior research. Possible reasons included the following: "too busy;" "did not care;" "do not like/ trust surveys;" "did not receive;" or "other." Second, individuals were asked demographic information in order to provide background on nonrespondents, such as employment setting/specialty and length of time since they graduated with their nursing degree. In addition, nonrespondents were asked to rate the frequency of performance and importance of 10 activities that were listed in the RN practice analysis survey. Nonrespondents were thanked for their time and their data was recorded in a Microsoft Excel® spreadsheet

Nonresponder Results

Reasons for Not Responding

Reasons for not responding included "did not receive" (6 responses or 12.5%), "too busy" (32 responses or 66.6%) or "other" (10 response or 20.8%). None of the nonrespondents indicated "did not care" or "do not like/trust surveys" as a reason for not returning the survey.

Months Since Graduating

Nonrespondents were asked how long it has been since they graduated from the nursing program. Nonrespondents averaged 10.3 months since they graduated, while respondents averaged 7.4 months. Overall, they averaged a longer time since graduation as compared to original survey respondents because nonrespondents were contacted about six weeks after the RN practice analysis was completed.

Employment Setting/Specialty

Nonrespondents were asked to provide their setting/ specialty. The different nursing specialties/ employment settings were well represented in this sample as seen in Table 1. The largest percentage (43.8% or 21 nonrespondents) worked in medicalsurgical units. Critical care was also frequently cited by 20.8% or 10 nonrespondents. These results are similar to the RN practice analysis survey respondents, which found the largest percentage of respondents worked in Medical-Surgical (27.7%) and Critical Care (18.7%). See Table 1.

Importance Ratings

In general, the importance ratings between nonrespondents and respondents were very similar, with no activity statement importance rating differing by more than one point. See Table 2.

Frequency Ratings

Frequency ratings were provided by the nonrespondents and compared to the average response rating of the RN Practice Analysis Survey respondents. See Table 3.

Most of the frequency ratings were similar between nonrespondents and respondents, except for "Participate in medication reconciliation process" and "Maintain optimal temperature of clients (e.g., cooling and/or warming blanket)" which had a frequency rating difference of more than one point.

Summary

The nonrespondent study suggests that the main reasons individuals did not complete the study was because they were either "too busy" or "did not receive" the survey. Overall, these results provide important information on why individuals do not complete surveys. More importantly, the ratings of the activity statements were quite similar, which indicates that the results of the survey are not systematically biased. The nonrespondent study provides support for the validity of the 2014 RN Practice Analysis results.

	Nonres	oonders	Respo	nders
Job Title	Frequency	%	Frequency	%
Critical care	10	20.8	513	18.7
Medical-surgical	21	43.8	761	27.7
Pediatrics	0	0.0	99	3.6
Nursery	1	2.1	33	1.2
Labor and delivery	0	0.0	56	2.0
Postpartum unit	0	0.0	52	1.9
Psychiatry or subspecialties	1	2.1	106	3.9
Assisted living	0	0.0	38	1.4
Operating room	0	0.0	69	2.5
Nursing home	5	10.4	307	11.2
Other long term care	2	4.2	68	2.5
Rehabilitation	2	4.2	152	5.5
Sub-acute unit	0	0.0	56	2.0
Transitional care unit	0	0.0	36	1.3
Physician/APRN/Dentist office	1	2.1	30	1.1
Occupational health	0	0.0	2	0.1
Outpatient clinic	2	4.2	66	2.4
Home health	1	2.1	96	3.5

Table H1. Employment Setting/Specialty					
	Nonres	ponders	Respo	onders	
Job Title	Frequency	%	Frequency	%	
Public health	0	0.0	13	0.5	
Student/school health	0	0.0	10	0.4	
Hospice care	0	0.0	37	1.3	
Prison	0	0.0	20	0.7	
Short Stay	0	0.0	34	1.2	
Step-down	0	0.0	117	4.3	
Other	1	2.1	123	4.5	

* Number of participants for Employment Setting/Specialty does not equal total number of participants in the survey because individuals may have indicated multiple responses.

Table H2. /	Activity Statement Importance Ratings		
Activity #	Activity Statement	Nonresponder Rating	Responder Rating
6	Participate in performance improvement/quality improvement	4.42 (N=48)	3.84 (N=903)
16	Recognize limitations of self and others and seek assistance	4.56 (N=48)	4.48 (N=932)
30	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	4.73 (N=48)	4.30 (N=898)
53	Assess client ability to manage in home environment and plan care accordingly (e.g., equipment, community resources)	4.42 (N=48)	3.99 (N=920)
66	Incorporate behavioral management techniques when caring for a client (e.g., positive reinforcement, setting limits, de-escalation techniques)	4.52 (N=48)	3.99 (N=900)
79	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy acupressure, supplements)	3.73 (N=48)	3.31 (N=810)
99	Participate in medication reconciliation process	4.79 (N=48)	4.22 (N=844)
107	Manage client during and/or following a procedure with moderate sedation	4.06 (N=48)	4.30 (N=828)
118	Monitor and care for clients on a ventilator	4.29 (N=48)	4.29 (N=802)
129	Maintain optimal temperature of clients (e.g., cooling and/or warming blanket)	4.67 (N=48)	3.98 (N=837)

Table H3. /	Activity Statement Frequency Ratings		
Activity #	Activity Statement	Nonresponder Rating	Responder Rating
6	Participate in performance improvement/quality improvement	2.40 (N=48)	1.85 (N=938)
16	Recognize limitations of self and others and seek assistance	3.55 (N=48)	3.35 (N=951)
30	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	2.15 (N=48)	2.09 (N=934)
53	Assess client ability to manage in home environment and plan care accordingly (e.g., equipment, community resources)	2.77 (N=48)	1.99 (N=962)
66	Incorporate behavioral management techniques when caring for a client (e.g., positive reinforcement, setting limits, de-escalation techniques)	3.25 (N=48)	2.49 (N=932)
79	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy acupressure, supplements)	1.90 (N=48)	0.88 (N=895)
99	Participate in medication reconciliation process	3.44 (N=48)	2.14 (N=886)
107	Manage client during and/or following a procedure with moderate sedation	1.2 (N=48)	1.21 (N=888)
118	Monitor and care for clients on a ventilator	0.65 (N=48)	0.77 (N=892)
129	Maintain optimal temperature of clients (e.g., cooling and/or warming blanket)	2.79(N=48)	1.64 (N=890)

Part 2

2014 RN Practice Analysis: Linking the NCLEX-RN[®] Examination to Practice

Canadian Respondents

National Council of State Boards of Nursing, Inc. (NCSBN®)

EXECUTIVE SUMMARY

The National Council of State Boards of Nursing (NCSBN®) is responsible for the preparation of psychometrically sound and legally defensible licensure/registration examinations. The periodic performance of practice analysis (i.e., job analysis) studies assists NCSBN in evaluating the validity of the test plan that guides content distribution of the licensure/registration examination. Because the health care industry is rapidly changing, practice analysis studies are traditionally conducted on a three-year cycle. The latest Canadian registered nurse (RN) practice analysis was conducted in 2013 to validate the applicability of the 2013 NCLEX-RN test plan to the Canadian testing population (NCSBN, 2013). The results of 2013 Canadian RN practice analysis showed that the practice of Canadian entry-level RNs was very similar to the practice of entry-level RN in the U.S. The purpose of the current study is to compare the current Canadian RN practice with the 2013 Canadian RN practice. In general, the results from demographics, experiences and practice environments of the current survey participants are comparable to the ones from the 2013 Canadian RN practice survey. This survey was conducted at the same time as the U.S. RN practice analysis survey, allowing comparisons between the U.S. RN practice and the Canadian RN practice. As with the findings from the 2013 Canadian RN practice analysis, the two practices (i.e., the U.S. and the Canadian) were very similar to each other with respect to the frequency and importance ratings on 139 activity statements. The similarity in the ratings provides a confidence that the upcoming test plan can be applied to both the U.S. and the Canadian testing populations.

A number of steps are necessary to perform an analysis of newly licensed/registered RN practice. A panel of subject matter experts was assembled, a list of RN activities was created and incorporated into a survey that was sent to a randomly drawn sample of newly licensed/registered nurses, and data were collected and analyzed

Methodology Reviewers

Three methodology reviewers, chosen for their expertise in practice/job analysis and certification exam development, reviewed the methodologies and procedures utilized in this study. All three reviewers indicated this methodology was psychometrically sound, legally defensible and in compliance with industry standards for practice analyses.

Panel of Subject Matter Experts (SMEs)

A panel of 12 RNs was assembled to assist with the practice analysis. Three of the 12 panelists were Canadian RNs. Panel members worked with, educated and/or supervised the practice of RNs within their first six months of practice or were themselves newly licensed/registered RNs. Panel members represented geographic NCSBN areas of the U.S. and Canadian territories/jurisdictions using NCLEX for licensure/registration decisions, major nursing specialties, and varied practice settings.

The panel used the current test plan category structure describing the types of activities performed by newly licensed/registered RNs and developed a list of activities performed within each category of the structure.

Survey Development

A total of 139 nursing activity statements were incorporated into a practice analysis survey. The survey also included questions about the nurses' practice settings, past experiences and demographics. Some of survey questions were slightly modified to accommodate different terminologies used in Canada (e.g., ethnicity). The sample of newly registered nurses received a Webbased survey. Three forms of the Web survey were created to reduce the number of activity statements on each survey. Two of surveys contained 46 activity statements and one of the Web surveys contained 47 activity statements, without shared activity statements. Such a design ensures every activity statement appears across the three survey forms. Except for the activity statements unique to each survey form, the surveys were identical.

Survey Process

Sample Selection

NCSBN received a list of 2,297 RNs licensed/registered within 10 Canadian regulatory bodies between Oct. 1, 2013, and March 31, 2014. Because the size of the population was relatively small, it was unnecessary and unreasonable to draw stratified random samples from the population. Instead, the whole population was evenly and randomly split into three samples, balanced in terms of licensure/registration province and gender. 764 RNs received Form 1, 766 RNs Form 2, and 767 RNs Form 3.

Mailing Procedure

A five-stage mailing process was used to engage the participants in the study. All potential participants were promised confidentiality with regard to their participation and their responses. The survey was conducted from April through June 2014.

Return Rates

Out of the 2,297 surveys, 593 were received overall for the three forms. The raw response rate was approximately 25.8%. There were 100 individuals who did not qualify for survey ratings based on one of the following reasons: (a) they did not indicate having an RN license/registration; (b) they were not currently working in Canada; (c) they were working less than 20 hours per week as an RN; and/or (d) they failed to answer the previous three demographic questions. After adjusting for removals, the analyzable response rate was 21.5%.

Demographics, Experiences and Practice Environments of Participants

Demographics/Past Experiences

The majority (90.1%) of survey respondents reported being female. The age of respondent nurses averaged 30.0 years (SD 7.1 years). The respondents were 60.1% White, 10.2% South Asian, 8.4% Filipino, 6.6% Black, and 3.9% Chinese.

Newly licensed/registered RNs listed obtaining a baccalaureate degree most frequently (81.4%) as

the educational preparation for initial RN licensure/ registration.

Responders reported working an average of 5.7 months as an RN in Canada and reported being an average of 9.6 months postgraduation. Approximately 9.3% of responders reported previous experience as a registered practical nurse (RPN) and 24.9% reported previous experience as a nurse aide (NA). The average experience in those positions was 6.3 years as a RPN and 2.7 years as an NA.

Orientation

The majority of newly licensed/registered RNs received some form of formal orientation (97.4%). No formal orientation was reported by 2.7% and 2.7% reported having only a formal internship with or without additional classroom or skills lab work for their orientation. The majority of newly licensed/ registered RNs reported working with an assigned preceptor (67.4%) for an average of 5.9 weeks. In the next largest group 19.4% reported having a classroom and/or skills lab plus supervised work with clients that lasted an average of 4.1 weeks.

Certifications Earned

In the current study, Basic Life Support (47.9%), Intravenous Therapy (30.6%), and Advanced Cardiac Life Support (13.2%) were the most frequently reported certifications.

Facilities

The majority (76.9%) of newly licensed/registered RNs in this study reported working in hospitals. The next largest group (11.5%) reported working in long-term care while just fewer than 10% reported working in community-based facilities.

Related to the size of the facilities in which respondents work, the bulk of newly licensed/registered RNs in this study indicated working in hospitals with at least 100 beds. The majority of respondents (21.0%) work in a facility with 500 or more beds, followed by 18.0% of respondents in facilities with 100-299 beds, and lastly facilities with 300-499 beds included 15.6% of the sample. Only 12.3% and 9.6% of respondents indicated working in facilities containing less than 50 beds and 50-99 beds, respectively. Almost 63.3% of newly licensed/registered RNs in this study reported working in urban or metropolitan areas, 18.6% in rural areas, and 18.1% in suburban areas.

Practice Settings

The majority of newly licensed/registered RNs reported working in the medical/surgical (32.0%) and critical care (10.1%) settings. Nursing home, skilled or immediate care made up 6.3% of the current sample, followed by home health, including visiting nurses associations (4.9%) and other long-term care (e.g., residential care, developmental disability) (4.7%).

Client Health Conditions and Ages

Newly licensed/registered RNs reported caring for acutely ill clients (42.6%), clients with stable chronic conditions (31.2%), clients with behavioral/emotional conditions (27.4%) and clients with unstabilized chronic conditions (22.9%). The majority of newly licensed/registered RNs reported caring for older adult clients aged 65 to 85 (47.5%), adult clients aged 18 to 64 (41.4%), older adult clients over age 85 (28.8%) and newborns (less than 1 month) (7.5%).

Shifts Worked

The shifts most commonly worked by newly licensed/registered RNs are rotating shifts (67.4%) and days (20.5%). Only 5.9% and 5.3% reported working evenings and nights, respectively.

Time Spent in Different Categories of Nursing Activities

Newly licensed/registered RNs reported spending the greatest amount of time in Management of Care (19.6%), Physiological Adaption (14.1%), and Basic Care and Comfort (12.9%).

Administrative Responsibilities/Primary Administrative Position

Of the respondents, 34.8% reported having administrative responsibilities and of those respondents, 30.2% reported having a primary administrative position. Those working in long-term care facilities were far more likely to report having administrative responsibilities than those working in hospitals (86.8% in long-term care vs. 25.4% in hospitals). Those working in long-term care with administrative responsibilities were more than three times as likely to report being in a primary administrative position than those working in hospitals (56.3% of those working in long-term care reported having an administrative position compared to 14.3% of those working in hospitals). Of those working in community-based settings, 43.8% reported having administrative responsibilities. Of those respondents, 42.9% reported holding a primary administrative position.

Activity Performance Findings

Reliability

Reliability indices were calculated to assess the capability of the survey to measure the activities relevant to safe and effective practice of newly licensed RNs. Cranach's alpha coefficients were calculated for frequency and importance ratings for the paper and Web forms of the survey. Paper surveys had a reliability index of about 0.97 for importance and about 0.96 for frequency ratings, which is quite good. Web surveys had a reliability index of .96 for importance and 0.95 for frequency ratings. These high reliability indices indicate the survey is reliably measuring the nursing activities necessary for competent RN practice.

SME Panel Validation of Survey Findings

The SME panel for the 2014 RN Practice Analysis was asked to provide independent ratings of the 139 activity statements. The importance ratings estimated by panel members were compared to the average importance ratings from the practice analysis survey. In general, respondents regarded most of the activity statements as more important than the SME's did.

Representativeness of Activity Statements

Respondents were asked whether the activities on their survey form represented what they actually did in their positions. A large majority of participants (81.1%) indicated that the survey covered the important nursing activities "well" or "very well."

Applicability of Activities to Practice Setting

Respondents indicated if each of the activities was applicable to his or her work setting. The activities ranged from 23.7% applicability (23.7% of the respondents reported that the activity was performed within their work setting) to 100.0% (100.0% of the respondents reported the activity was performed within their work setting).

Frequency of Activity Performance

Respondents were asked to rate the frequency of performance of all activities that were applicable to their work setting on a six-point scale: "0 times" to "5 times or more." Average frequency statistics were calculated in two ways: setting-specific frequency of activity performance and total group frequency. Average setting-specific frequencies ranged from 0.31 to 4.90. Average total group frequencies ranged from 0.11 to 4.85.

Importance of Activity Performance

Respondents were asked to rate the importance of performing each nursing activity in regard to the maintenance of client safety and/or threat of complications or distress using a five point scale: "1" (not important) to "5" (critically important). Average setting-specific importance ratings ranged from 3.28 to 4.89. Average total group importance ratings ranged from 3.10 to 4.89.

Summary

Respondents to the 2014 RN practice analysis found the activities listed in the survey to be representative of the work they performed in their practice settings. In general, the importance ratings of SMEs and respondents were similar (correlation = 0.80), supporting the validity of the results. The reliability of the survey instrument was quite good. In addition, activities with the lowest average total group frequency and importance ratings corresponded, in general, to those activities performed in specialized areas of nursing practice.

Conclusion

The 2014 RN Practice Analysis used several methods to describe the practice of newly licensed/ registered RNs in the U.S. and Canadian territories/ jurisdictions: (1) document reviews; (2) daily logs of newly licensed/registered RNs; (3) subject matter experts knowledge; and (4) a large scale survey. The reliability of the survey instrument was quite good. In addition, there was evidence to support the validity of the activity statement ratings.

Part 2

2014 RN Practice Analysis: Linking the NCLEX-RN[®] Examination to Practice

Canadian Respondents

National Council of State Boards of Nursing, Inc. (NCSBN®)

BACKGROUND OF STUDY

The National Council of State Boards of Nursing (NCSBN®) is responsible for the preparation of psychometrically sound and legally defensible licensure examinations. The periodic performance of practice analysis (i.e., job analysis) studies assists NCSBN in evaluating the validity of the test plan that guides content distribution of the licensure examination. Because the health care industry is rapidly changing, practice analysis studies are traditionally conducted on a three-year cycle. The latest Canadian registered nurse (RN) practice analysis was conducted in 2013 to validate the applicability of the 2013 NCLEX-RN test plan to the Canadian testing population (NCSBN, 2013). The purpose of the current study is to compare the current Canadian RN practice with the 2013 Canadian RN practice. In addition, this survey was conducted at the same time as the U.S. RN practice analysis survey, which allows comparisons between the U.S. RN practice and the Canadian RN practice.

Methodology

See the section on methodology reviewers in Part I for more details.

Preliminary Interviews with Nurse Leaders

See the section on preliminary interviews with nurse leaders in Part I for more details.

Methodology Reviewers

See the section on methodology reviewers in Part I for more details.

Panel of SMEs

A panel of 12 RNs was assembled to assist with the practice analysis. Three of the 12 panelists were Canadian RNs. See the section on panel of subject matter experts in Part I for more details.

Survey Development

A total of 139 nursing activity statements were incorporated into a practice analysis survey. The survey

also included questions about the nurses' practice settings, past experiences and demographics. Some of survey questions were slightly modified to accommodate different terminologies used in Canada (e.g., ethnicity). The sample of newly registered nurses received a Web-based survey. Three forms of the Web survey were created to reduce the number of activity statements on each survey. These forms are the same forms used for the U.S. survey. Two of surveys contained 46 activity statements and one of the Web surveys contained 47 activity statements, without shared activity statements. Such a design ensures every activity statement appears across the three survey forms. Except for the activity statements unique to each survey form, the surveys were identical. See the section on survey development in Part I for more details.

Survey Process

Sample Selection and Representativeness

NCSBN received a list of 2,297 RNs licensed/ registered within 10 Canadian regulatory bodies that began using the NCLEX-RN for licensure decisions in January 2015. The list consisted of nurses newly licensed/registered between Oct. 1, 2013, and March 31, 2014. Because the size of the population was relatively small, it was unnecessary and unreasonable to draw stratified random samples from the population. Instead, the whole population was evenly and randomly split into three samples, balanced in terms of licensure/registration province and gender. 764 RNs received Form 1, 766 RNs Form 2, and 767 RNs Form 3. Table 1 presents the correspondence between the sample and the responders by licensure/registration provinces.

Mailing Procedure

The Web survey was sent to the 2,297 newly licensed/registered RNs; the three versions of the Web survey were distributed evenly among the sample. A pre-survey email was sent to each person in the sample. A week later, recipients were sent an email invitation with a log-in address and a unique access code. Two weeks later, a email was sent to all participants reiterating the importance of the study and urging participation. Approximately two weeks after the first email, a second reminder was sent to nonrespondents and two weeks later, a third email was sent to continued nonrespondents. The survey was conducted from April through June 2014.

Confidentiality

See the section on confidentiality in Part I for more details.

Return Rates

Out of the 2,297 surveys, 593 were received overall for the three forms. The raw response rate was approximately 25.8%. There were 100 individuals who did not qualify for survey ratings based on one of the following reasons: (a) they did not indicate having an RN license/registration; (b) they were not currently working in Canada; (c) they were working less than 20 hours per week as an RN; and/or (d) they failed to answer the previous three demographic questions. After adjusting for removals, the analyzable response rate was 21.5%.

Summary

A panel of 12 registered RNs, subject matter experts in the practice of newly licensed/registered RNs, met and created a comprehensive list of RN activity statements. A data collection instrument was developed and revised before being sent to 2,297 RNs licensed/registered within 10 Canadian jurisdictions between Oct. 1, 2013, and March 31, 2014. The survey response rate was 21.5%. This practice analysis contains the responses of 493 newly licensed/registered RNs.

Table 1. Correspondence of Sample and Responders for the 2013 Canadian RN Practice Analysis					
	2014 CAN Sample		2014 CAN Responders		Response Rate
Licensure/registration Province	N	%	N	%	
Alberta	43	1.9	37	6.2	86.0
British Columbia	467	20.3	113	19.1	24.2
Manitoba	392	17.1	67	11.3	17.1
New Brunswick	68	3.0	9	1.5	13.2
Newfoundland and Labrador	47	2.0	18	3.0	38.3
Northwest Territories and Nunavut	3	0.1	1	0.2	33.3
Nova Scotia	57	2.5	19	3.2	33.3
Ontario	1093	47.6	285	48.1	26.1
Prince Edward Island	2	0.1	2	0.3	100.0
Quebec	0	0.0	0	0.0	-
Saskatchewan	125	5.4	42	7.1	33.6
Yukon	0	0.0	0	0.0	-
TOTAL	2297	100.0	593	100.0	25.8

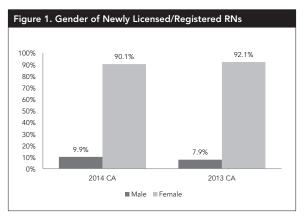
DEMOGRAPHICS, EXPERIENCES AND PRACTICE ENVIRONMENTS OF PARTICIPANTS

Demographics/Past Experiences

Demographic information, including racial and ethnic backgrounds, educational preparation, and gender, are presented next, followed by descriptions of respondents' work environments, including settings, shifts worked and client characteristics.

Age and Gender

The majority (90.1%) of survey respondents reported being female. See Figure 1 for gender. This percentage is slightly lower than the percentage found in the 2013 Canadian RN practice analysis. The age of respondent nurses averaged 30.0 years (SD 7.1 years), older than the average of 26.5 years (SD 6.3 years) from 2013 Canadian RN practice analysis.



Race/Ethnicity of Newly Licensed/registered RNs

The respondents were 60.1% White, 10.2% South Asian, 8.4% Filipino, 6.6% Black, and 3.9% Chinese. See Figure 2 for race/ethnicity. There was no race/ ethnicity question in the 2013 Canadian RN practice analysis.

Of the respondents, 71.2% reported English as their primary language and 14.7% had both English and another language as their primary languages. The primary language of the remaining 14.1% of respondents was not English: Another language (12.6%) and French (1.5%).

Educational Background

Newly licensed/registered RNs listed obtaining a baccalaureate degree most frequently (81.4%) as the educational preparation for initial RN licensure/ registration.

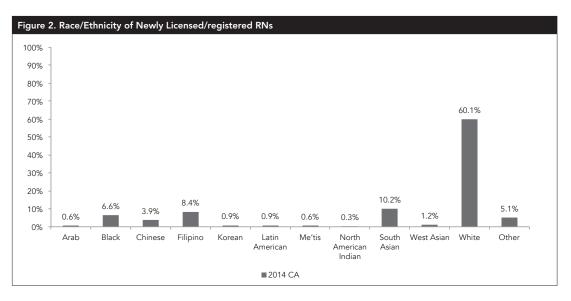
Previous Licensed Practical/Vocational Nurse (LPN/VN) or Nurse Aide/Nursing Assistant (NA) Experience

Responders reported working an average of 5.7 months as an RN in Canada and reported being an average of 9.6 months post-graduation. See Figure 3. Approximately 9.3% of responders reported previous experience as a registered practical nurse (RPN) and 24.9% reported previous experience as a nurse aide (NA). The average experience in those positions was 6.3 years as a RPN and 2.7 years as an NA. See Table 2.

2014 CA 2013 CA					
	Yrs. Exp	%*	Yrs. Exp %		
RPN/LPN/VN	6.3	9.3	4.9	6.0	
Nurse Aide (NA)	2.7	24.9	2.2	34.0	

Orientation

The majority of newly licensed/registered RNs received some form of formal orientation (97.4%). No formal orientation was reported by 2.7% and 2.7% reported having only a formal internship with or without additional classroom or skills lab work for their orientation. The majority of newly licensed/ registered RNs reported working with an assigned preceptor (67.4%) for an average of 5.9 weeks. In the next largest group 19.4% reported having a classroom and/or skills lab plus supervised work with clients that lasted an average of 4.1 weeks. See Table 3 for types of orientations with average time spent in each.



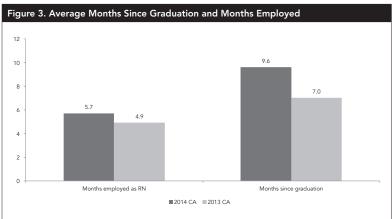


Figure 4. Client Health Conditions

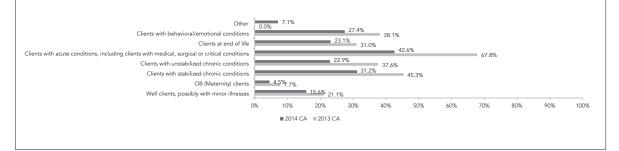


Table 3. Type and Length of Orientation					
	2014 CA		2013 CA		
	%	Avg Weeks	%	Avg Weeks	
No formal orientation	2.7	NA	1.5	NA	
Classroom instruction/skills lab work only	2.1	2.0	1.4	2.1	
Classroom and/or skills lab plus supervised work with clients	19.4	4.1	16.8	4.0	
Work with an assigned preceptor(s) or mentor(s) with or without additional classroom or skills lab work	67.4	5.9	67.3	6.3	
A formal internship with or without additional classroom or skills lab work	2.7	10.7	5.1	11.2	
Other	5.9	3.1	7.9	9.4	

Table 4. Additional Coursework/Certification*				
	2014 CA	2013 CA		
Type of Additional Coursework/Certification	% (n=493)	% (n=797)		
Advanced Cardiac Life Support	13.2	19.2		
Basic Life Support	47.9	52.8		
Behavioral Management	6.7	6.4		
Chemotherapy	2.6	1.0		
Conscious/Moderate Sedation	2.8	0.0		
Coronary Care	4.1	5.0		
Critical Care	3.4	0.0		
Intravenous Therapy	30.6	39.4		
Neonatal Advanced Life Support	1.2	9.7		
Neonatal Resuscitation	6.9	NA		
Pediatric Advanced Life Support	3.0	0.0		
Phlebotomy	10.8	9.8		
Peritoneal Dialysis	2.4	3.4		
Rehabilitation	0.8	0.0		
None	8.5	17.9		
Other	18.1	25.1		

*Respondents could select all that apply

Table 5. Employment Facilities						
	2014 CA	2013 CA				
Type of Facility/Organization	%	%				
Type of Facility/organization	(n=493)	(n=797)				
Hospital	76.9	85.2				
Long-term care facility	11.5	4.9				
Community-based or ambulatory care facility/organization	9.5	8.2				
Other	2.1	1.8				

Table 6. Employment Setting Characteristics					
	2014 CA	2013 CA			
Type of Facility/Organization	% (n=493)	% (n=797)			
Number of Hospital or Nursing Home Beds					
Less than 50 beds	12.3	12.6			
50 - 99 beds	9.6	8.3			
100 - 299 beds	18	21.2			
300 - 499 beds	15.6	16.3			
500 or more beds	21	19.3			
Don't know	14.1	14.9			
Other work setting	9.3	7.5			
Location of Employment Setting					
Urban/Metropolitan area	63.3	61.4			
Suburban	18.1	17.9			
Rural	18.6	20.7			

Certifications Earned

In the current survey, Basic Life Support (47.9%), Intravenous Therapy (30.6%), and Advanced Cardiac Life Support (13.2%) were the most frequently reported certifications. See Table 4 for types of additional coursework/certification newly RNs earned or concluded. The ability to give multiple answers allowed for percentages to equal more than 100%.

Work Settings

Facilities

The majority (76.9%) of newly licensed/registered RNs in this study reported working in hospitals. The next largest group (11.5%) reported working in long-term care while just fewer than 10% reported working in community-based facilities. A shift can be noted in newly licensed/registered nurses in acute care and long-term care facilities. See Table 5.

Related to the size of the facilities in which respondents work, the bulk of newly licensed/ registered RNs in this study indicated working in hospitals with at least 100 beds. The majority of respondents (21.0%) work in a facility with 500 or more beds, followed by 18.0% of respondents in facilities with 100-299 beds, and lastly facilities with 300-499 beds included 15.6% of the sample. Only 12.3% and 9.6% of respondents indicated working in facilities containing less than 50 beds and 50-99 beds, respectively. Almost 63.3% of newly licensed/ registered RNs in this study reported working in urban or metropolitan areas, 18.6% in rural areas, and 18.1% in suburban areas. These results are similar to the 2013 results. See Table 6 for the size and location of the facilities respondents reported working.

Practice Settings

The majority of newly licensed/registered RNs reported working in the medical/surgical (32.0%) and critical care (10.1%) settings, which represents a decrease in these settings as compared to the 2013 findings. Nursing home, skilled or immediate care made up 6.3% of the current sample, followed by home health, including visiting nurses associations (4.9%) and other long-term care (e.g., residential care, developmental disability) (4.7%), which represents an increase in these settings as compared to the 2013 findings. These data are displayed in Table 7.

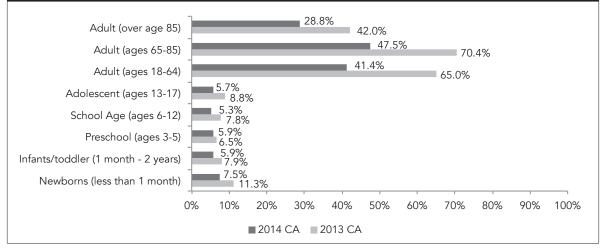
Client Health Conditions

Newly licensed/registered RNs reported caring for acutely ill clients (42.6%), clients with stable chronic conditions (31.2%), clients with behavioral/ emotional conditions (27.4%) and clients with unstabilized chronic conditions (22.9%). The ability to give multiple answers allowed for percentages to equal more than 100%. See Figure 4 for more details on other client health conditions.

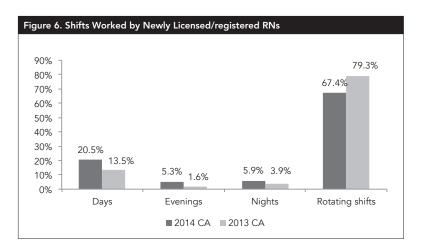
Table 7. Practice Settings*		
	2014 CA	2013 CA
Type of Facility/Organization	% (n=493)	% (n=797)
Critical care (e.g., ICU, CCU, step-down units, pediatric/neonatal intensive care, emergency department, postanesthesia recovery unit)	10.1	18.1
Medical-surgical unit or any of its subspecialties (e.g., oncology, orthopedics, neurology)	32.0	51.3
Pediatrics	3.7	3.0
Nursery	1.0	0.0
Labor and delivery	1.4	1.5
Postpartum unit	1.8	2.6
Psychiatry or any of its subspecialties (e.g., detox)	3.0	3.1
Assisted Living	0.4	0.0
Operating room, including outpatient surgery and surgicenters	2.4	5.9
Nursing home, skilled or intermediate care	6.3	0.4
Other long-term care (e.g., residential care, developmental disability)	4.7	0.0
Rehabilitation	2.6	0.0
Subacute unit	2.6	0.0
Transitional care unit	0.6	0.0
Physician/APRN/Dentist office	0.6	0.4
Occupational health	0.0	0.0
Outpatient clinic	1.0	0.0
Home health, including visiting nurses associations	4.9	1.3
Public health	1.0	1.4
Student/school health	0.6	0.0
Hospice care	1.2	0.0
Prison/Correctional Facility/Jail	0.2	0.0
Short Stay/Observational	0.2	NA
Step-down/Progressive Care	0.2	NA
Other	6.1	7.4

*Note: Respondents could select all that apply

Figure 5. Client Ages



National Council of State Boards of Nursing, Inc. (NCSBN) | 2015



Client Ages

The majority of newly licensed/registered RNs reported caring for older adult clients aged 65 to 85 (47.5%), adult clients aged 18 to 64 (41.4%), older adult clients over age 85 (28.8%) and newborns (less than 1 month) (7.5%). See Figure 5 more details on other client age groups. The ability to give multiple answers allowed for percentages to equal more than 100%.

On average, the respondents were responsible for 13.0 clients on their last work day with a standard deviation of 22.7.

Shifts Worked

The shifts most commonly worked by newly licensed/registered RNs are rotating shifts (67.4%) and days (20.5%). Only 5.3% and 5.9% reported working evenings and nights, respectively. Note that a very small number of respondents selected "other" for shifts worked and these responses are not reflected in Figure 6. See Figure 6 for shifts reported in 2013 and 2014 Canadian practice analyses.

Time Spent in Different Categories of Nursing Activities

The respondents to the current survey were asked to record the number of hours spent performing specific categories of activities (see Table 8). The hours spent were then converted to proportions of time by dividing the hours reported spent on each activity by the number of hours reported spent working. Because nurses often perform more than one type of activity at a time, such as teaching while giving medications or providing emotional support while giving routine care, these proportions did not equal 1. In order to make the proportions of time spent in activities useful to the task of helping to validate the NCLEX-RN® test plan, the proportions were standardized by dividing the time spent in each category of activity by the sum of hours reportedly spent in all the activities. These standardized proportions have the advantage of adding up to 1. Newly licensed/registered RNs reported spending the greatest amount of time in management of care (20%), physiological adaption (14%), basic care and comfort (13%) and pharmacological and parenteral therapies (12%). The relatively least amount of time was reportedly spent on safety and infection control (11%), health promotion and maintenance (11%), psychosocial integrity (11%) and reduction of risk potential (11%). Compared to the 2013 survey, there are only very slight variations in time spent on almost all categories of activities.

Administrative Responsibilities/Primary Administrative Position

The newly licensed/registered RNs responding to the practice analysis survey were asked if they had administrative responsibilities within their nursing position such as being a unit manager, a team leader, charge nurse, or a coordinator. If they reported such responsibilities, they were asked if they had a primary administrative position. Of the respondents, 34.8% reported having administrative responsibilities

and of those respondents, 30.2% reported having a primary administrative position. Those working in long-term care facilities were far more likely to report having administrative responsibilities than those working in hospitals (86.8% in long-term care vs. 25.4% in hospitals). Those working in longterm care with administrative responsibilities were more than three times as likely to report being in a primary administrative position than those working in hospitals (56.3% of those working in long-term care reported having an administrative position compared to 14.3% of those working in hospitals). Of those working in community-based settings, 43.8% reported having administrative responsibilities. Of those respondents, 42.9% reported holding a primary administrative position. See Table 9 for more details.

Summary

The newly licensed/registered Canadian RNs responding to the 2014 RN Practice Analysis survey were primarily female with an average age of 30.0 years. The majority worked day or rotating shifts in medical/surgical or critical care units of hospitals. The majority of respondents were provided an orientation with an assigned preceptor or mentor for an average of about 6 weeks. The respondents cared mostly for clients with acute or chronic conditions who were 18-85 years of age.

Categories of Ac	Time Spent in Different Categories of Nursing Activ	2014 CA Average Hours	2014 CA Proportion of Work Hours	2014 CA Standardized Proportion	2013 CA Standardized Proportion
Management of Care	Perform and direct activities that manage client care within the health care delivery setting (e.g. advance directives, advocacy, case management, client rights, collaboration with interdisciplinary team, concepts of management, confidentiality and information security, consultation, continuity of care, delegation, establishing priorities, ethical practice, informed consent, information technology, legal rights and responsibilities, performance improvement/quality improvement, referrals, resource management, staff education and supervision).	4.68	0.44	0.20	0.18
Safety and Infection Control	Perform and direct activities that protect client and health care personnel from hazards encountered in the health care setting (e.g., accident prevention, disaster planning, emergency response plan, ergonomic principles, error prevention, handling hazardous and infectious materials, home safety, injury prevention, medical/surgical asepsis, report of incident/ event/irregular occurrence/variance, safe use of equipment, security plan, standard/ transmission based/ other precautions and use of restraints/ safety devices).	2.90	0.28	0.11	0.11
Health Promotion and Maintenance	Perform and direct activities that promote and maintain the health of client (e.g., aging process, ante/intra/post partum/newborn care, developmental stages and transitions, disease prevention, expected body image changes, family planning, family systems, growth and development, health and wellness, health promotion programs, health screening, high risk behaviors, human sexuality, immunizations, lifestyle choices, principles of teaching/learning, self care, and techniques of physical assessment).	2.91	0.27	0.11	0.11
Psychosocial Integrity	Perform and direct activities related to caring for client with emotional, mental and social problems/ issues, including providing behavioral interventions (e.g. abuse/neglect, behavioral interventions, chemical and other dependencies, coping mechanisms, crisis intervention, cultural diversity, end of life care, family dynamics, grief and loss, mental health concepts, psychopathology, religious and spiritual influences on health, sensory/ perceptual alterations, situational role changes, stress management, support systems, therapeutic communications, therapeutic environment, and unexpected body image changes).	2.94	0.27	0.11	0.12
Basic Care and Comfort	Provide and direct basic care and comfort measures including promoting client ability to perform activities of daily living (e.g. assistive devices, complementary and alternative therapies, elimination, mobility/immobility, nonpharmacological comfort interventions, nutrition and oral hydration, palliative/comfort care, personal hygiene, and rest/sleep).	3.49	0.32	0.13	0.12

Table 8. Average	Time Spent in Different Categories of Nursing Activ	vities			
Categories of Ac	tivities	2014 CA Average Hours	2014 CA Proportion of Work Hours	2014 CA Standardized Proportion	2013 CA Standardized Proportion
Pharmacological and Parenteral Therapies	Perform and direct activities necessary for safe administration of medications and intravenous therapies (e.g., adverse effects/ contraindications and side effects, blood and blood products, central venous access devises, dosage calculation, expected effects/ outcomes, medication administration, parenteral/intravenous therapy, pharmacological agents/actions, pharmacological interactions, pharmacological pain management, and total parenteral nutrition).	3.14	0.29	0.12	0.11
Reduction of Risk Potential	Perform and direct activities to prepare for and care for client undergoing a treatment/ procedure/ surgery to reduce the likelihood that client will develop a complication or health problem related to existing condition, (e.g., diagnostic tests, laboratory values, monitoring moderate/ conscious sedation, potential for alterations in body systems, potential for complications of diagnostic tests/treatments/ procedures, potential for complications from surgical procedures and health alterations, specific system assessment, therapeutic procedures and vital signs).	2.94	0.27	0.11	0.10
Physiological Adaptation	Provide and direct care for client with acute, chronic or life threatening physical health condition (e.g., alterations in body systems, fluid and electrolyte imbalances, hemodynamics, illness management, infectious disease, medical emergencies, pathophysiology, radiation therapy, and unexpected response to therapy).	3.80	0.35	0.14	0.15

Table 9. Administrative Respo	nsibilities			
	201	4 CA	201	3 CA
	Administrative Responsibility	Primary Administrative Position*	Administrative Responsibility	Primary Administrative Position*
Facilities	%	%	%	%
All	34.8	30.2	24.1	78.5
Hospital	25.4	14.3	20.5	75.5
Long-term care	86.8	56.3	76.9	89.7
Community-based care	43.8	42.9	26.2	82.5
Other	42.9	33.3	42.9	83.3

*Percent of all relevant responders

ACTIVITY STATEMENT PERFORMANCE FINDINGS

Findings relative to the activities performed by newly licensed/registered Canadian RNs are presented in this section of the report. The methods used to collect and analyze activity statement findings, the representativeness of activity statements, applicability to practice settings, frequency of performance, and importance of the activities will be discussed. A validation of survey findings with estimates provided by the subject matter expert panel will also be provided.

Overview of Methods

See the section on overview of methods in Part I for more details.

Activity Performance Characteristics

Reliability

Reliability indices were calculated to assess the capability of the survey to measure the activities relevant to safe and effective practice of newly licensed/registered RNs. Cranach's alpha coefficients were calculated for frequency and importance ratings for the Web forms of the survey. The Web survey forms had an average reliability index of .95 for frequency and .95 for importance ratings. As can be seen in Table 10, these high reliability indices indicate the survey is reliably measuring the nursing activities necessary for competent RN practice.

SME Panel Validation of Survey Findings

The SME panel for the 2014 RN Practice Analysis was asked to provide independent ratings of the 139 activity statements. They estimated the percentage of newly licensed/registered RNs performing the activities within their practice settings, the average setting-specific frequency with which the activities were performed during one day and the average importance of the activities. After the ratings were obtained, average total group frequency estimates were calculated by prorating the settingspecific frequencies with the estimates of setting applicability. All panel ratings were averaged across panel members and compared to the ratings obtained from the practice analysis survey. The importance ratings estimated by panel members were compared to the average importance ratings from the practice analysis survey. As with the case with the findings from the U.S., there were no differences greater than 0.70 between the SME ratings and the newly licensed/registered Canadian RNs. In general, the respondents rated most of the activity statements slightly more important than the SMEs did.

Representativeness of Activity Statements

Respondents were asked whether the activities on their survey form represented what they actually did in their positions. A large majority of participants (81.1%) indicated that the survey covered the important nursing activities "well" or "very well."

Table 10. Relia	Table 10. Reliability Estimates										
	Frequency			Importance							
	N Items	N Cases	Scale Reliability	N Items	N Cases	Scale Reliability					
Web Form 1	47	180	0.94	47	180	0.94					
Web Form 2	46	155	0.96	46	155 0.9	0.95					
Web Form 3	46	158	0.95	46	158	0.95					

Applicability of Activities to Practice Setting

Respondents indicated if each of the activities was not applicable to his or her work setting by marking "Never performed in work setting." The percentages of newly licensed/registered nurses indicating that the activities were applicable are reported in Table 11. The activities ranged from 23.7% applicability (23.7% of the respondents reported that the activity was performed within their work settings) to 100.0% (100.0% of the respondents reported the activity was performed within their work setting). The activities with the lowest percentage of applicability were "Perform hemodialysis or continuous renal replacement therapy" (23.7%), "Provide post-partum care and education" (31.4%) and "Provide care and education to a client in labor or antepartum client" (31.5%). There are 13 activities with the highest percentage of applicability (100.0%). Some of those activities are "Maintain client confidentiality and privacy," "Protect client from injury (e.g., falls, electrical hazards),"and "Handle and maintain medication in a safe and controlled environment." See Table 11 for more details on applicability of activities to practice setting.

Frequency of Activity Performance

Respondents were asked to rate the frequency of performance of all activities that were applicable to their work settings. They reported how frequently they performed the activity on the last day they worked using a six-point scale: "0 times" to "5 times or more." Average frequency statistics were calculated in two ways. The setting-specific frequency was calculated by averaging the frequency ratings of those respondents providing ratings (i.e., respondents indicating that the activity applied to their work setting). The total group frequency was calculated by including the missing frequency ratings (i.e., respondents indicating that the activity did not apply to their work setting) before averaging the rating. To do this, the missing frequency ratings were converted to zero ("0 times" on the rating scale) for inclusion in the total group frequency calculation. See Table 11 for settingspecific and total group frequency.

Setting-Specific

Average setting-specific frequencies ranged from 0.31 to 4.90. The activities performed with the lowest frequencies were "Perform and manage care of client receiving peritoneal dialysis" (0.31), "Implement and monitor phototherapy" (0.33), and "Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)" (0.47). The activities with the highest setting-specific average frequencies of performance were "Provide care within the legal scope of practice" (4.90), "Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions)" (4.89), "Maintain client confidentiality and privacy" (4.75) and "Ensure proper identification of client when providing care" (4.69).

Total Group

Average total group frequencies ranged from 0.11 to 4.85. The activities performed with the lowest total group frequency were "Implement and monitor phototherapy" (0.11), "Perform hemodialysis or continuous renal replacement therapy" (0.13), and "Perform and manage care of client receiving (0.14). activities peritoneal dialysis" Those performed with the overall highest frequencies were "Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions)" (4.85), "Provide care within the legal scope of practice" (4.85), "Maintain client confidentiality and privacy" (4.75) and "Ensure proper identification of client when providing care" (4.69).

Importance of Activity Performance

Respondents were asked to rate the importance of performing each nursing activity in regard to the maintenance of client safety and/or threat of complications or distress. Respondents were further requested to consider the importance of activity performance in terms of client safety, namely risk of unnecessary complications, impairment of function or serious distress to clients. Importance ratings were recorded using a five-point scale of "1" (Not Important) to "5" (Critically Important). Average importance ratings were calculated in two ways. Setting-specific importance was calculated by averaging only the ratings of respondents providing frequency ratings for the activity statement (those indicating that the activity applied to their work setting). The total group importance was calculated by including all importance ratings regardless of applicability to work setting. The average importance rating for each of the 139 activities is reported in Table 12.

Setting-Specific

Average setting-specific importance ratings ranged from 3.28 to 4.89. The activities with the lowest importance ratings were "Provide cost effective care" (3.28), "Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)" (3.30). The activities with the highest importance ratings were "Ensure proper identification of client when providing care" (4.89), "Provide care within the legal scope of practice" (4.85), and "Prepare and administer medications, using rights of medication administration" (4.82).

Total Group

Average importance ratings total group ranged from 3.10 to 4.89. The activities with the lowest importance ratings were "Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)" (3.10), "Provide cost effective care" (3.23), and "Provide care and education to a client in labor or antepartum client" (3.31). The activities with the highest importance ratings were "Ensure proper identification of client when providing care" (4.89), "Provide care within the legal scope of practice" (4.82), and "Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions)" (4.81).

SUMMARY

Respondents to the 2014 RN practice analysis found the activities listed in the survey to be representative of the work they performed in their practice settings. In general, the importance ratings of SMEs and respondents were similar (correlation = 0.80), supporting the validity of the results. The reliability of the survey instrument was quite good. In addition, activities with the lowest average total group frequency and importance ratings corresponded, in general, to those activities performed in specialized areas of nursing practice.

CONCLUSIONS

The 2014 RN Practice Analysis used several methods to describe the practice of newly licensed/ registered RNs in the U.S. and Canadian territories/ jurisdictions: (1) document reviews; (2) daily logs of newly licensed/registered RNs; (3) subject matter experts knowledge; and (4) a large scale survey. The reliability of the survey instrument was quite good. In addition, there was evidence to support the validity of the activity statement ratings.

Overall, the findings in the report reflect the continued congruency of entry-level nursing practice in the U.S. and Canada. These findings support the use of the NCLEX for licensure decisions in select Canadian provinces.

		Analysta	Average Fr	equency (Setti	na-Specific)	Average	Frequency (To	tal Group)
Activity Number	Activity	Apply to Setting (%)	N	Avg	Std. Err	N	Avg	Std. Err
1	Perform procedures necessary to safely admit, transfer or discharge a client	94.48	154	2.53	0.15	163	2.39	0.14
2	Provide and receive hand off of care (report) on assigned clients	98.35	119	3.39	0.14	121	3.33	0.14
3	Assign and supervise care provided by others (e.g., LPN/VN, assistive personnel, other RNs)	89.81	97	2.60	0.20	108	2.33	0.20
4	Advocate for client rights and needs	99.39	162	3.30	0.13	163	3.28	0.13
5	Prioritize the delivery of client care	99.17	119	4.24	0.12	120	4.20	0.13
6	Participate in performance improvement/quality improvement process	91.67	99	1.82	0.17	108	1.67	0.16
7	Collaborate with interprofessional team members when providing client care (e.g., language interpreter, health care professionals)	99.38	160	3.64	0.13	161	3.61	0.13
8	Receive and/or transcribe health care provider orders	95.00	114	3.56	0.15	120	3.38	0.16
9	Integrate advance directives into client plan of care	85.98	92	1.83	0.19	107	1.57	0.18
10	Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)	88.82	143	0.61	0.10	161	0.54	0.09
11	Verify that the client received appropriate procedure education and consents to care and procedures	99.17	119	2.92	0.16	120	2.90	0.16
12	Provide education to clients and staff about client rights and responsibilities	97.20	104	3.14	0.18	107	3.06	0.18
13	Recognize the need for referrals and obtain necessary orders	98.76	159	2.13	0.14	161	2.11	0.14
14	Initiate, evaluate, and update plan of care (e.g., care map, clinical pathway)	93.33	112	3.03	0.17	120	2.83	0.17
15	Maintain client confidentiality and privacy	100.00	107	4.75	0.07	107	4.75	0.07
16	Recognize limitations of self and others and seek assistance	100.00	161	2.94	0.13	161	2.94	0.13
17	Report client conditions as required by law (e.g., abuse/neglect and communicable disease)	81.51	97	1.24	0.19	119	1.01	0.16
18	Manage conflict among clients and health care staff	94.34	100	1.38	0.16	106	1.30	0.15
19	Utilize valid resources to enhance the care provided to a client (e.g., evidenced-based research, information technology, policies and procedures)	100.00	160	2.74	0.13	160	2.74	0.13
20	Recognize ethical dilemmas and take appropriate action	94.12	112	1.53	0.17	119	1.44	0.16
21	Use approved abbreviations and standard terminology when documenting care	100.00	107	4.47	0.12	107	4.47	0.12
22	Organize workload to manage time effectively	99.38	159	4.12	0.11	160	4.09	0.11
23	Practice in a manner consistent with a code of ethics for registered nurses	100.00	118	4.58	0.10	118	4.58	0.10
24	Provide care within the legal scope of practice	99.07	106	4.90	0.06	107	4.85	0.07

Table 11.	Activity Applicability to Setting and Average Frequency of Performance							
Activity		Apply to	Average Fi	requency (Setti	ing-Specific)	Average	Frequency (To	tal Group)
Number	Activity	Setting (%)	N	Avg	Std. Err	N	Avg	Std. Err
25	Provide cost effective care	96.82	152	2.43	0.15	157	2.36	0.15
26	Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions)	99.16	118	4.89	0.05	119	4.85	0.06
27	Protect client from injury (e.g., falls, electrical hazards)	100.00	108	4.23	0.13	108	4.23	0.13
28	Verify appropriateness and/or accuracy of a treatment order	98.73	156	3.19	0.14	158	3.15	0.14
29	Follow procedures for handling biohazardous and hazardous materials	94.96	113	3.19	0.19	119	3.03	0.19
30	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	86.11	93	2.09	0.20	108	1.80	0.19
31	Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	99.37	157	4.02	0.12	158	3.99	0.12
32	Acknowledge and document practice errors (e.g., incident report for medication error)	94.96	113	0.89	0.14	119	0.85	0.13
33	Ensure proper identification of client when providing care	100.00	108	4.69	0.09	108	4.69	0.09
34	Facilitate appropriate and safe use of equipment	98.10	155	3.56	0.14	158	3.49	0.14
35	Educate client on safety issues (e.g., home, school, transportation)	90.76	108	2.42	0.19	119	2.19	0.19
36	Implement emergency response plans (e.g., internal/external disaster, bomb threat, community planning)	72.22	78	0.51	0.10	108	0.37	0.08
37	Follow requirements for use of restraints and/or safety devices (e.g., least restrictive restraints, timed client monitoring)	86.62	136	1.92	0.16	157	1.66	0.15
38	Educate client and staff regarding infection control measures	94.96	113	2.05	0.18	119	1.95	0.17
39	Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	98.15	106	3.20	0.19	108	3.14	0.19
40	Provide prenatal care and education	33.96	54	1.06	0.25	159	0.36	0.09
41	Plan and/or participate in community health education	56.30	67	1.28	0.23	119	0.72	0.14
42	Perform targeted screening assessments (e.g., vision, nutrition)	87.96	95	2.41	0.20	108	2.12	0.19
43	Provide information for prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	76.10	121	1.55	0.16	159	1.18	0.14
44	Provide information about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	90.76	108	2.22	0.17	119	2.02	0.17
45	Provide care and education to a client in labor or antepartum client	31.48	34	0.74	0.25	108	0.23	0.09
46	Provide post-partum care and education	31.45	50	1.44	0.30	159	0.45	0.11
47	Perform comprehensive health assessments	97.48	116	3.93	0.14	119	3.83	0.15

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Activity		Apply to	Average Fr	requency (Setti	ng-Specific)	Average	Frequency (To	tal Group)
Number	Activity	Setting (%)	N	Avg	Std. Err	N	Avg	Std. Err
48	Assess client's readiness to learn, learning preferences and barriers to learning	99.07	107	2.88	0.18	108	2.85	0.18
49	Provide care and education for the newborn less than 1 month old through the infant or toddler client through 2 years	37.11	59	2.10	0.29	159	0.78	0.14
50	Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	42.86	51	1.39	0.25	119	0.60	0.13
51	Provide care and education for the adult client ages 18 through 64 years	94.44	102	4.47	0.11	108	4.22	0.14
52	Provide care and education for the adult client ages 65 through 85 years and over	83.65	133	3.81	0.14	159	3.19	0.16
53	Assess client ability to manage care in home environment and plan care accordingly (e.g., equipment, community resources)	84.03	100	2.07	0.18	119	1.74	0.17
54	Assess and teach clients about health risks based on family, population, and/or community characteristics	93.52	101	2.37	0.19	108	2.21	0.19
55	Assess psychosocial, spiritual and occupational factors affecting care, and plan interventions	96.23	153	2.61	0.15	159	2.51	0.15
56	Assess client for abuse or neglect and intervene as appropriate	88.24	105	1.20	0.18	119	1.06	0.17
57	Assess client for drug/alcohol dependencies, withdrawal, or toxicities and intervene as appropriate	88.89	96	1.94	0.19	108	1.72	0.18
58	Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	90.57	144	2.25	0.17	159	2.04	0.16
59	Provide a therapeutic environment	100.00	119	4.58	0.09	119	4.58	0.09
60	Incorporate client cultural practice and beliefs when planning and providing care	97.22	105	2.87	0.19	108	2.79	0.19
61	Provide end of life care and education to clients	86.79	138	1.36	0.15	159	1.18	0.14
62	Assess the potential for violence and use safety precautions (e.g., suicide, homicide, self-destructive behavior)	88.14	104	1.84	0.19	118	1.62	0.18
63	Assess family dynamics to determine plan of care (e.g., structure, bonding, communication, boundaries, coping mechanisms)	99.07	107	2.90	0.18	108	2.87	0.18
64	Assess client in coping with life changes and provide support (e.g., palliative, amputation, new diagnosis)	95.60	152	1.88	0.14	159	1.80	0.14
65	Use therapeutic communication techniques to provide client support	100.00	119	4.40	0.11	119	4.40	0.11
66	Incorporate behavioral management techniques when caring for a client (e.g., positive reinforcement, setting limits, de-escalation techniques)	97.22	105	2.90	0.18	108	2.81	0.18
67	Recognize non-verbal cues to physical and/or psychological stressors	99.37	158	3.23	0.13	159	3.21	0.13
68	Provide care for a client experiencing visual, auditory or cognitive distortions (e.g., hallucinations)	89.08	106	2.26	0.19	119	2.02	0.18

Table 11.	Activity Applicability to Setting and Average Frequency of Performance							
Activity		Apply to	Average F	requency (Setti	ng-Specific)	Average	Frequency (To	tal Group)
Number	Activity	Setting (%)	N	Avg	Std. Err	N	Avg	Std. Err
69	Assess and intervene in client performance of activities of daily living	96.30	104	3.38	0.17	108	3.25	0.18
70	Provide client nutrition through continuous or intermittent tube feedings	82.39	131	1.81	0.17	159	1.49	0.15
71	Perform post-mortem care	78.99	94	0.61	0.12	119	0.48	0.10
72	Perform irrigations (e.g., of bladder, ear, eye)	79.63	86	1.57	0.20	108	1.25	0.17
73	Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	93.71	149	2.85	0.16	159	2.67	0.16
74	Perform skin assessment and implement measures to maintain skin integrity and prevent skin breakdown (e.g., turning, repositioning, pressure-relieving support surfaces)	94.12	112	4.13	0.13	119	3.89	0.15
75	Assess and manage client with an alteration in elimination (e.g., bowel, urinary)	96.30	104	3.55	0.18	108	3.42	0.19
76	Apply, maintain or remove orthopedic devices (e.g., traction, splints, braces, casts)	68.38	93	0.89	0.15	136	0.61	0.11
77	Apply and maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	85.44	88	1.83	0.21	103	1.56	0.19
78	Provide nonpharmacological comfort measures (e.g., light dimming, warm blanket)	97.83	90	3.82	0.16	92	3.74	0.17
79	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)	77.94	106	0.87	0.15	136	0.68	0.12
80	Manage the client's nutritional intake (e.g., adjust diet, monitor height and weight)	94.17	97	2.42	0.18	103	2.28	0.18
81	Assess client need for sleep/rest and intervene as needed	97.83	90	2.94	0.19	92	2.88	0.19
82	Evaluate client intake and output and intervene as needed	97.78	132	2.95	0.17	135	2.89	0.17
83	Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	89.32	92	2.97	0.20	103	2.65	0.20
84	Assess client need for pain management	100.00	92	4.38	0.14	92	4.38	0.14
85	Evaluate appropriateness and accuracy of medication order for client	99.25	133	3.57	0.14	134	3.54	0.15
86	Prepare and administer medications, using rights of medication administration	97.06	99	4.58	0.12	102	4.44	0.14
87	Perform calculations needed for medication administration	97.83	90	3.30	0.20	92	3.23	0.20
88	Monitor intravenous infusion and maintain site (e.g., central, PICC, epidural and venous access devices)	88.15	119	3.45	0.17	135	3.04	0.18
89	Administer controlled substances within regulatory guidelines (e.g., witness, waste)	95.10	97	3.47	0.18	102	3.30	0.19
90	Handle and maintain medication in a safe and controlled environment	100.00	92	4.66	0.10	92	4.66	0.10
91	Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)	99.26	134	3.52	0.16	135	3.50	0.16

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Activity		Apply to	Average Fr	requency (Setti	ng-Specific)	Average	Frequency (To	tal Group)
Number	Activity	Setting (%)	N	Avg	Std. Err	N	Avg	Std. Err
92	Titrate dosage of medication based on assessment and ordered parameters (e.g., giving insulin according to blood glucose levels, titrating medication to maintain a specific blood pressure)	88.24	90	2.73	0.20	102	2.41	0.20
93	Administer blood products and evaluate client response	84.78	78	1.28	0.21	92	1.09	0.18
94	Access venous access devices, including tunneled, implanted and central lines	77.78	105	2.29	0.20	135	1.78	0.18
95	Educate client about medications	94.12	96	3.20	0.18	102	3.01	0.19
96	Evaluate client response to medication (e.g., therapeutic effects, side effects, adverse reactions)	100.00	92	4.23	0.14	92	4.23	0.14
97	Administer parenteral nutrition and evaluate client response (i.e., TPN)	64.44	87	0.98	0.17	135	0.63	0.12
98	Administer pharmacological measures for pain management	93.14	95	3.82	0.16	102	3.56	0.18
99	Participate in medication reconciliation process	92.39	85	1.91	0.22	92	1.76	0.21
100	Assess and respond to changes in client vital signs	97.78	132	3.50	0.15	135	3.42	0.16
101	Perform focused assessment	98.04	100	3.88	0.15	102	3.80	0.15
102	Monitor the results of diagnostic testing and intervene as needed	89.13	82	3.15	0.20	92	2.80	0.20
103	Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)	97.04	131	3.68	0.15	135	3.57	0.16
104	Evaluate responses to procedures and treatments	98.04	100	3.87	0.16	102	3.79	0.17
105	Provide preoperative and postoperative education	82.61	76	2.20	0.23	92	1.82	0.21
106	Provide preoperative care	69.63	94	1.26	0.19	135	0.87	0.14
107	Manage client during and/or following a procedure with moderate sedation	79.21	80	1.54	0.21	101	1.22	0.18
108	Obtain blood specimens peripherally or through central line	78.26	72	1.81	0.24	92	1.41	0.21
109	Use precautions to prevent injury and/or complications associated with a procedure or diagnosis	97.78	132	2.78	0.17	135	2.72	0.17
110	Educate client about treatments and procedures	98.04	100	3.11	0.18	102	3.05	0.18
111	Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)	93.48	86	2.20	0.22	92	2.05	0.21
112	Insert, maintain or remove a gastric tube	70.37	95	1.02	0.17	135	0.72	0.13
113	Insert, maintain or remove a urinary catheter	88.12	89	2.13	0.20	101	1.88	0.19
114	Insert, maintain or remove a peripheral intravenous line	89.13	82	2.82	0.23	92	2.51	0.22
115	Recognize trends and changes in client condition and intervene as needed	98.52	133	3.06	0.16	135	3.01	0.16
116	Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	82.18	83	1.65	0.21	101	1.36	0.19

Table 11.	Activity Applicability to Setting and Average Frequency of Performance							
Activity		Apply to	Average Fr	equency (Setti	ng-Specific)	Average	Frequency (Tot	al Group)
Number	Activity	Setting (%)	N	Avg	Std. Err	N	Avg	Std. Err
117	Perform emergency care procedures (e.g., cardio-pulmonary resuscitation, respiratory support, automated external defibrillator)	83.70	77	0.51	0.15	92	0.42	0.12
118	Monitor and care for clients on a ventilator	36.30	49	1.00	0.27	135	0.36	0.10
119	Perform wound care or dressing change	93.14	95	2.38	0.19	102	2.22	0.19
120	Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	61.96	57	0.47	0.14	92	0.29	0.09
121	Provide ostomy care and education (e.g., tracheal, enteral)	76.30	103	1.41	0.18	135	1.07	0.15
122	Provide postoperative care	64.71	66	1.52	0.24	102	0.98	0.17
123	Perform and manage care of client receiving peritoneal dialysis	45.65	42	0.31	0.10	92	0.14	0.05
124	Perform hemodialysis or continuous renal replacement therapy	23.70	32	0.53	0.25	135	0.13	0.06
125	Perform suctioning (e.g., oral, nasopharyngeal, endotracheal, tracheal)	79.41	81	1.36	0.21	102	1.08	0.18
126	Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	82.61	76	1.71	0.23	92	1.41	0.20
127	Manage the care of a client on telemetry	48.89	66	2.05	0.26	135	1.00	0.16
128	Manage the care of a client with impaired ventilation/oxygenation	83.33	85	2.28	0.20	102	1.90	0.19
129	Maintain optimal temperature of client (e.g., cooling and/or warming blanket)	97.83	90	2.68	0.21	92	2.62	0.21
130	Implement and monitor phototherapy	31.58	42	0.33	0.15	133	0.11	0.05
131	Manage the care of a client with a pacing device (e.g., pacemaker, vagus nerve stimulator)	70.59	72	1.03	0.17	102	0.73	0.13
132	Monitor and maintain arterial lines	57.61	53	1.38	0.27	92	0.79	0.17
133	Manage the care of the client with a fluid and electrolyte imbalance	91.11	123	2.37	0.18	135	2.16	0.17
134	Manage the care of a client with alteration in hemodynamics, tissue perfusion and hemostasis (e.g., cerebral, cardiac, peripheral)	73.53	75	1.80	0.22	102	1.32	0.18
135	Evaluate the effectiveness of the treatment regimen for a client with an acute or chronic diagnosis	93.48	86	3.23	0.20	92	3.02	0.21
136	Identify pathophysiology related to an acute or chronic condition (e.g., signs and symptoms)	97.78	132	2.92	0.17	135	2.86	0.17
137	Manage the care of a client receiving hemodialysis	51.49	52	0.94	0.22	101	0.49	0.12
138	Recognize signs and symptoms of complications and intervene appropriately when providing client care	100.00	91	3.10	0.21	91	3.10	0.21
139	Educate client regarding an acute or chronic condition	96.30	130	2.91	0.17	135	2.80	0.17

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Table 12.	Average Total Group and Setting-Specific Importance Ratings							
Activity			erage Import etting-Speci		Average Importance (Total Group)			
Number	Activity	N	Avg	Std. Err	N	Avg	Std. Err	
1	Perform procedures necessary to safely admit, transfer or discharge a client	152	4.26	0.06	161	4.18	0.07	
2	Provide and receive hand off of care (report) on assigned clients	117	4.51	0.06	119	4.51	0.06	
3	Assign and supervise care provided by others (e.g., LPN/VN, assistive personnel, other RNs)	97	3.71	0.10	108	3.71	0.09	
4	Advocate for client rights and needs	160	4.48	0.05	161	4.47	0.05	
5	Prioritize the delivery of client care	116	4.63	0.05	117	4.63	0.05	
6	Participate in performance improvement/quality improvement process	99	3.74	0.08	108	3.70	0.09	
7	Collaborate with interprofessional team members when providing client care (e.g., language interpreter, health care professionals)	159	4.47	0.05	160	4.47	0.05	
8	Receive and/or transcribe health care provider orders	112	4.48	0.06	115	4.45	0.07	
9	Integrate advance directives into client plan of care	91	3.86	0.09	104	3.76	0.10	
10	Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)	142	4.20	0.07	157	4.18	0.07	
11	Verify that the client received appropriate procedure education and consents to care and procedures	117	4.34	0.07	117	4.34	0.07	
12	Provide education to clients and staff about client rights and responsibilities	101	4.21	0.08	104	4.19	0.08	
13	Recognize the need for referrals and obtain necessary orders	157	4.08	0.06	159	4.08	0.06	
14	Initiate, evaluate, and update plan of care (e.g., care map, clinical pathway)	109	3.99	0.08	115	3.95	0.08	
15	Maintain client confidentiality and privacy	105	4.80	0.04	105	4.80	0.04	
16	Recognize limitations of self and others and seek assistance	159	4.50	0.05	159	4.50	0.05	
17	Report client conditions as required by law (e.g., abuse/neglect and communicable disease)	94	4.49	0.07	112	4.45	0.07	
18	Manage conflict among clients and health care staff	96	3.90	0.08	102	3.89	0.08	
19	Utilize valid resources to enhance the care provided to a client (e.g., evidenced-based research, information technology, policies and procedures)	157	4.20	0.05	157	4.20	0.05	
20	Recognize ethical dilemmas and take appropriate action	106	4.17	0.09	113	4.17	0.08	
21	Use approved abbreviations and standard terminology when documenting care	105	4.00	0.09	105	4.00	0.09	
22	Organize workload to manage time effectively	157	4.36	0.06	158	4.35	0.06	
23	Practice in a manner consistent with a code of ethics for registered nurses	115	4.68	0.04	115	4.68	0.04	
24	Provide care within the legal scope of practice	104	4.85	0.05	105	4.82	0.06	
25	Provide cost effective care	150	3.28	0.08	154	3.23	0.08	

Table 12. Average Total Group and Setting-Specific Importance Ratings										
Activity		Average Importance (Setting-Specific)			Average Importance (Total Group)					
Number	Activity	N	Avg	Std. Err	N	Avg	Std. Err			
26	Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions)	114	4.81	0.04	115	4.81	0.04			
27	Protect client from injury (e.g., falls, electrical hazards)	106	4.76	0.05	106	4.76	0.05			
28	Verify appropriateness and/or accuracy of a treatment order	153	4.56	0.05	155	4.56	0.05			
29	Follow procedures for handling biohazardous and hazardous materials	110	4.45	0.06	113	4.42	0.06			
30	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	90	4.14	0.09	104	4.17	0.08			
31	Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	156	4.28	0.06	157	4.27	0.06			
32	Acknowledge and document practice errors (e.g., incident report for medication error)	108	4.33	0.07	113	4.30	0.08			
33	Ensure proper identification of client when providing care	105	4.89	0.04	105	4.89	0.04			
34	Facilitate appropriate and safe use of equipment	153	4.24	0.06	156	4.22	0.06			
35	Educate client on safety issues (e.g., home, school, transportation)	104	4.02	0.08	110	3.94	0.08			
36	Implement emergency response plans (e.g., internal/external disaster, bomb threat, community planning)	74	3.81	0.10	101	3.75	0.10			
37	Follow requirements for use of restraints and/or safety devices (e.g., least restrictive restraints, timed client monitoring)	135	4.13	0.06	152	4.00	0.07			
38	Educate client and staff regarding infection control measures	107	4.11	0.08	111	4.12	0.07			
39	Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	104	4.51	0.07	106	4.50	0.07			
40	Provide prenatal care and education	53	3.68	0.15	138	3.51	0.11			
41	Plan and/or participate in community health education	62	3.73	0.12	103	3.64	0.10			
42	Perform targeted screening assessments (e.g., vision, nutrition)	94	3.80	0.10	106	3.69	0.10			
43	Provide information for prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	120	3.85	0.08	149	3.75	0.08			
44	Provide information about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	105	3.89	0.08	111	3.86	0.08			
45	Provide care and education to a client in labor or antepartum client	32	3.72	0.18	99	3.31	0.14			
46	Provide post-partum care and education	47	4.09	0.12	138	3.62	0.12			
47	Perform comprehensive health assessments	113	4.60	0.05	113	4.60	0.05			
48	Assess client's readiness to learn, learning preferences and barriers to learning	104	3.88	0.08	105	3.89	0.08			
49	Provide care and education for the newborn less than 1 month old through the infant or toddler client through 2 years	57	4.25	0.10	141	3.70	0.11			
50	Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	50	3.72	0.13	102	3.69	0.10			
51	Provide care and education for the adult client ages 18 through 64 years	98	4.16	0.07	103	4.10	0.08			

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ACTIVITY STATEMENT PERFORMANCE FINDINGS

Table 12. Average Total Group and Setting-Specific Importance Ratings									
Activity Number	Activity	Average Importance (Setting-Specific)			Average Importance (Total Group)				
		N	Avg	Std. Err	N	Avg	Std. Err		
52	Provide care and education for the adult client ages 65 through 85 years and over	130	4.16	0.05	150	3.99	0.07		
53	Assess client ability to manage care in home environment and plan care accordingly (e.g., equipment, community resources)	94	4.10	0.08	107	4.10	0.08		
54	Assess and teach clients about health risks based on family, population, and/or community characteristics	97	3.73	0.08	103	3.67	0.09		
55	Assess psychosocial, spiritual and occupational factors affecting care, and plan interventions	149	3.91	0.06	155	3.90	0.06		
56	Assess client for abuse or neglect and intervene as appropriate	100	4.26	0.08	109	4.23	0.08		
57	Assess client for drug/alcohol dependencies, withdrawal, or toxicities and intervene as appropriate	92	4.02	0.10	103	3.94	0.10		
58	Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	140	4.04	0.06	153	4.01	0.06		
59	Provide a therapeutic environment	115	4.19	0.07	115	4.19	0.07		
60	Incorporate client cultural practice and beliefs when planning and providing care	102	3.97	0.09	105	3.96	0.09		
61	Provide end of life care and education to clients	134	4.16	0.06	151	4.10	0.07		
62	Assess the potential for violence and use safety precautions (e.g., suicide, homicide, self-destructive behavior)	100	4.29	0.08	110	4.28	0.08		
63	Assess family dynamics to determine plan of care (e.g., structure, bonding, communication, boundaries, coping mechanisms)	105	3.89	0.08	106	3.89	0.08		
64	Assess client in coping with life changes and provide support (e.g., palliative, amputation, new diagnosis)	150	4.19	0.06	157	4.17	0.06		
65	Use therapeutic communication techniques to provide client support	116	4.30	0.07	116	4.30	0.07		
66	Incorporate behavioral management techniques when caring for a client (e.g., positive reinforcement, setting limits, de-escalation techniques)	102	3.90	0.09	105	3.87	0.09		
67	Recognize non-verbal cues to physical and/or psychological stressors	156	4.22	0.05	157	4.22	0.05		
68	Provide care for a client experiencing visual, auditory or cognitive distortions (e.g., hallucinations)	98	4.09	0.09	108	4.06	0.09		
69	Assess and intervene in client performance of activities of daily living	103	3.83	0.08	105	3.83	0.08		
70	Provide client nutrition through continuous or intermittent tube feedings	128	4.13	0.07	152	3.99	0.08		
71	Perform post-mortem care	88	3.82	0.09	108	3.82	0.09		
72	Perform irrigations (e.g., of bladder, ear, eye)	80	3.74	0.10	100	3.53	0.10		
73	Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	145	4.04	0.05	154	4.01	0.05		
74	Perform skin assessment and implement measures to maintain skin integrity and prevent skin breakdown (e.g., turning, repositioning, pressure-relieving support surfaces)	108	4.53	0.06	113	4.51	0.06		

Table 12.	Average Total Group and Setting-Specific Importance Ratings						
Activity		Average Importance (Setting-Specific)		Average Importance (Total Group)			
Number	Activity	N	Avg	Std. Err	N	Avg	Std. Err
75	Assess and manage client with an alteration in elimination (e.g., bowel, urinary)	100	4.21	0.08	103	4.15	0.09
76	Apply, maintain or remove orthopedic devices (e.g., traction, splints, braces, casts)	90	3.51	0.10	126	3.41	0.09
77	Apply and maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	85	4.01	0.10	95	3.98	0.09
78	Provide nonpharmacological comfort measures (e.g., light dimming, warm blanket)	88	3.64	0.09	90	3.62	0.09
79	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)	103	3.30	0.09	131	3.10	0.09
80	Manage the client's nutritional intake (e.g., adjust diet, monitor height and weight)	94	3.94	0.09	95	3.95	0.09
81	Assess client need for sleep/rest and intervene as needed	88	3.68	0.11	90	3.66	0.11
82	Evaluate client intake and output and intervene as needed	131	4.29	0.06	134	4.28	0.06
83	Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	87	4.10	0.08	95	4.04	0.09
84	Assess client need for pain management	91	4.51	0.07	91	4.51	0.07
85	Evaluate appropriateness and accuracy of medication order for client	132	4.71	0.05	133	4.71	0.05
86	Prepare and administer medications, using rights of medication administration	96	4.82	0.04	98	4.79	0.05
87	Perform calculations needed for medication administration	88	4.67	0.07	90	4.62	0.08
88	Monitor intravenous infusion and maintain site (e.g., central, PICC, epidural and venous access devices)	118	4.47	0.06	130	4.42	0.07
89	Administer controlled substances within regulatory guidelines (e.g., witness, waste)	93	4.51	0.06	97	4.46	0.07
90	Handle and maintain medication in a safe and controlled environment	91	4.76	0.06	91	4.76	0.06
91	Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)	132	4.67	0.05	133	4.68	0.05
92	Titrate dosage of medication based on assessment and ordered parameters (e.g., giving insulin according to blood glucose levels, titrating medication to maintain a specific blood pressure)	87	4.69	0.06	95	4.65	0.07
93	Administer blood products and evaluate client response	76	4.70	0.07	90	4.50	0.10
94	Access venous access devices, including tunneled, implanted and central lines	105	4.26	0.07	131	4.11	0.08
95	Educate client about medications	93	4.19	0.07	96	4.18	0.07
96	Evaluate client response to medication (e.g., therapeutic effects, side effects, adverse reactions)	90	4.56	0.06	90	4.56	0.06
97	Administer parenteral nutrition and evaluate client response (i.e., TPN)	84	4.25	0.08	127	3.98	0.10
98	Administer pharmacological measures for pain management	91	4.42	0.06	95	4.38	0.07

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Table 12.	Average Total Group and Setting-Specific Importance Ratings							
Activity			Average Importance (Setting-Specific)			Average Importance (Total Group)		
Number	Activity	N	Avg	Std. Err	N	Avg	Std. Err	
99	Participate in medication reconciliation process	82	4.00	0.11	88	3.97	0.10	
100	Assess and respond to changes in client vital signs	130	4.72	0.05	133	4.71	0.05	
101	Perform focused assessment	96	4.42	0.07	97	4.42	0.07	
102	Monitor the results of diagnostic testing and intervene as needed	81	4.14	0.10	90	4.08	0.10	
103	Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)	129	4.42	0.06	133	4.42	0.06	
104	Evaluate responses to procedures and treatments	93	4.34	0.08	95	4.32	0.08	
105	Provide preoperative and postoperative education	74	4.07	0.10	88	3.92	0.12	
106	Provide preoperative care	91	3.90	0.08	123	3.78	0.09	
107	Manage client during and/or following a procedure with moderate sedation	73	4.41	0.09	91	4.32	0.10	
108	Obtain blood specimens peripherally or through central line	70	3.91	0.09	88	3.73	0.10	
109	Use precautions to prevent injury and/or complications associated with a procedure or diagnosis	130	4.19	0.07	133	4.18	0.07	
110	Educate client about treatments and procedures	94	4.17	0.07	95	4.18	0.07	
111	Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)	85	3.81	0.09	90	3.77	0.09	
112	Insert, maintain or remove a gastric tube	94	3.86	0.09	126	3.71	0.10	
113	Insert, maintain or remove a urinary catheter	85	3.98	0.09	96	3.90	0.09	
114	Insert, maintain or remove a peripheral intravenous line	81	4.04	0.09	89	3.92	0.11	
115	Recognize trends and changes in client condition and intervene as needed	131	4.68	0.04	133	4.65	0.05	
116	Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	80	4.23	0.09	93	4.17	0.09	
117	Perform emergency care procedures (e.g., cardio-pulmonary resuscitation, respiratory support, automated external defibrillator)	74	4.77	0.06	87	4.76	0.06	
118	Monitor and care for clients on a ventilator	47	4.30	0.15	114	4.09	0.12	
119	Perform wound care or dressing change	93	4.09	0.07	96	4.09	0.06	
120	Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	54	3.94	0.15	85	3.78	0.13	
121	Provide ostomy care and education (e.g., tracheal, enteral)	101	3.90	0.08	129	3.77	0.08	
122	Provide postoperative care	62	4.24	0.11	88	4.23	0.10	
123	Perform and manage care of client receiving peritoneal dialysis	40	3.55	0.19	82	3.55	0.15	
124	Perform hemodialysis or continuous renal replacement therapy	31	4.10	0.18	113	3.71	0.12	

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Table 12.	Average Total Group and Setting-Specific Importance Ratings						
Activity			erage Import etting-Speci		Average In	nportance (T	otal Group)
Number	Activity	N	Avg	Std. Err	N	Avg	Std. Err
125	Perform suctioning (e.g., oral, nasopharyngeal, endotracheal, tracheal)	77	4.21	0.09	92	4.18	0.09
126	Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	72	3.71	0.13	84	3.57	0.13
127	Manage the care of a client on telemetry	65	4.15	0.12	118	3.82	0.12
128	Manage the care of a client with impaired ventilation/oxygenation	80	4.63	0.08	93	4.59	0.08
129	Maintain optimal temperature of client (e.g., cooling and/or warming blanket)	87	3.64	0.10	89	3.65	0.10
130	Implement and monitor phototherapy	40	3.50	0.21	113	3.35	0.12
131	Manage the care of a client with a pacing device (e.g., pacemaker, vagus nerve stimulator)	67	4.21	0.09	89	4.15	0.10
132	Monitor and maintain arterial lines	49	4.12	0.12	82	3.80	0.13
133	Manage the care of the client with a fluid and electrolyte imbalance	121	4.43	0.07	129	4.40	0.07
134	Manage the care of a client with alteration in hemodynamics, tissue perfusion and hemostasis (e.g., cerebral, cardiac, peripheral)	71	4.46	0.07	89	4.39	0.09
135	Evaluate the effectiveness of the treatment regimen for a client with an acute or chronic diagnosis	85	4.26	0.07	89	4.20	0.08
136	Identify pathophysiology related to an acute or chronic condition (e.g., signs and symptoms)	130	4.32	0.06	132	4.30	0.06
137	Manage the care of a client receiving hemodialysis	47	4.13	0.13	83	4.13	0.12
138	Recognize signs and symptoms of complications and intervene appropriately when providing client care	89	4.69	0.07	89	4.69	0.07
139	Educate client regarding an acute or chronic condition	127	4.15	0.06	132	4.14	0.06

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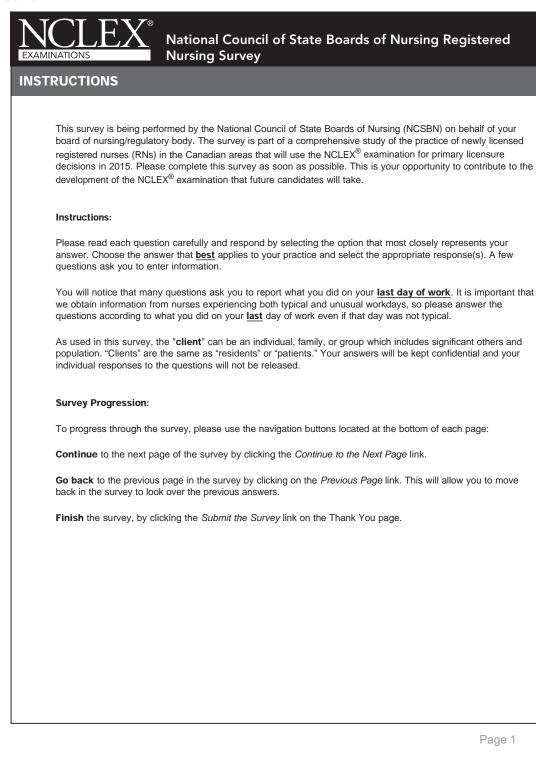
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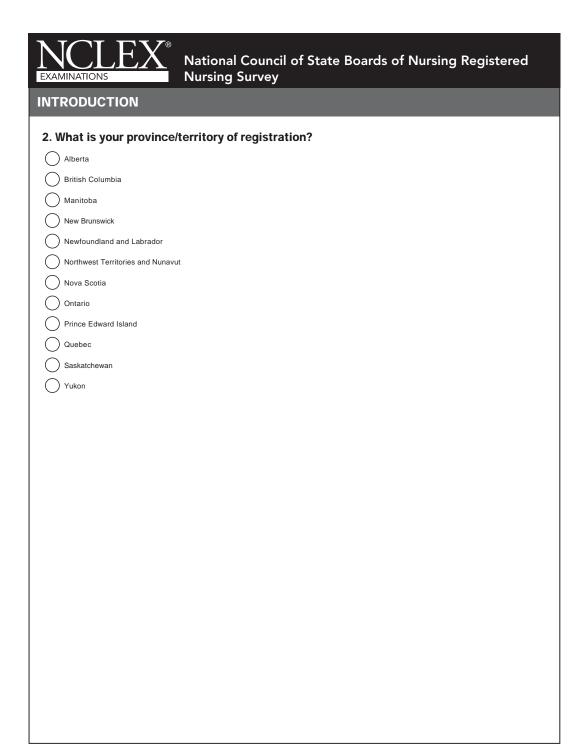
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APPENDIX A: 2014 CANADIAN RN PRACTICE ANALYSIS SURVEY

Web Form 1



NCLEX® EXAMINATIONS	National Council of State Boards of Nursing Registere Nursing Survey	d
INTRODUCTION		
	sing license do you hold? (Select ALL that apply)	
	Page	э 2





INTRODUCTION

3. Are you currently working as an RN in Canada?

Yes



INTRODUCTION

Ve:

4. In your current position, do you provide direct care to clients? (*Note: Faculty supervision of student clinical experiences is not considered "direct care."*)

Yes, 20 or more hours per week, on average

Yes, less than 20 hours per week, on average



SECTION 1: NURSING ACTIVITIES

This section contains a list of activities descriptive of nursing practice in a variety of settings. Please note that some activities may not apply to your setting. For each activity, two questions are asked. Please answer both questions.

QUESTION A - FREQUENCY: If the activity is performed in your work setting, how often (0 Times, 1 Time, 2 Times, 3 Times, 4 Times, or 5+ Times) did you personally perform the activity on the last day you worked? If it is never performed in your work setting or is not applicable, then select "NEVER performed in work setting" and then respond to Question B - Importance.

QUESTION B - IMPORTANCE: How important is performing this nursing activity in regard to client safety? Consider the importance with regard to the risk of unnecessary complications, impairment of function, or serious distress to clients. Rate all activities.

NOTE: Inclusion of an activity on this practice analysis survey does not imply that the activity is or would be included in the RN scope of practice defined by any specific jurisdiction. You must refer to your local board of nursing/regulatory body for information about your scope of practice.



Question A – FREQUENCY - <u>If an activity does not apply to your work setting</u>, choose "Never performed in work setting", still select the importance rating as noted in Question B and then move on to the next activity. <u>If an activity is performed in your</u> <u>work setting</u> select 0-5+ reflecting the frequency of performing the activity on your <u>last day of work</u>, then complete Question B.

Question B – IMPORTANCE - Rate the overall importance of this activity considering client safety, and/or threat of complications or distress with 1 = Not Important, 2 = Minimally Important, 3 = Moderately Important, 4 = Important, 5 = Critically Important.

	A - Frequency	B - Importance
1 Perform procedures necessary to safely admit, transfer or discharge a client		
2 Advocate for client rights and needs		
3 Collaborate with interprofessional team members when providing client care (e.g., language interpreter, health care professionals)		
4 Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)		
5 Recognize the need for referrals and obtain necessary orders		
6 Recognize limitations of self and others and seek assistance		
7 Utilize valid resources to enhance the care provided to a client (e.g., evidenced-based research, information technology, policies and procedures)		
8 Organize workload to manage time effectively		
9 Provide cost effective care		
10 Verify appropriateness and/or accuracy of a treatment order		
11 Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)		
12 Facilitate appropriate and safe use of equipment		
13 Follow requirements for use of restraints and/or safety devices (e.g., least restrictive restraints, timed client monitoring)		
14 Provide prenatal care and education		
15 Provide information for prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)		
16 Provide post-partum care and education		
17 Provide care and education for the newborn less than 1 month old through the infant or toddler client		



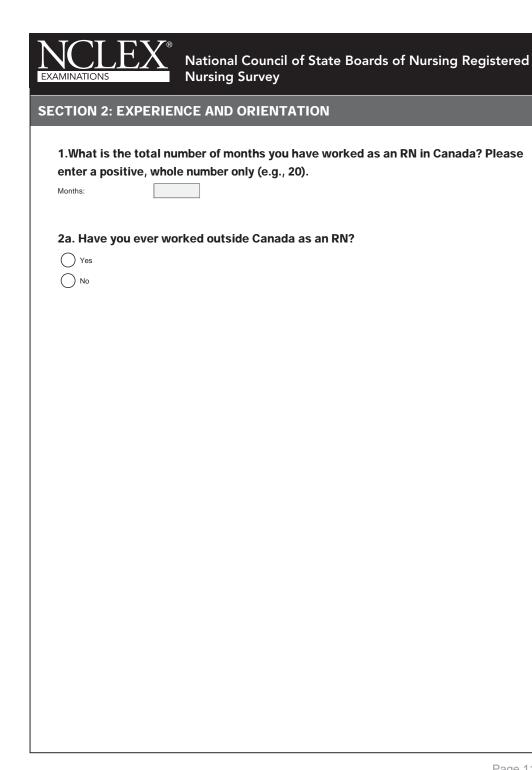
through 2 years	
18 Provide care and education for the adult client ages 65 through 85 years and over	
19 Assess psychosocial, spiritual and occupational factors affecting care, and plan interventions	
20 Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	
21 Provide end of life care and education to clients	
22 Assess client in coping with life changes and provide support (e.g., palliative, amputation, new diagnosis)	
23 Recognize non-verbal cues to physical and/or psychological stressors	
24 Provide client nutrition through continuous or intermittent tube feedings	
25 Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	
sensory impairment (e.g., assistive devices,	



SECTION 1: NURSING ACTIVITIES

	A - Frequency	B - Importance
26 Apply, maintain or remove orthopedic devices (e.g., traction, splints, braces, casts)		
27 Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)		
28 Evaluate client intake and output and intervene as needed		
29 Evaluate appropriateness and accuracy of medication order for client		
30 Monitor intravenous infusion and maintain site (e.g., central, PICC, epidural and venous access devices)		
31 Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)		
32 Access venous access devices, including tunneled, implanted and central lines		
33 Administer parenteral nutrition and evaluate client response (i.e., TPN)		
34 Assess and respond to changes in client vital signs		
35 Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)		
36 Provide preoperative care		
37 Use precautions to prevent injury and/or complications associated with a procedure or diagnosis		
38 Insert, maintain or remove a gastric tube		
39 Recognize trends and changes in client condition and intervene as needed		
40 Monitor and care for clients on a ventilator		
41 Provide ostomy care and education (e.g., tracheal, enteral)		
42 Perform hemodialysis or continuous renal replacement therapy		
43 Manage the care of a client on telemetry		
44 Implement and monitor phototherapy		
45 Manage the care of the client with a fluid and electrolyte imbalance		
46 Identify pathophysiology related to an acute or chronic condition (e.g., signs and symptoms)		

EXAMINATIONS National Council of State Boards of Nursing Registered Nursing Survey
47 Educate client regarding an acute or chronic condition
48. How well did the survey cover the important activities a newly licensed RN should possess, regardless of the practice setting?
Very well Well
Adequately Poorly
49. Please list any important activities you believe are missing from the survey





SECTION 2: EXPERIENCE AND ORIENTATION

2b. If yes, what is the total number of months you worked outside Canada as an RN? Please enter a positive, whole number only (e.g., 7).

Months:



SECTION 2: EXPERIENCE AND ORIENTATION

3. Which of the following <u>best</u> describes the orientation you received for your current position? (Select only ONE)

No formal orientation
Classroom instruction/skills lab work only
Classroom and/or skills lab plus supervised work with clients
Work with an assigned preceptor(s) or mentor(s) with or without additional classroom or skills lab work
A formal internship/residency with or without additional classroom or skills lab work
Other (please specify):



SECTION 2: EXPERIENCE AND ORIENTATION

4. If you had an orientation period, how many weeks was it? Please enter a positive, whole number only (e.g., 10).

Weeks:



SECTION 2: EXPERIENCE AND ORIENTATION

5. Which of the following types of certificates have you earned or courses completed since you have concluded your nursing course requirements? (Select ALL that apply)



SECTION 2: EXPERIENCE AND ORIENTATION

6a. Do you routinely have administrative responsibilities within your nursing position (e.g., Unit Manager, Team Leader, Charge Nurse, Coordinator)?

◯ Yes



SECTION 2: EXPERIENCE AND ORIENTATION

6b. If yes, is this your primary position?

◯ Yes

O No



1. Which of the following <u>best</u> describes <u>most</u> of your clients on the last day you worked? (Select ALL that apply)

Well clients, possibly with minor illnesses
OB (Maternity) clients
Clients with stabilized chronic conditions
Clients with unstabilized chronic conditions
Clients with acute conditions, including clients with medical, surgical or critical conditions
Clients at end-of-life
Clients with behavioral/emotional conditions
Other (please specify)

2. Which of the following <u>best</u> describes the ages of <u>most</u> of your clients on the last day you worked? (Select ALL that apply)

Newborn (less than 1 month)
Infant/toddler (1 month-2 years)
Preschool (ages 3-5)
School Age (ages 6-12)
Adolescent (ages 13-17)
Adult (ages 18-64)
Adult (ages 65-85)
Adult (over age 85)

National Council of MINATIONS Nursing Survey	State Boards of Nursing Registered
3. Which of the following choices <u>best</u> descr area <u>on the last day you worked</u> ? If you worl appropriate choice for that one setting. If yo the appropriate choices for all settings wher (Select no more than TWO answers)	ked mainly in one setting, select the u worked in more than one setting, select
Critical care (e.g., ICU, CCU, step-down units, pediatric/neonatal intensive care, emergency department, post-anesthesia recovery unit) Medical-surgical unit or any of its sub-specialties (e.g., oncology, orthopedics, neurology) Pediatrics Nursery Labor and delivery Postpartum unit Psychiatry or any of its sub-specialties (e.g., detox) Assisted Living Operating room, including outpatient surgery and surgicenters Nursing home, skilled or intermediate care Other long-term care (e.g., residential care, developmental disability) Rehabilitation	Subacute unit Transitional care unit Physician/Advanced Practice RN/Nurse Practitioner (NP)/Dentiss office Occupational health Outpatient clinic Home health, including visiting nurses associations Public health Student/school health Hospice care Prison/Correctional Facility/Jail Short Stay/Observational Step-down/Progressive Care
Conter (please specify) Conter (please specify) Community-based or ambulatory care facility/organization (incluinealth, physician/Advanced Practice RN/Nurse Practitioner (NP)/dentise Cother (please specify)	d? (Select only ONE)

EXAMINATIONS	National Council of State Boards of Nursing Registered Nursing Survey
5. If you work in a hos	pital or nursing home, how large is it? (Select only ONE)
Less than 50 beds	
50-99 beds	
100-299 beds	
300-499 beds	
500 or more beds	
I do not know	
I do not work in a hospital or i	nursing home
6. Which of the followi	ng <u>best</u> describes your shift <u>on a typical work day</u> ? (Select only
ONE)	
Days	
Evenings	
Nights	
Rotating shifts	
Other (please specify)	
7. What is the length o	f your shift <u>on a typical work day</u> ? (Select only ONE)
8 hours	
0 10 hours	
12 hours	
Varied 8 hours and 12 hours	
Other (please specify)	
8. Which <u>best</u> describe	es the location of your employment setting?
Urban/Metropolitan area	
Suburban	
~ 	



SECTION 4: DESCRIPTION OF YOUR LAST DAY OF WORK

How many hours did you work on the <u>last shift you worked</u>? Please enter a positive, whole number only and round up (e.g., 20).
 Hours:
 Hours clients were you responsible for on the <u>last day you worked</u>? This includes clients to whom you were assigned to provide direct care, indirect care (provided through others such as RPN/LPNs or unlicensed assistive personnel), or any performance of tasks or other responsibility for care during all or any part of your time in the work setting. Please enter a positive, whole number only and round up (e.g., 5).

Number of clients:



3. How much of your time was spent performing each of the following types of activities on the <u>last day you worked</u>? For each of the sets of activities please rate the approximate amount of time you spent on that type of activity <u>on the last day you worked</u> rounded to the nearest hour. For example, if you spent about 2 and ¼ hours on a set of activities, select the option "2". If you spent 3 and ¾ hours on a set of activities, select the option "2". If you spent 3 and ¾ hours on a set of activities, select the option "4." Numerous categories may be performed simultaneously; therefore total hours spent may be greater than total hours or shift worked.

Sets of Activities

Approximate Amount of Time	e (Hours) Spent on Set of Activities
	0 1 2 3 4 5 6 7 8 8+
1. Management of Care: Provide and direct nursing care that enhances the care delivery setting to protect clients and health care personnel.	00000000000
 Safety and Infection Control: Protect clients and health care personnel from health and environmental hazards. 	0000000000
 Health Promotion and Maintenance: Provide and direct nursing care of the client that incorporates the knowledge of expected growth and development principles, prevention and/or early detection of health problems, and strategies to achieve optimal health. 	000000000000000
4. Psychosocial Integrity: Provide and direct nursing care that promotes and supports the emotional, mental and social well being of the client experiencing stressful events, as well as clients with acute or chronic mental illness.	0000000000
5. Basic Care and Comfort: Provide comfort and assistance in the performance of activities of daily living.	0000000000
 Pharmacological and Parenteral Therapies: Provide care related to the administration of medications and parenteral therapies. 	0000000000
 Reduction of Risk Potential: Reduce the likelihood that clients will develop complications or health problems related to existing conditions, treatments or procedures. 	0000000000
 Physiological Adaptation: Manage and provide care for clients with acute, chronic or life threatening physical health conditions. 	0000000000



SECTION 5: DEMOGRAPHIC INFORMATION

In this section you are asked to provide background information that will be summarized to describe the group that completed this survey. No individual responses will be reported.

1a. Did you work as an unlicensed assistive personnel prior to becoming an RN?

\bigcirc	Yes
\sim	

() No



SECTION 5: DEMOGRAPHIC INFORMATION

1b. If yes, for how many years and months? Please enter positive, whole numbers (e.g., 10).

	,
Years:	
Months:	



SECTION 5: DEMOGRAPHIC INFORMATION

2a. Did you work as an RPN/LPN prior to becoming an RN?

\bigcirc	Yes
\sim	

()	No
----	----



SECTION 5: DEMOGRAPHIC INFORMATION

2b. If yes, for how many years and months? Please enter positive, whole numbers (e.g., 10).

Years:	
Months:	



SECTION 5: DEMOGRAPHIC INFORMATION

3. What is your gender?

O Male

🔵 Female

4. What is your age in years? Please answer with a positive, whole numbers (e.g., 35).

5. Which of the following is <u>most descriptive</u> of your racial/ethnic background? (Select only ONE)

-
North American Indian
Me'tis
Inuit (Eskimo)
White
Chinese
O South Asian (e.g. East Indian, Pakistani, Sri Lankan, etc.)
Black
C Filipino
Latin American
O Southeast Asian (e.g. Vietnamese, Cambodian, Malaysian, Laotian, etc.)
Arab
West Asian (e.g. Iranian, Afghan, etc.)
◯ Korean
Japanese
Other

EXAMINATIONS	National Council of State Boards of Nursing Registered Nursing Survey
6. What is your primar	y language?
English	
French	
English and another languag	e
French and another language	9
Another language	
Any nursing program NOT loc	e in Canada nada (e.g., ND) cated in Canada
Other program (please specify	y)
8. How many months I	has it been since you completed course requirements from the
above nursing education	ion program? Please enter a positive, whole number (e.g., 15)



SECTIONS 6: COMMENTS

If we need additional information in order to clarify the results of this study, we may call and/or e-mail some participants. If you would be willing to answer a few additional questions by phone or e-mail, please provide a number where you can be reached during the day or early evening.

Name:	
Daytime or Early Evening	
Phone Number with Area	
Code:	
E-mail address:	

You may write any comments or suggestions that you have in the space below.

Page 29

۵.



Thank you!

Thank you for your participation in this important study.

To finalize your survey, please click the **Submit Survey** button below.

Web Form 2



National Council of State Boards of Nursing Registered Nursing Survey

INSTRUCTIONS

This survey is being performed by the National Council of State Boards of Nursing (NCSBN) on behalf of your board of nursing/regulatory body. The survey is part of a comprehensive study of the practice of newly licensed registered nurses (RNs) in the Canadian areas that will use the NCLEX[®] examination for primary licensure decisions in 2015. Please complete this survey as soon as possible. This is your opportunity to contribute to the development of the NCLEX[®] examination that future candidates will take.

Instructions:

Please read each question carefully and respond by selecting the option that most closely represents your answer. Choose the answer that <u>best</u> applies to your practice and select the appropriate response(s). A few questions ask you to enter information.

You will notice that many questions ask you to report what you did on your <u>last day of work</u>. It is important that we obtain information from nurses experiencing both typical and unusual workdays, so please answer the questions according to what you did on your <u>last</u> day of work even if that day was not typical.

As used in this survey, the "client" can be an individual, family, or group which includes significant others and population. "Clients" are the same as "residents" or "patients." Your answers will be kept confidential and your individual responses to the questions will not be released.

Survey Progression:

To progress through the survey, please use the navigation buttons located at the bottom of each page:

Continue to the next page of the survey by clicking the Continue to the Next Page link.

Go back to the previous page in the survey by clicking on the *Previous Page* link. This will allow you to move back in the survey to look over the previous answers.

Finish the survey, by clicking the Submit the Survey link on the Thank You page.

NCLEX® EXAMINATIONS	National Council of State Boards of Nursing Registered Nursing Survey	
INTRODUCTION		
1. What type(s) of nur	rsing license do you hold? (Select ALL that apply)	
	Page	2



INTRODUCTION

2. What is your province/territory of registration?

- Alberta
- () Manitoba
- New Brunswick
- Newfoundland and Labrador
- Northwest Territories and Nunavut
- 🔵 Nova Scotia
- Ontario
- Prince Edward Island
- Quebec
- Saskatchewan
- () Yukon



INTRODUCTION

3. Are you currently working as an RN in Canada?

◯ Yes

No No



INTRODUCTION

4. In your current position, do you provide direct care to clients? (*Note: Faculty supervision of student clinical experiences is not considered "direct care."*)

Yes, 20 or more hours per week, on average

Yes, less than 20 hours per week, on average

() No



SECTION 1: NURSING ACTIVITIES

This section contains a list of activities descriptive of nursing practice in a variety of settings. Please note that some activities may not apply to your setting. For each activity, two questions are asked. Please answer both questions.

QUESTION A - FREQUENCY: If the activity is performed in your work setting, how often (0 Times, 1 Time, 2 Times, 3 Times, 4 Times, or 5+ Times) did you personally perform the activity on the last day you worked? If it is never performed in your work setting or is not applicable, then select "NEVER performed in work setting" and then respond to Question B - Importance.

QUESTION B - IMPORTANCE: How important is performing this nursing activity in regard to client safety? Consider the importance with regard to the risk of unnecessary complications, impairment of function, or serious distress to clients. Rate all activities.

NOTE: Inclusion of an activity on this practice analysis survey does not imply that the activity is or would be included in the RN scope of practice defined by any specific jurisdiction. You must refer to your local board of nursing/regulatory body for information about your scope of practice.

Question A – FREQUENCY - <u>If an activity does not apply to your work setting</u>, choose "Never performed in work setting", still select the importance rating as noted in Question B and then move on to the next activity. <u>If an activity is performed in your</u> <u>work setting</u> select 0-5+ reflecting the frequency of performing the activity on your <u>last day of work</u>, then complete Question B.

Question B – IMPORTANCE - Rate the overall importance of this activity considering client safety, and/or threat of complications or distress with 1 = Not Important, 2 = Minimally Important, 3 = Moderately Important, 4 = Important, 5 = Critically Important.

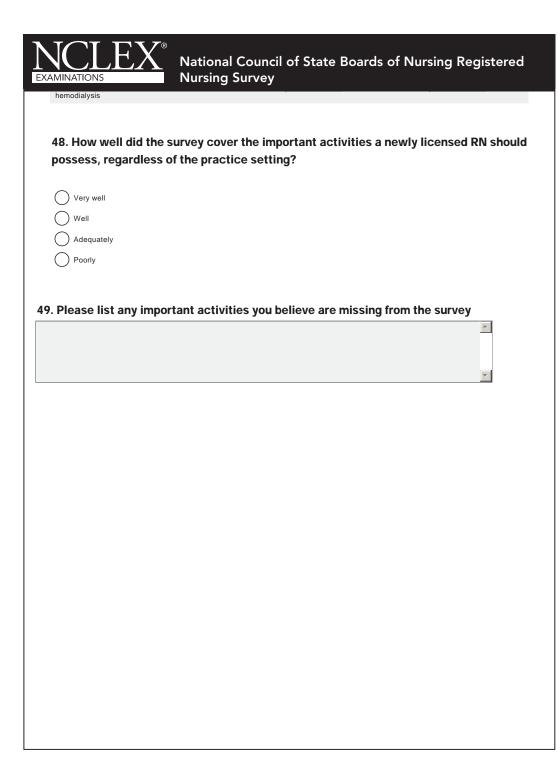
1 Provide and receive hand off of care (report) on assigned clients Image: signed clients 2 Prioritize the delivery of client care Image: signed clients 3 Receive and/or transcribe health care provider orders Image: signed clients 4 Verify that the client received appropriate procedures Image: signed clients 5 Initiate, evaluate, and update plan of care (e.g., are map, clinical pathway) Image: signed clients 6 Report client conditions as required by law (e.g., abuse/neglect and communicable disease) Image: signed clients 7 Recognize ethical dlienmas and take appropriate action Image: signed clients Image: signed clients 9 Apply principles of infection control (e.g., hand hydre principles of infection control (e.g., hand hydre, surgical asepsis, isolation, sterile technique, universal/standard precautions) Image: signed action signed		A - Frequency	B - Importance
3 Receive and/or transcribe health care provider orders Image: Control of the co		×	
orders Image: Control of Care (e.g., Care map, clinical pathway) 6 Report client conditions as required by law (e.g., abuse/neglect and communicable disease) Image: Control of Care (e.g., Care map, clinical pathway) 7 Recognize ethical dilemmas and take appropriate action Image: Control of Care (e.g., Care map, clinical pathway) 8 Practice in a manner consistent with a code of ethics for registered nurses Image: Care map, clinical sepsis, isolation, sterile technique, universal/standard precautions) 10 Follow procedures for handling biohazardous and hazardous materials Image: Care map, clinical pathway 11 Acknowledge and document practice errors (e.g., Care of Care (e.g., Care (e.g., Care (e.g., Care (e.g., Care (e.g., Care (e.g., Care (e.g	2 Prioritize the delivery of client care	▼	•
procedure education and consents to care and procedures 5 Initiate, evaluate, and update plan of care (e.g., care map, clinical pathway) 6 Report client conditions as required by law (e.g., abuse/neglect and communicable disease) 7 Recognize ethical dilemmas and take appropriate action 8 Practice in a manner consistent with a code of ethics for registered nurses 9 Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions) 10 Follow procedures for handling biohazardous and hazardous materials 11 Acknowledge and document practice errors (e.g., incident report for medication error) 12 Educate client on safety issues (e.g., home, school, transportation) 13 Educate client and staff regarding infection control measures 14 Plan and/or participate in community health education 15 Provide information about health promotion and maintenance recommendations (e.g., physician visits, immunizations)		×	•
care map, clinical pathway) 6 Report client conditions as required by law (e.g., abuse/neglect and communicable disease) 7 Recognize ethical dilemmas and take appropriate action 8 Practice in a manner consistent with a code of ethics for registered nurses 9 Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions) 10 Follow procedures for handling biohazardous and hazardous materials 11 Acknowledge and document practice errors (e.g., incident report for medication error) 12 Educate client and staff regarding infection control measures 14 Plan and/or participate in community health education 15 Provide information about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	procedure education and consents to care and		
abuse/neglect and communicable disease) 7 Recognize ethical dilemmas and take appropriate action 8 Practice in a manner consistent with a code of ethics for registered nurses 9 Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions) 10 Follow procedures for handling biohazardous and 11 Acknowledge and document practice errors (e.g., incident report for medication error) 12 Educate client and staff regarding infection control measures 14 Plan and/or participate in community health education 15 Provide information about health promotion and maintenance recommendations (e.g., physician visits, immunizations)		×	
action 8 Practice in a manner consistent with a code of ethics for registered nurses 9 Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions) 10 Follow procedures for handling biohazardous and hazardous materials 11 Acknowledge and document practice errors (e.g., incident report for medication error) 12 Educate client on safety issues (e.g., home, school, transportation) 13 Educate client and staff regarding infection control measures 14 Plan and/or participate in community health education 15 Provide information about health promotion and maintenance recommendations (e.g., physician visits, immunizations)		×	•
ethics for registered nurses 9 Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions) 10 Follow procedures for handling biohazardous and hazardous materials 11 Acknowledge and document practice errors (e.g., incident report for medication error) 12 Educate client on safety issues (e.g., home, school, transportation) 13 Educate client and staff regarding infection control measures 14 Plan and/or participate in community health education 15 Provide information about health promotion and maintenance recommendations (e.g., physician visits, immunizations)		×	
hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions) 10 Follow procedures for handling biohazardous and hazardous materials 11 Acknowledge and document practice errors (e.g., incident report for medication error) 12 Educate client on safety issues (e.g., home, school, transportation) 13 Educate client and staff regarding infection control measures 14 Plan and/or participate in community health education 15 Provide information about health promotion and maintenance recommendations (e.g., physician visits, immunizations)		v	•
hazardous materials 11 Acknowledge and document practice errors (e.g., incident report for medication error) Image: Comparison of the image: Compariso	hygiene, surgical asepsis, isolation, sterile technique,		
incident report for medication error) 12 Educate client on safety issues (e.g., home, school, transportation) 13 Educate client and staff regarding infection control measures 14 Plan and/or participate in community health education 15 Provide information about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	-	×	•
school, transportation) 13 Educate client and staff regarding infection control measures 14 Plan and/or participate in community health education 15 Provide information about health promotion and maintenance recommendations (e.g., physician visits, immunizations)		×	•
control measures 14 Plan and/or participate in community health education 15 Provide information about health promotion and maintenance recommendations (e.g., physician visits, immunizations)		×	•
education 15 Provide information about health promotion and maintenance recommendations (e.g., physician visits, immunizations)		×	
maintenance recommendations (e.g., physician visits, immunizations)		V	
16 Perform comprehensive health assessments	maintenance recommendations (e.g., physician visits,		
	16 Perform comprehensive health assessments		×

National Counci AMINATIONS Nursing Survey	l of State Boards of Nu	rsing Registered
17 Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	•	•
18 Assess client ability to manage care in home environment and plan care accordingly (e.g., equipment, community resources)		•
19 Assess client for abuse or neglect and intervene as appropriate	×	
20 Provide a therapeutic environment		•
21 Assess the potential for violence and use safety precautions (e.g., suicide, homicide, self-destructive behavior)	T	•
22 Use therapeutic communication techniques to provide client support	×	
23 Provide care for a client experiencing visual, auditory or cognitive distortions (e.g., hallucinations)	×	
24 Perform post-mortem care		•
25 Perform skin assessment and implement measures to maintain skin integrity and prevent skin breakdown (e.g., turning, repositioning, pressure-relieving support surfaces)	×	•



SECTION 1: NURSING ACTIVITIES

	A - Frequency	B - Importance
26 Apply and maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	Y	X
27 Manage the client's nutritional intake (e.g., adjust diet, monitor height and weight)		
28 Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	V	
29 Prepare and administer medications, using rights of medication administration	•	×
30 Administer controlled substances within regulatory guidelines (e.g., witness, waste)		
31 Titrate dosage of medication based on assessment and ordered parameters (e.g., giving insulin according to blood glucose levels, titrating medication to maintain a specific blood pressure)	•	×
32 Educate client about medications	•	
33 Administer pharmacological measures for pain management	•	T
34 Perform focused assessment	•	
35 Evaluate responses to procedures and treatments	•	
36 Manage client during and/or following a procedure with moderate sedation	•	X
37 Educate client about treatments and procedures	_	•
38 Insert, maintain or remove a urinary catheter	~	
39 Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	Y	V
40 Perform wound care or dressing change		•
41 Provide postoperative care		•
42 Perform suctioning (e.g., oral, nasopharyngeal, endotracheal, tracheal)		
43 Manage the care of a client with impaired ventilation/oxygenation	Y	T
44 Manage the care of a client with a pacing device (e.g., pacemaker, vagus nerve stimulator)	×	×
45 Manage the care of a client with alteration in hemodynamics, tissue perfusion and hemostasis (e.g., cerebral, cardiac, peripheral)	Y	×
46 Manage the care of a client receiving	•	



National Council of State Nursing Survey	e Boards of Nursing Registered				
SECTION 2: EXPERIENCE AND ORIENTATION					
1.What is the total number of months you have worked as an RN in Canada? Please enter a positive, whole number only (e.g., 20). Months:					
2a. Have you ever worked outside Canada as an R	N?				
Ves No					



SECTION 2: EXPERIENCE AND ORIENTATION

2b. If yes, what is the total number of months you worked outside Canada as an RN? Please enter a positive, whole number only (e.g., 7).

Months:



SECTION 2: EXPERIENCE AND ORIENTATION

3. Which of the following <u>best</u> describes the orientation you received for your current position? (Select only ONE)

No formal orientation

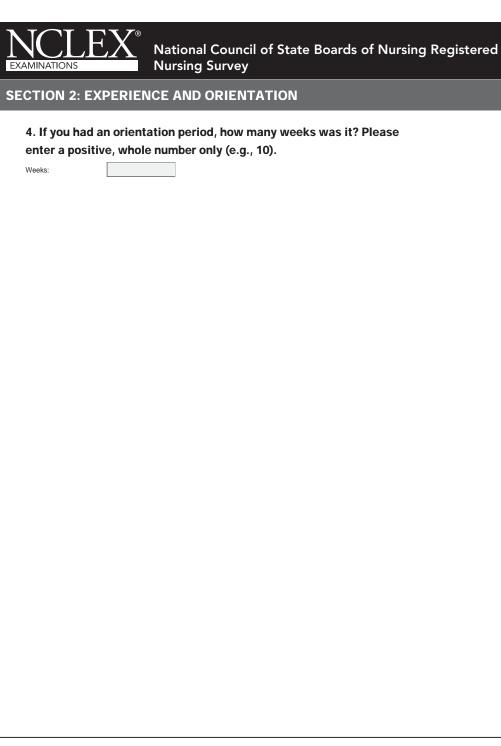
Classroom instruction/skills lab work only

Classroom and/or skills lab plus supervised work with clients

Work with an assigned preceptor(s) or mentor(s) with or without additional classroom or skills lab work

A formal internship/residency with or without additional classroom or skills lab work

Other (please specify):





SECTION 2: EXPERIENCE AND ORIENTATION

5. Which of the following types of certificates have you earned or courses completed since you have concluded your nursing course requirements? (Select ALL that apply)

Advanced Cardiac Life Support
Basic Life Support
Behavioral Management
Chemotherapy
Conscious/Moderate Sedation
Coronary Care
Critical Care
Intravenous Therapy
Neonatal Advanced Life Support
Neonatal Resuscitation
Pediatric Advanced Life Support
Phlebotomy
Peritoneal Dialysis
Rehabilitation
None
Other (please specify)



SECTION 2: EXPERIENCE AND ORIENTATION

6a. Do you routinely have administrative responsibilities within your nursing position (e.g., Unit Manager, Team Leader, Charge Nurse, Coordinator)?

O Yes

○ No



SECTION 2: EXPERIENCE AND ORIENTATION

6b. If yes, is this your primary position?

Ves No



SECTION 3: WORK ENVIRONMENT

1. Which of the following <u>best</u> describes <u>most</u> of your clients on the last day you worked? (Select ALL that apply)

Well clients, possibly with minor illnesses
OB (Maternity) clients
Clients with stabilized chronic conditions
Clients with unstabilized chronic conditions
Clients with acute conditions, including clients with medical, surgical or critical conditions
Clients at end-of-life
Clients with behavioral/emotional conditions
Other (please specify)

2. Which of the following <u>best</u> describes the ages of <u>most</u> of your clients on the last day you worked? (Select ALL that apply)

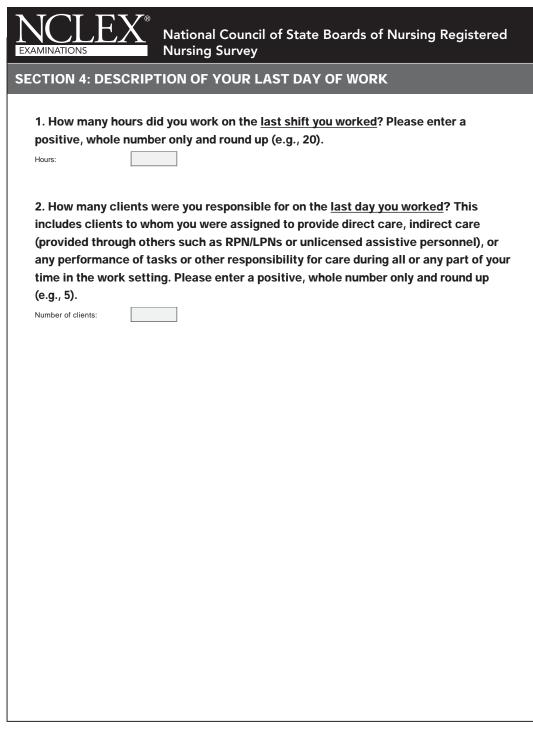
Newborn (less than 1 month)
Infant/toddler (1 month-2 years)
Preschool (ages 3-5)
School Age (ages 6-12)
Adolescent (ages 13-17)
Adult (ages 18-64)

Adult (ages 65-85)

Adult (over age 85)

AMINATIONS National Council o Nursing Survey	of State Boards of Nursing Registered			
3. Which of the following choices <u>best</u> describes your employment setting/specialty area <u>on the last day you worked</u> ? If you worked mainly in one setting, select the appropriate choice for that one setting. If you worked in more than one setting, select the appropriate choices for all settings where you spent at least one-half of your time.				
(Select no more than TWO answers)				
Critical care (e.g., ICU, CCU, step-down units, pediatric/neonatal intensive care, emergency department, post- anesthesia recovery unit) Medical-surgical unit or any of its sub-specialties (e.g.,	Subacute unit Transitional care unit Physician/Advanced Practice RN/Nurse Practitioner (NP)/Dentist office			
oncology, orthopedics, neurology)	Occupational health			
Pediatrics	Outpatient clinic			
Nursery				
Labor and delivery	Home health, including visiting nurses associations			
Postpartum unit	Public health			
Psychiatry or any of its sub-specialties (e.g., detox)	Student/school health			
Assisted Living	Hospice care			
Operating room, including outpatient surgery and surgicenters	Prison/Correctional Facility/Jail			
Nursing home, skilled or intermediate care	Short Stay/Observational			
Other long-term care (e.g., residential care, developmental disability)	Step-down/Progressive Care			
Rehabilitation				
Other (please specify)				
4. Which of the following <u>best</u> describes the type of facility/organization where your employment setting/specialty area is located? (Select only ONE)				
	uding public health department, visiting purges association, home			
health, physician/Advanced Practice RN/Nurse Practitioner (NP)/dent	uding public health department, visiting nurses association, home ist office, clinic, school, prison, etc.)			
Other (please specify)				
L				

	ational Council of State Boards of Nursing Registered ursing Survey
5. If you work in a hospita	l or nursing home, how large is it? (Select only ONE)
Less than 50 beds	
50-99 beds	
0 100-299 beds	
300-499 beds	
500 or more beds	
I do not know	
I do not work in a hospital or nursin	g home
6. Which of the following l	best describes your shift on a typical work day? (Select only
ONE)	
Days	
Evenings	
Nights	
Rotating shifts	
Other (please specify)	
7 What is the length of vo	ur shift <u>on a typical work day</u> ? (Select only ONE)
8 hours	a sint one typical work day. (Select only one)
10 hours	
12 hours	
Varied 8 hours and 12 hours	
Other (please specify)	
8. Which <u>best</u> describes tl	he location of your employment setting?
Urban/Metropolitan area	
Suburban	
Rural	



Natio

National Council of State Boards of Nursing Registered Nursing Survey

3. How much of your time was spent performing each of the following types of activities on the <u>last day you worked</u>? For each of the sets of activities please rate the approximate amount of time you spent on that type of activity <u>on the last day you worked</u> rounded to the nearest hour. For example, if you spent about 2 and ¼ hours on a set of activities, select the option "2". If you spent 3 and ¾ hours on a set of activities, select the option "2". If you spent 3 and ¾ hours on a set of activities, select the option "4." Numerous categories may be performed simultaneously; therefore total hours spent may be greater than total hours or shift worked.

Sets of Activities

	• (, 0	P 0			• • •				
	0	1	2	3	4	5	6	7	8	8+	
Provide and direct nursing care that enhances the care	\bigcirc										

Approximate Amount of Time (Hours) Spent on Set of Activities

0000000000

0000000000

0000000000

0000000000

0000000000

0000000000

0000000000

1. Management of Care: Provide and direct nursing care that enhance delivery setting to protect clients and health care personnel.

2. **Safety and Infection Control:** Protect clients and health care personnel from health and environmental hazards.

3. Health Promotion and Maintenance: Provide and direct nursing care of the client that incorporates the knowledge of expected growth and development principles, prevention and/or early detection of health problems, and strategies to achieve optimal health.

4. **Psychosocial Integrity:** Provide and direct nursing care that promotes and supports the emotional, mental and social well being of the client experiencing stressful events, as well as clients with acute or chronic mental illness.

5. **Basic Care and Comfort:** Provide comfort and assistance in the performance of activities of daily living.

6. **Pharmacological and Parenteral Therapies:** Provide care related to the administration of medications and parenteral therapies.

7. Reduction of Risk Potential: Reduce the likelihood that clients will develop complications or health problems related to existing conditions, treatments or procedures.

8. **Physiological Adaptation**: Manage and provide care for clients with acute, chronic or life threatening physical health conditions.



SECTION 5: DEMOGRAPHIC INFORMATION

In this section you are asked to provide background information that will be summarized to describe the group that completed this survey. No individual responses will be reported.

1a. Did you work as an unlicensed assistive personnel prior to becoming an RN?

\bigcirc	Yes
\bigcirc	No



SECTION 5: DEMOGRAPHIC INFORMATION

1b. If yes, for how many years and months? Please enter positive, whole numbers (e.g., 10).

Years:	
Months:	



SECTION 5: DEMOGRAPHIC INFORMATION

2a. Did you work as an RPN/LPN prior to becoming an RN?

\bigcirc	Yes
\frown	

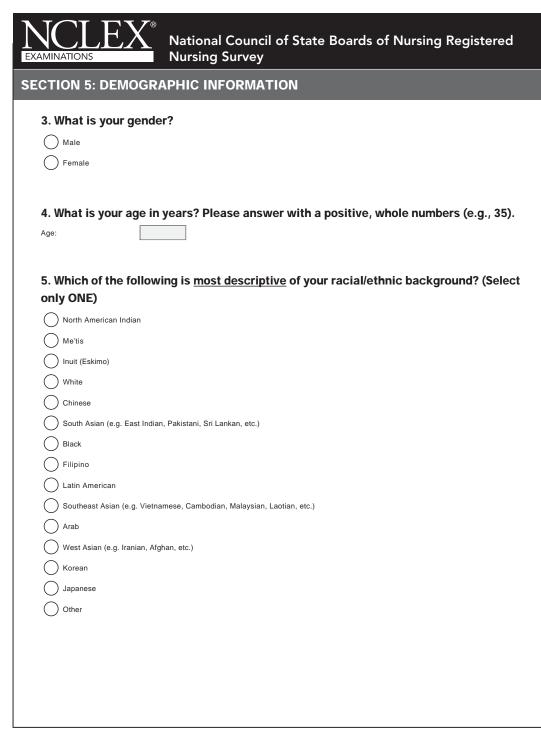




SECTION 5: DEMOGRAPHIC INFORMATION

2b. If yes, for how many years and months? Please enter positive, whole numbers (e.g., 10).

Years:	
Months:	



 6. What is your primary language? English English English and another language French and another language 7. What type of <u>basic</u> nursing education program qualified you to take the NCLEX-RN[®]? (Select only ONE) RN - Baccalaureate degree in Canada RN - Generic doctorate in Canada (e.g., ND) Any nursing program NOT located in Canada In progress to complete genetic master's Other program (please specify) 8. How many months has it been since you completed course requirements from the above nursing education program? Please enter a positive, whole number (e.g., 15) Monther:		National Council of State Boards of Nursing Registered Nursing Survey
 French English and another language French and another language Another language 7. What type of basic nursing education program qualified you to take the NCLEX-RN[®]? (Select only ONE) RN - Baccalaureate degree in Canada RN - Generic doctorate in Canada (e.g., ND) Any nursing program NOT located in Canada In progress to complete generic master's Other program (please specify) 8. How many months has it been since you completed course requirements from the above nursing education program? Please enter a positive, whole number (e.g., 15)	6. What is your p	primary language?
 English and another language French and another language Another language 7. What type of <u>basic</u> nursing education program qualified you to take the NCLEX-RN [®] ? (Select only ONE) RN - Baccalaureate degree in Canada RN - Generic doctorate in Canada (e.g., ND) Any nursing program NOT located in Canada In progress to complete generic master's Other program (please specify) 8. How many months has it been since you completed course requirements from the above nursing education program? Please enter a positive, whole number (e.g., 15)	C English	
 French and another language Another language 7. What type of <u>basic</u> nursing education program qualified you to take the NCLEX-RN [®] ? (Select only ONE) RN - Baccalaureate degree in Canada RN - Generic master's degree in Canada RN - Generic doctorate in Canada (e.g., ND) Any nursing program NOT located in Canada In progress to complete generic master's Other program (please specify) 8. How many months has it been since you completed course requirements from the above nursing education program? Please enter a positive, whole number (e.g., 15)	French	
 Another language 7. What type of basic nursing education program qualified you to take the NCLEX-RN®? (Select only ONE) RN - Baccalaureate degree in Canada RN - Generic master's degree in Canada RN - Generic doctorate in Canada (e.g., ND) Any nursing program NOT located in Canada In progress to complete generic master's Other program (please specify) 8. How many months has it been since you completed course requirements from the above nursing education program? Please enter a positive, whole number (e.g., 15)	English and anothe	r language
 7. What type of <u>basic</u> nursing education program qualified you to take the NCLEX-RN[®]? (Select only ONE) RN - Baccalaureate degree in Canada RN - Generic master's degree in Canada RN - Generic doctorate in Canada (e.g., ND) Any nursing program NOT located in Canada In progress to complete generic master's Other program (please specify) 8. How many months has it been since you completed course requirements from the above nursing education program? Please enter a positive, whole number (e.g., 15)	French and another	language
(Select only ONE) RN - Baccalaureate degree in Canada RN - Generic master's degree in Canada RN - Generic doctorate in Canada (e.g., ND) Any nursing program NOT located in Canada In progress to complete generic master's Other program (please specify) 8. How many months has it been since you completed course requirements from the above nursing education program? Please enter a positive, whole number (e.g., 15)	Another language	
 RN - Generic master's degree in Canada RN - Generic doctorate in Canada (e.g., ND) Any nursing program NOT located in Canada In progress to complete generic master's Other program (please specify) 8. How many months has it been since you completed course requirements from the above nursing education program? Please enter a positive, whole number (e.g., 15) 		
 RN - Generic doctorate in Canada (e.g., ND) Any nursing program NOT located in Canada In progress to complete generic master's Other program (please specify) 8. How many months has it been since you completed course requirements from the above nursing education program? Please enter a positive, whole number (e.g., 15)	RN - Baccalaureate	degree in Canada
 Any nursing program NOT located in Canada In progress to complete generic master's Other program (please specify) 8. How many months has it been since you completed course requirements from the above nursing education program? Please enter a positive, whole number (e.g., 15) 	RN - Generic master	r's degree in Canada
 In progress to complete generic master's Other program (please specify) 8. How many months has it been since you completed course requirements from the above nursing education program? Please enter a positive, whole number (e.g., 15) 	RN - Generic doctor	ate in Canada (e.g., ND)
Other program (please specify) 8. How many months has it been since you completed course requirements from the above nursing education program? Please enter a positive, whole number (e.g., 15)	Any nursing program	n NOT located in Canada
8. How many months has it been since you completed course requirements from the above nursing education program? Please enter a positive, whole number (e.g., 15)	In progress to comp	lete generic master's
above nursing education program? Please enter a positive, whole number (e.g., 15)		
above nursing education program? Please enter a positive, whole number (e.g., 15)	Other program (plea	ise specify)
	Other program (plea	ise specify)
	8. How many mo above nursing e	onths has it been since you completed course requirements from the
	8. How many mo above nursing e	onths has it been since you completed course requirements from the
	8. How many mo above nursing e	onths has it been since you completed course requirements from the
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	8. How many mo above nursing e	onths has it been since you completed course requirements from the
	8. How many mo above nursing e	onths has it been since you completed course requirements from the



SECTIONS 6: COMMENTS

If we need additional information in order to clarify the results of this study, we may call and/or e-mail some participants. If you would be willing to answer a few additional questions by phone or e-mail, please provide a number where you can be reached during the day or early evening.

Name:	
Daytime or Early Evening Phone Number with Area	
Code:	
E-mail address:	

You may write any comments or suggestions that you have in the space below.

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Thank you!

Thank you for your participation in this important study.

To finalize your survey, please click the **Submit Survey** button below.

Web Form 3



National Council of State Boards of Nursing Registered Nursing Survey

INSTRUCTIONS

This survey is being performed by the National Council of State Boards of Nursing (NCSBN) on behalf of your board of nursing/regulatory body. The survey is part of a comprehensive study of the practice of newly licensed registered nurses (RNs) in the Canadian areas that will use the NCLEX[®] examination for primary licensure decisions in 2015. Please complete this survey as soon as possible. This is your opportunity to contribute to the development of the NCLEX[®] examination that future candidates will take.

Instructions:

Please read each question carefully and respond by selecting the option that most closely represents your answer. Choose the answer that <u>best</u> applies to your practice and select the appropriate response(s). A few questions ask you to enter information.

You will notice that many questions ask you to report what you did on your **<u>last day of work</u>**. It is important that we obtain information from nurses experiencing both typical and unusual workdays, so please answer the questions according to what you did on your **<u>last</u>** day of work even if that day was not typical.

As used in this survey, the "client" can be an individual, family, or group which includes significant others and population. "Clients" are the same as "residents" or "patients." Your answers will be kept confidential and your individual responses to the questions will not be released.

Survey Progression:

To progress through the survey, please use the navigation buttons located at the bottom of each page:

Continue to the next page of the survey by clicking the Continue to the Next Page link.

Go back to the previous page in the survey by clicking on the *Previous Page* link. This will allow you to move back in the survey to look over the previous answers.

Finish the survey, by clicking the Submit the Survey link on the Thank You page.

NCLEX® EXAMINATIONS	National Council of State Boards of Nursing Registere Nursing Survey	d	
INTRODUCTION			
INTRODUCTION	sing license do you hold? (Select ALL that apply)		
	Pag	e 2	



INTRODUCTION

2. What is your province/territory of registration?

- Alberta
- British Columbia
- () Manitoba
- New Brunswick
- Newfoundland and Labrador
- Northwest Territories and Nunavut
- Nova Scotia
- Ontario
- Prince Edward Island
 - Quebec

(

- Saskatchewan
- Yukon



INTRODUCTION

3. Are you currently working as an RN in Canada?

O Yes

O No



INTRODUCTION

4. In your current position, do you provide direct care to clients? (*Note: Faculty supervision of student clinical experiences is not considered "direct care."*)

Yes, 20 or more hours per week, on average

Yes, less than 20 hours per week, on average

No No



SECTION 1: NURSING ACTIVITIES

This section contains a list of activities descriptive of nursing practice in a variety of settings. Please note that some activities may not apply to your setting. For each activity, two questions are asked. Please answer both questions.

QUESTION A - FREQUENCY: If the activity is performed in your work setting, how often (0 Times, 1 Time, 2 Times, 3 Times, 4 Times, or 5+ Times) did you personally perform the activity on the last day you worked? If it is never performed in your work setting or is not applicable, then select "NEVER performed in work setting" and then respond to Question B - Importance.

QUESTION B - IMPORTANCE: How important is performing this nursing activity in regard to client safety? Consider the importance with regard to the risk of unnecessary complications, impairment of function, or serious distress to clients. Rate all activities.

NOTE: Inclusion of an activity on this practice analysis survey does not imply that the activity is or would be included in the RN scope of practice defined by any specific jurisdiction. You must refer to your local board of nursing/regulatory body for information about your scope of practice.



Question A – FREQUENCY - <u>If an activity does not apply to your work setting</u>, choose "Never performed in work setting", still select the importance rating as noted in Question B and then move on to the next activity. <u>If an activity is performed in your</u> <u>work setting</u> select 0-5+ reflecting the frequency of performing the activity on your <u>last day of work</u>, then complete Question B.

Question B – IMPORTANCE - Rate the overall importance of this activity considering client safety, and/or threat of complications or distress with 1 = Not Important, 2 = Minimally Important, 3 = Moderately Important, 4 = Important, 5 = Critically Important.

1 Assign and supervise care provided by others (e.g., LPN/VN, assistive personnel, other RNs)	
2 Participate in performance improvement/quality improvement process	
3 Integrate advance directives into client plan of care	
4 Provide education to clients and staff about client rights and responsibilities	_
5 Maintain client confidentiality and privacy	
6 Manage conflict among clients and health care staff	
7 Use approved abbreviations and standard terminology when documenting care	
8 Provide care within the legal scope of practice	
9 Protect client from injury (e.g., falls, electrical hazards)	
10 Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	
11 Ensure proper identification of client when providing care	
12 Implement emergency response plans (e.g., internal/external disaster, bomb threat, community planning)	
13 Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	
14 Perform targeted screening assessments (e.g., vision, nutrition)	
15 Provide care and education to a client in labor or antepartum client	
16 Assess client's readiness to learn, learning preferences and barriers to learning	×
17 Provide care and education for the adult client ages 18 through 64 years	
18 Assess and teach clients about health risks based	



on family, population, and/or community characteristics		
19 Assess client for drug/alcohol dependencies, withdrawal, or toxicities and intervene as appropriate	×	
20 Incorporate client cultural practice and beliefs when planning and providing care	×	T
21 Assess family dynamics to determine plan of care (e.g., structure, bonding, communication, boundaries, coping mechanisms)	T	•
22 Incorporate behavioral management techniques when caring for a client (e.g., positive reinforcement, setting limits, de-escalation techniques)		T
23 Assess and intervene in client performance of activities of daily living	×	Y
24 Perform irrigations (e.g., of bladder, ear, eye)	•	•
25 Assess and manage client with an alteration in elimination (e.g., bowel, urinary)	T	T



SECTION 1: NURSING ACTIVITIES

	A - Frequency	B - Importance
26 Provide nonpharmacological comfort measures (e.g., light dimming, warm blanket)		
27 Assess client need for sleep/rest and intervene as needed		
28 Assess client need for pain management	•	•
29 Perform calculations needed for medication administration		
30 Handle and maintain medication in a safe and controlled environment	Y	
31 Administer blood products and evaluate client response		
32 Evaluate client response to medication (e.g., therapeutic effects, side effects, adverse reactions)		
33 Participate in medication reconciliation process	•	
34 Monitor the results of diagnostic testing and intervene as needed		
35 Provide preoperative and postoperative education	•	
36 Obtain blood specimens peripherally or through central line		
37 Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)		
38 Insert, maintain or remove a peripheral intravenous line		
39 Perform emergency care procedures (e.g., cardio- pulmonary resuscitation, respiratory support, automated external defibrillator)	Y	
40 Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	•	
41 Perform and manage care of client receiving peritoneal dialysis	•	
42 Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	V	
43 Maintain optimal temperature of client (e.g., cooling and/or warming blanket)	•	
44 Monitor and maintain arterial lines		
45 Evaluate the effectiveness of the treatment regimen for a client with an acute or chronic diagnosis	Y	
46 Recognize signs and symptoms of complications and intervene appropriately when providing client care		



48. How well did the survey cover the important activities a newly licensed RN should possess, regardless of the practice setting?

Very well

Well

Adequately

) Poorly

49. Please list any important activities you believe are missing from the survey

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SECTION 2: EXPERIENCE AND ORIENTATION

1.What is the total number of months you have worked as an RN in Canada? Please enter a positive, whole number only (e.g., 20).

Months:

2a. Have you ever worked outside Canada as an RN?

\bigcirc	Yes
------------	-----

No No



SECTION 2: EXPERIENCE AND ORIENTATION

2b. If yes, what is the total number of months you worked outside Canada as an RN? Please enter a positive, whole number only (e.g., 7).

Months:



SECTION 2: EXPERIENCE AND ORIENTATION

3. Which of the following <u>best</u> describes the orientation you received for your current position? (Select only ONE)

\bigcirc	No formal orientation
\bigcirc	Classroom instruction/skills lab work only
\bigcirc	Classroom and/or skills lab plus supervised work with clients
\bigcirc	Work with an assigned preceptor(s) or mentor(s) with or without additional classroom or skills lab work
\bigcirc	A formal internship/residency with or without additional classroom or skills lab work
\bigcirc	Other (please specify):



SECTION 2: EXPERIENCE AND ORIENTATION

4. If you had an orientation period, how many weeks was it? Please enter a positive, whole number only (e.g., 10).

Weeks:



SECTION 2: EXPERIENCE AND ORIENTATION

5. Which of the following types of certificates have you earned or courses completed since you have concluded your nursing course requirements? (Select ALL that apply)

Advanced Cardiac Life Support
Basic Life Support
Behavioral Management
Chemotherapy
Conscious/Moderate Sedation
Coronary Care
Critical Care
Intravenous Therapy
Neonatal Advanced Life Support
Neonatal Resuscitation
Pediatric Advanced Life Support
Phlebotomy
Peritoneal Dialysis
Rehabilitation
None
Other (please specify)



SECTION 2: EXPERIENCE AND ORIENTATION

6a. Do you routinely have administrative responsibilities within your nursing position (e.g., Unit Manager, Team Leader, Charge Nurse, Coordinator)?

◯ Yes

◯ No



SECTION 2: EXPERIENCE AND ORIENTATION

6b. If yes, is this your primary position?

◯ Yes

O No



SECTION 3: WORK ENVIRONMENT

1. Which of the following <u>best</u> describes <u>most</u> of your clients on the last day you worked? (Select ALL that apply)

Well clients, possibly with minor illnesses
OB (Maternity) clients
Clients with stabilized chronic conditions
Clients with unstabilized chronic conditions
Clients with acute conditions, including clients with medical, surgical or critical conditions
Clients at end-of-life
Clients with behavioral/emotional conditions
Other (please specify)

2. Which of the following <u>best</u> describes the ages of <u>most</u> of your clients on the last day you worked? (Select ALL that apply)

Newborn (less than 1 month) Infant/toddler (1 month-2 years) Preschool (ages 3-5) School Age (ages 6-12)

Adolescent (ages 13-17)

Adult (ages 18-64)

Adult (ages 65-85)

Adult (over age 85)

National Council of Nursing Survey	f State Boards of Nursing Registered
3. Which of the following choices <u>best</u> descr area <u>on the last day you worked</u> ? If you work appropriate choice for that one setting. If yo the appropriate choices for all settings when	ked mainly in one setting, select the u worked in more than one setting, select
(Select no more than TWO answers) Critical care (e.g., ICU, CCU, step-down units, pediatric/neonatal intensive care, emergency department, post-anesthesia recovery unit) Medical-surgical unit or any of its sub-specialties (e.g., oncology, orthopedics, neurology) Pediatrics Nursery Labor and delivery Postpartum unit Psychiatry or any of its sub-specialties (e.g., detox) Assisted Living Operating room, including outpatient surgery and surgicenters Nursing home, skilled or intermediate care Other long-term care (e.g., residential care, developmental disability) Rehabilitation	Subacute unit Transitional care unit Physician/Advanced Practice RN/Nurse Practitioner (NP)/Dentist office Occupational health Outpatient clinic Home health, including visiting nurses associations Public health Student/school health Hospice care Prison/Correctional Facility/Jail Short Stay/Observational Step-down/Progressive Care
Constant of the following best describes the employment setting/specialty area is located hospital Community-based or ambulatory care facility/organization (inclu- health, physician/Advanced Practice RN/Nurse Practitioner (NP)/dentise Other (please specify)	d? (Select only ONE)

NCLEX [®] EXAMINATIONS	National Council of State Boards of Nursing Registered Nursing Survey
5. If you work in a hos	pital or nursing home, how large is it? (Select only ONE)
Less than 50 beds	
50-99 beds	
0 100-299 beds	
300-499 beds	
500 or more beds	
I do not know	
I do not work in a hospital or	nursing home
6. Which of the followi ONE)	ng <u>best</u> describes your shift <u>on a typical work day</u> ? (Select only
Days	
Evenings	
Nights	
Rotating shifts	
Other (please specify)	
7. What is the length o	f your shift <u>on a typical work day</u> ? (Select only ONE)
8 hours	
10 hours	
12 hours	
Varied 8 hours and 12 hours	
Other (please specify)	
8. Which <u>best</u> describe	es the location of your employment setting?
Urban/Metropolitan area	-
Suburban	
~	



SECTION 4: DESCRIPTION OF YOUR LAST DAY OF WORK

How many hours did you work on the <u>last shift you worked</u>? Please enter a positive, whole number only and round up (e.g., 20).
 Hours:
 How many clients were you responsible for on the <u>last day you worked</u>? This includes clients to whom you were assigned to provide direct care, indirect care (provided through others such as RPN/LPNs or unlicensed assistive personnel), or any performance of tasks or other responsibility for care during all or any part of your time in the work setting. Please enter a positive, whole number only and round up

(e.g., 5).

Number of clients:



to Amount of Time (Hours) Short on Set of Activities

3. How much of your time was spent performing each of the following types of activities on the <u>last day you worked</u>? For each of the sets of activities please rate the approximate amount of time you spent on that type of activity <u>on the last day you worked</u> rounded to the nearest hour. For example, if you spent about 2 and ¼ hours on a set of activities, select the option "2". If you spent 3 and ¾ hours on a set of activities, select the option "2". If you spent 3 and ¾ hours on a set of activities, select the option "4." Numerous categories may be performed simultaneously; therefore total hours spent may be greater than total hours or shift worked.

Sets of Activities

Approximate Amount of Time	0 1 2 3 4 5 6 7 8 8+
1. Management of Care: Provide and direct nursing care that enhances the care delivery setting to protect clients and health care personnel.	000000000000000000000000000000000000000
2. Safety and Infection Control: Protect clients and health care personnel from health and environmental hazards.	0000000000
 Health Promotion and Maintenance: Provide and direct nursing care of the client that incorporates the knowledge of expected growth and development principles, prevention and/or early detection of health problems, and strategies to achieve optimal health. 	00000000000
4. Psychosocial Integrity: Provide and direct nursing care that promotes and supports the emotional, mental and social well being of the client experiencing stressful events, as well as clients with acute or chronic mental illness.	0000000000
5. Basic Care and Comfort: Provide comfort and assistance in the performance of activities of daily living.	0000000000
 Pharmacological and Parenteral Therapies: Provide care related to the administration of medications and parenteral therapies. 	0000000000
 Reduction of Risk Potential: Reduce the likelihood that clients will develop complications or health problems related to existing conditions, treatments or procedures. 	0000000000
8. Physiological Adaptation: Manage and provide care for clients with acute, chronic or life threatening physical health conditions.	000000000



SECTION 5: DEMOGRAPHIC INFORMATION

In this section you are asked to provide background information that will be summarized to describe the group that completed this survey. No individual responses will be reported.

1a. Did you work as an unlicensed assistive personnel prior to becoming an RN?

\bigcirc	Yes
\bigcirc	No



SECTION 5: DEMOGRAPHIC INFORMATION

1b. If yes, for how many years and months? Please enter positive, whole numbers (e.g., 10).

• • •	
Years:	
Months:	



SECTION 5: DEMOGRAPHIC INFORMATION

2a. Did you work as an RPN/LPN prior to becoming an RN?

- ⊖ Yes
- O No



SECTION 5: DEMOGRAPHIC INFORMATION

2b. If yes, for how many years and months? Please enter positive, whole numbers (e.g., 10).

Years:	
Months:	



SECTION 5: DEMOGRAPHIC INFORMATION

3. What is your gender?

Male

) Female

4. What is your age in years? Please answer with a positive, whole numbers (e.g., 35).

Δ	a	0		
h	g,	6	•	

5. Which of the following is <u>most descriptive</u> of your racial/ethnic background? (Select only ONE)

•
North American Indian
Me'tis
Inuit (Eskimo)
White
Chinese
South Asian (e.g. East Indian, Pakistani, Sri Lankan, etc.)
Black
Filipino
Latin American
O Southeast Asian (e.g. Vietnamese, Cambodian, Malaysian, Laotian, etc.)
Arab
West Asian (e.g. Iranian, Afghan, etc.)
Korean
Japanese
Other

	al Council of State Boards of Nursing Registered g Survey	
6. What is your primary langua	ge?	
English		
French		
English and another language		
French and another language		
Another language		
7. What type of <u>basic</u> nursing e (Select only ONE)	education program qualified you to take the NCLEX-RN $^{\textcircled{m}}$?	
RN - Baccalaureate degree in Canada		
RN - Generic master's degree in Canada		
RN - Generic doctorate in Canada (e.g., NE)	
Any nursing program NOT located in Cana	da	
O In progress to complete generic master's		
Other program (please specify)		
•	en since you completed course requirements from the ram? Please enter a positive, whole number (e.g., 15)	



SECTIONS 6: COMMENTS

If we need additional information in order to clarify the results of this study, we may call and/or e-mail some participants. If you would be willing to answer a few additional questions by phone or e-mail, please provide a number where you can be reached during the day or early evening.

Name:	
Daytime or Early Evening	
Phone Number with Area	
Code:	
E-mail address:	

You may write any comments or suggestions that you have in the space below.



Thank you!

Thank you for your participation in this important study.

To finalize your survey, please click the $\ensuremath{\textbf{Submit Survey}}$ button below.

■ ■ ■ ■ ■ N C S B N National Council of State Boards of Nursing

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