

NCSBN RESEARCH BRIEF

Volume 72 | February 2018

2017 RN Practice Analysis: Linking the NCLEX-RN® Examination to Practice U.S. and Canada



2017 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

The National Council of State Boards of Nursing (NCSBN[®]) provides education, service and research through collaborative leadership to promote evidence-based regulatory excellence for patient safety and public protection.

Copyright ©2018 National Council of State Boards of Nursing, Inc. (NCSBN[®])

All rights reserved. NCSBN[®], NCLEX[®], NCLEX-RN[®], NCLEX-PN[®], NNAAP[®], MACE[®], Nursys[®] and TERCAP[®] are registered trademarks of NCSBN and this document may not be used, reproduced or disseminated to any third party without written permission from NCSBN.

Permission is granted to boards of nursing to use or reproduce all or parts of this document for licensure related purposes only. Nonprofit education programs have permission to use or reproduce all or parts of this document for educational purposes only. Use or reproduction of this document for commercial or for-profit use is strictly prohibited. Any authorized reproduction of this document shall display the notice: "Copyright by the National Council of State Boards of Nursing, Inc. All rights reserved." Or, if a portion of the document is reproduced or incorporated in other materials, such written materials shall include the following credit: "Portions copyrighted by the National Council of State Boards of Nursing, Inc. All rights reserved."

Address inquiries in writing to NCSBN Permissions, 111 E. Wacker Drive, Suite 2900, Chicago, IL 60601-4277. Suggested Citation: National Council of State Boards of Nursing. (2018). *2017 RN Practice Analysis: Linking the NCLEX-RN[®] Examination to Practice: U.S. and Canada*. Chicago: Author.

Printed in the United States of America

ISBN# 978-0-9903603-7-7

TABLE OF CONTENTS

Part 1: U.S.

Executive Summary	1
Background of Study	5
Methodology	5
Preliminary Interviews with Nurse Leaders	5
Methodology Reviewers	5
Panel of Subject Matter Experts (SMEs)	5
Survey Development	6
Survey Process	6
Sample Selection	6
Representativeness	6
Mailing Procedure	6
Confidentiality	8
Return Rates	8
RN Practice Analysis Survey Nonresponder Study	9
Summary	9
Demographics, Experiences and Practice Environments of Participants	10
Demographics/Past Experiences	10
Age and Gender	10
Race/Ethnicity of Newly Licensed RNs	10
Educational Background	10
Previous Licensed Practical/Vocational Nurse (LPN/VN) or Unlicensed Assistive Personnel (UAP) Experience	10
Orientation	10
Certifications Earned	13
Work Settings	13
Facilities	13
Practice Settings	13
Client Health Conditions	15
Client Ages	15
Shifts Worked	15
Time Spent in Different Categories of Nursing Activities	16
Administrative Responsibilities/Primary Administrative Position	16
Summary	16
Activity Statement Performance Findings	19
Overview of Methods	19
Activity Performance Characteristics	19
Reliability	19
SME Panel Validation of Survey Findings	19
Representativeness of Activity Statements	20
Applicability of Activities to Practice Setting	20

Frequency of Activity Performance	20
Setting-Specific	20
Total Group	20
Importance of Activity Performance	21
Setting-Specific	21
Total Group	21
Summary	21
Conclusions	21
References	43
Appendix A: 2017 RN Practice Analysis Methodology Expert	44
Appendix B: Subject Matter Expert Panel	45
Appendix C: 2017 RN Practice Analysis Survey	48
Appendix D: Activities Rank Ordered By Average Setting-Specific Frequency	113
Appendix E: Activities Rank Ordered By Average Total Group Frequency	117
Appendix F: Activities Rank Ordered By Average Setting-Specific Importance	121
Appendix G: Activities Rank Ordered By Average Total Group Importance	125
Appendix H: 2017 RN Practice Analysis Survey Nonresponder Study	129

LIST OF TABLES

Table 1. Correspondence of Population, Sample and Responders for the 2017 RN Practice Analysis	7
Table 2. Average Years LPN/VN or Unlicensed Assistive Personnel (UAP) Experience	10
Table 3. Type and Length of Orientation	12
Table 4. Additional Coursework/Certification	12
Table 5. Employment Facilities	12
Table 6. Employment Setting Characteristics	13
Table 7. Practice Settings	14
Table 8. Average Time Spent in Different Categories of Nursing Activities	17
Table 9. Administrative Responsibilities	18
Table 10. Reliability Estimates	19
Table 11. Average Frequency and Importance Ratings (Total Group) and Percent Performing from RN Practice Analysis Survey and RN Practice Analysis Survey SME Panel	22
Table 12. Activity Applicability to Setting and Average Frequency of Performance	30
Table 13. Average Total Group and Setting-Specific Importance Ratings	36

LIST OF FIGURES

Figure 1. Gender of Newly Licensed RNs	10
Figure 2. Race/Ethnicity of Newly Licensed RNs	11
Figure 3. Educational Programs of Newly Licensed RNs	11
Figure 4. Average Months Since Graduation and Months Employed	11
Figure 5. Client Health Conditions	14
Figure 6. Client Ages	15
Figure 7. Shifts Worked by Newly Licensed RNs	15

Part 2: Canada

Executive Summary	134
Background of Study	138
Methodology	138
Preliminary Interviews with Nurse Leaders	138
Methodology Reviewers	138
Panel of Subject Matter Experts (SMEs)	138
Survey Development	138
Survey Process	138
Sample Selection and Representativeness	138
Mailing Procedure	138
Confidentiality	139
Return Rates	139
RN Practice Analysis Survey Nonrespondent Study	139
Summary	140
Demographics, Experiences and Practice Environments of Participants	141
Demographics/Past Experiences	141
Age and Gender	141
Race/Ethnicity of Newly Licensed/Registered RNs	141
Educational Background	141
Previous Licensed Practical/Vocational Nurse (LPN/VN) or Unlicensed Assistive Personnel (UAP) Experience	141
Orientation	141
Certifications Earned	144
Work Settings	144
Facilities	144
Practice Settings	144
Client Health Conditions	144
Client Ages	146
Shifts Worked	146
Time Spent in Different Categories of Nursing Activities	146
Administrative Responsibilities/Primary Administrative Position	147
Summary	147
Activity Statement Performance Findings	150
Overview of Methods	150
Activity Performance Characteristics	150
Reliability	150
SME Panel Validation of Survey Findings	150
Representativeness of Activity Statements	150
Applicability of Activities to Practice Setting	151
Frequency of Activity Performance	151
Setting-Specific	151
Total Group	151

Importance of Activity Performance	151
Setting-Specific	152
Total Group	152
Summary	152
Conclusions	152
References	165
Appendix A: 2017 Canadian RN Practice Analysis Survey	166
Appendix B: 2017 RN Practice Analysis Survey Nonrespondent Study	263

LIST OF TABLES

Table 1. Correspondence of Sample and Responders for the 2017 Canadian RN Practice Analysis . .	139
Table 2. Average Years RPN/LPN/VN or Unlicensed Assistive Personnel (UAP) Experience	141
Table 3. Type and Length of Orientation	143
Table 4. Additional Coursework/Certification	143
Table 5. Employment Facilities	143
Table 6. Employment Setting Characteristics	144
Table 7. Practice Settings	145
Table 8. Average Time Spent in Different Categories of Nursing Activities	148
Table 9. Administrative Responsibilities	149
Table 10. Reliability Estimates	150
Table 11. Activity Applicability to Setting and Average Frequency of Performance	153
Table 12. Average Total Group and Setting-Specific Importance Ratings	159

LIST OF FIGURES

Figure 1. Gender of Newly Licensed/Registered RNs	141
Figure 2. Race/Ethnicity of Newly Licensed/Registered RNs	142
Figure 3. Average Months Since Graduation and Months Employed	142
Figure 4. Client Health Conditions	142
Figure 5. Client Ages	145
Figure 6. Shifts Worked by Newly Licensed RNs	146

Part 1

2017 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 examinations. Because the U.S. health care industry is rapidly changing, practice analysis studies are traditionally conducted by NCSBN 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 was 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 13 RNs was assembled to assist with the practice analysis. Panel members worked with, educated, and/or supervised the practice of RNs within their first twelve months of practice or were themselves newly licensed RNs. Panel members represented geographic NCSBN areas of the U.S. and Canadian territories/jurisdictions using the NCLEX[®] for licensure decisions, all 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 142 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 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, both forms contained 71 activity statements without shared statements. For the three Web versions of the survey, two of the surveys contained 47 activity statements and one of the Web surveys contained 48 activity statements. Utilizing such a design ensured that every activity statement appeared on two survey forms. Except for the activity statements unique to each survey form, the surveys (paper and Web) were identical.

Survey Process

Sample Selection

Two samples were randomly selected from the candidates who successfully passed the NCLEX-RN[®] examination from April 15, 2016 through March 15, 2017.

A sample of 6,000 RNs was randomly selected for the paper survey. A second sample of 6,000 RNs was also randomly selected for the Web survey. For the paper survey, a search of the national change of address verification database was performed to minimize the number of incorrect addresses to which the survey would be sent. A total of 75 surveys were removed from the initial sample due to incorrect addresses. A second sample was selected to replace those surveys that were removed.

Representativeness

The sample selected for this study was proportionally equivalent to the population from which the sample was drawn with respect to each NCSBN jurisdiction.

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 distributed evenly among a second sample of 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 2017.

Return Rates

Out of the 6,000 paper surveys mailed out, a total of 914 surveys were returned (457 were returned for Form 1 and 457 for Form 2). The return rate was 15.2% for the paper survey. Out of the 6,000 Web surveys delivered, a total of 1,729 surveys were returned (583 surveys for Form 1, 565 for Form 2, and 581 for Form 3). A total of 53 Web surveys were identified as undeliverable due to incorrect email addresses. Therefore, the adjusted return rate was 29.1% for the Web survey. Of those who completed the survey, 368 individuals (132 paper, 236 Web) did not qualify for survey ratings based on one of the following reasons. Either: (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 three demographic questions. After adjusting for incorrect addresses and removals, the analyzable response rate was 13.0% for paper and 25.1% 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. The nonrespondents rated the activity statements similar to the respondents, which provides support to the validity of the survey results.

Demographics, Experiences and Practice Environments of Participants

Demographics/Past Experiences

The majority of survey respondents (89.0%) indicated their gender as female. The age of respondent nurses averaged 31.0 years (SD 8.9 years). Respondents indicated their racial/ethnic background as follows: 70.6% White, 10.4% African American, 8.0% Hispanic, 6.0% Asian Other, 0.7% Asian Indian, 0.5% Native American, 0.5% Pacific Islander, and 3.4% other.

Newly licensed RNs listed obtaining an associate degree most frequently (50.6%) as the educational preparation for initial RN licensure. The second most frequent response listed was the baccalaureate degree (42.9%).

Respondents indicated working an average of 6.5 months as RNs in the U.S. and its territories. On average, RNs reported earning a nursing degree 11.6 months prior to taking the survey. Approximately 14.6% of newly licensed RNs reported previous experience as a licensed practical/vocational nurse (LPN/VN) and 47.1% reported previous experience as unlicensed assistive personnel. The average experience in those positions was 6.1 years as a LPN/VN and 3.1 years as an unlicensed assistive personnel.

Orientation

The majority of newly licensed RNs (96.6%) received some form of formal orientation. No formal orientation was reported by 3.4% and 0.9% reported having only classroom instruction or skills lab work for their orientation. The majority of newly licensed RNs reported working with an assigned preceptor (61.6%) for an average of 9.8 weeks. In the next largest group, 21.8% reported having a formal internship, which lasted an average of 13.9 weeks, while just 9.7% of respondents indicated performing supervised work with clients for an average of 8.4 weeks.

Certifications Earned

In the current study, Basic Life Support (63.5%), Advanced Cardiac Life Support (33.7%), and Intravenous Therapy (14.2%) were the most frequently reported certifications.

Facilities

The majority of newly licensed RNs (82.2%) in this study reported working in hospitals. Only 7.2% indicated working in long-term care facilities and 6.8% indicated working in community-based or ambulatory care facilities/organizations.

Overall, the number of beds reported in hospitals or nursing homes was most commonly distributed among 100-299 beds (25.9%), 500 or more beds (24.5%), and 300-499 beds (18.6%). Only 15.2% reported working in facilities with fewer than 100 beds.

The majority of newly licensed RNs (57.1%) reported working in urban or metropolitan areas, 29.5% work in suburban areas, and 13.4% work in rural areas.

Practice Settings

Most frequently, newly licensed RNs reported working in the medical/surgical (27.6%) and critical care (23.3%) settings. Some other commonly reported settings include step-down/progressive care (6.5%), nursing home/skilled or intermediate care (5.2%) and pediatrics (4.1%).

Client Health Conditions and Ages

A majority of the newly licensed RNs reported that they cared for clients with acute conditions (55.0%). The next highest percentage of respondents reported caring for clients with stabilized chronic conditions (38.2%), clients with unstabilized chronic conditions (34.0%) and clients with behavioral/emotional conditions (27.2%).

In terms of age, the majority of newly licensed RNs reported caring for older adult clients aged 65 to 85 (54.7%) and/or caring for adult clients aged 18 to 64 (54.7%) on their last day of work prior to completing the survey. Newly licensed RNs also indicated caring for older adults clients over the age of 85 (31.9%) and adolescent clients aged 13 to 17 (7.6%).

Shifts Worked

The shifts most commonly worked by newly licensed RNs were days (42.1%) and nights (36.8%). Only 12.3% 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 (18%), physiological adaption (14%), and pharmacological and parenteral therapies (12%).

Administrative Responsibilities/Primary Administrative Position

Of the respondents, 18.1% reported having administrative responsibilities and of those respondents, 32.9% reported having a primary administrative position. RNs working in long-term care facilities were far more likely to report having administrative responsibilities than RNs working in hospitals (56.6% in long-term care compared to 11.4% in hospitals). In addition, RNs 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 (56.7% in long-term care compared to 15.9% in hospitals). Of the RNs working in community-based settings, 42.6% reported having administrative responsibilities. Of those respondents, 34.7% 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. Cronbach's alpha coefficients were calculated for frequency and importance ratings for the paper and Web forms of the survey. The paper surveys had a reliability index of 0.97 for importance and 0.96 for frequency ratings, which is quite good. The Web surveys had a reliability index of 0.95 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 (SME) panel for the 2017 RN Practice Analysis was asked to provide independent ratings of the 142 activity statements. In general, the importance ratings of SMEs and survey respondents were somewhat similar; however, SMEs regarded most of the activity statements as more important than the respondents.

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 (89.5%) 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 their work setting. The activities ranged from 24.1% applicability (24.1% of RNs reported that the activity was performed within their work setting) to 100% (100% of the RNs 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 and total group. Average setting-specific frequencies ranged from 0.59 to 4.91. Average total group frequencies ranged from 0.20 to 4.91.

Importance of Activity Performance

Respondents were asked to rate the importance of performing each nursing activity in regards 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 3.46 to 4.91. Average total group importance ratings ranged from 3.36 to 4.91.

Summary

Respondents to the 2017 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 newly licensed RNs were somewhat similar (correlation = 0.79), 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 2017 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. 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.

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 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. Furthermore, practice analysis studies have long been recognized by measurement and testing professions as important sources of validity evidence for licensure examinations (APA, AERA, 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 2014.

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 2017 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 rate 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 were interviewed regarding their opinions. These interviews conducted with nurse leaders were recorded and transcribed. After leaders' identifying information was removed to provide anonymity, a summary of the phone interviews was made available as a source document for the SME panel to consider when developing the activity statements. In addition, two 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 methodology 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 13 registered nurses was assembled to assist with the practice analysis. Panel members worked with and/or supervised the practice of RNs within their first twelve months of practice or were themselves newly licensed RNs and represented all geographic areas of the U.S., 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 setting. 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 the public. Care was taken to create the activity statements at approximately the same level of specificity and to avoid redundancy.

Survey Development

Several processes were used to create, evaluate, and refine the survey instrument used for the 2017 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 approved 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 142 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 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, each survey form contained 71 activity 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 47 activity statements and one of the Web surveys contained 48 activity statements, without shared activity statements. Except for the activity statements, these surveys (paper and Web) 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 included 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 number of hours worked, number of clients for whom care was provided and the amount of time spent in various types of nursing activities. The fifth section pertained to 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 2017 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® from April 15, 2016 through March 15, 2017, and were not previously included in the 2017 Knowledge of Newly Licensed Registered Nurses survey. First, a sample of 6,000 practitioners was randomly selected for the paper survey. For the paper survey, a search of the national change of address verification database was performed to minimize the number of incorrect addresses to which the survey would be sent. A total of 75 surveys were removed from the initial sample due to incorrect addresses. A second sample was selected to replace those surveys that were removed.

Then, candidates with email addresses were extracted and a sample of 6,000 RNs 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 with respect to each NCSBN jurisdiction. Table 1 presents the correspondence between the population, the sample size 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 this sample.

A seven-stage mailing process was used to engage the participants in the study. A pre-survey letter or email was sent to each individual selected for the sample on April 12, 2017. One 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 an unique

access code. One week later, a reminder postcard/ email was sent to all participants reiterating the importance of the study and urging participation. In the following two weeks, a second and then a third reminder was sent to nonrespondents. Finally, reminders were sent to Web survey nonrespondents the fifth and sixth week after survey administration. The survey was conducted from April through June 2017.

Table 1. Correspondence of Population, Sample and Respondents for the 2017 RN Practice Analysis

Jurisdiction	Population	2017 Paper Sample		2017 Paper Respondents		2017 Web Sample		2017 Web Respondents	
	%	N	%	N	%	N	%	N	%
ALABAMA	1.9	116	1.9	15	1.6	116	1.9	26	1.5
ALASKA	0.2	11	0.2	1	0.1	11	0.2	1	0.1
AMERICAN SAMOA	0.0	1	0.0	0	0.0	1	0.0	0	0.0
ARIZONA	2.0	119	2.0	20	2.2	119	2.0	40	2.3
ARKANSAS	1.1	68	1.1	9	1.0	68	1.1	26	1.5
CALIFORNIA	7.5	449	7.5	75	8.2	449	7.5	142	8.2
COLORADO	1.4	86	1.4	11	1.2	86	1.4	23	1.3
CONNECTICUT	1.3	80	1.3	10	1.1	80	1.3	23	1.3
DELAWARE	0.4	21	0.4	6	0.7	21	0.4	6	0.3
DISTRICT OF COLUMBIA	0.3	17	0.3	1	0.1	17	0.3	11	0.6
FLORIDA	7.3	436	7.3	60	6.6	436	7.3	115	6.7
GEORGIA	2.8	168	2.8	25	2.7	168	2.8	58	3.4
GUAM	0.0	2	0.0	0	0.0	2	0.0	1	0.1
HAWAII	0.7	40	0.7	7	0.8	40	0.7	11	0.6
IDAHO	0.4	26	0.4	4	0.4	25	0.4	8	0.5
ILLINOIS	4.3	260	4.3	37	4.1	260	4.3	67	3.9
INDIANA	2.3	137	2.3	23	2.5	137	2.3	47	2.7
IOWA	1.2	70	1.2	6	0.7	70	1.2	18	1.0
KANSAS	1.2	69	1.2	12	1.3	69	1.2	16	0.9
KENTUCKY	1.6	96	1.6	13	1.4	96	1.6	22	1.3
LOUISIANA	1.4	81	1.4	12	1.3	81	1.4	16	0.9
MAINE	0.5	32	0.5	8	0.9	32	0.5	13	0.8
MARYLAND	1.8	110	1.8	28	3.1	110	1.8	37	2.1
MASSACHUSETTS	2.9	172	2.9	24	2.6	172	2.9	61	3.5
MICHIGAN	3.2	191	3.2	28	3.1	191	3.2	57	3.3
MINNESOTA	2.5	149	2.5	27	3.0	149	2.5	40	2.3
MISSISSIPPI	1.1	69	1.2	8	0.9	69	1.2	18	1.0
MISSOURI	2.5	151	2.5	27	3.0	151	2.5	42	2.4
MONTANA	0.3	18	0.3	1	0.1	18	0.3	5	0.3
NEBRASKA	0.7	42	0.7	12	1.3	42	0.7	9	0.5
NEVADA	0.7	42	0.7	6	0.7	42	0.7	17	1.0

Table 1. Correspondence of Population, Sample and Respondents for the 2017 RN Practice Analysis

Jurisdiction	Population	2017 Paper Sample		2017 Paper Respondents		2017 Web Sample		2017 Web Respondents	
	%	N	%	N	%	N	%	N	%
NEW HAMPSHIRE	0.5	28	0.5	7	0.8	28	0.5	5	0.3
NEW JERSEY	2.2	130	2.2	20	2.2	130	2.2	34	2.0
NEW MEXICO	0.6	37	0.6	2	0.2	37	0.6	13	0.8
NEW YORK	6.1	363	6.1	56	6.1	363	6.1	114	6.6
NORTH CAROLINA	2.8	166	2.8	16	1.8	166	2.8	43	2.5
NORTH DAKOTA	0.4	22	0.4	3	0.3	22	0.4	3	0.2
NORTHERN MARIANA ISLANDS	0.0	2	0.0	1	0.1	2	0.0	1	0.1
OHIO	4.9	291	4.9	55	6.0	291	4.9	94	5.4
OKLAHOMA	1.2	70	1.2	9	1.0	71	1.2	21	1.2
OREGON	0.9	56	0.9	9	1.0	56	0.9	21	1.2
PENNSYLVANIA	4.2	251	4.2	43	4.7	251	4.2	69	4.0
RHODE ISLAND	0.4	25	0.4	4	0.4	25	0.4	6	0.3
SOUTH CAROLINA	1.5	88	1.5	13	1.4	88	1.5	22	1.3
SOUTH DAKOTA	0.5	27	0.5	7	0.8	27	0.5	6	0.3
TENNESSEE	2.4	141	2.4	17	1.9	141	2.4	38	2.2
TEXAS	8.1	487	8.1	54	5.9	487	8.1	128	7.4
UTAH	1.0	59	1.0	11	1.2	59	1.0	13	0.8
VERMONT	0.3	15	0.3	1	0.1	15	0.3	2	0.1
VIRGIN ISLANDS	0.0	1	0.0	1	0.1	1	0.0	0	0.0
VIRGINIA	2.2	131	2.2	17	1.9	131	2.2	39	2.3
WASHINGTON	1.7	104	1.7	20	2.2	104	1.7	33	1.9
WEST VIRGINIA	0.5	27	0.5	2	0.2	27	0.5	4	0.2
WISCONSIN	2.3	140	2.3	28	3.1	140	2.3	42	2.4
WYOMING	0.2	10	0.2	2	0.2	10	0.2	2	0.1
TOTAL	100%	6000	100%	914	100%	6000	100%	1729	100%

Confidentiality

All potential participants were promised confidentiality regarding 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, a total of 914 surveys were returned (457 for Form 1 and 457 for

Form 2). The return rate was 15.2% for the paper survey. Out of the 6,000 Web surveys delivered, a total of 1,729 surveys were returned (583 for Form 1, 565 for Form 2, and 581 for Form 3). 53 Web surveys were identified as undeliverable due to incorrect email addresses. Therefore, the adjusted return rate was 29.1% for the Web survey. Of those who completed the survey, 368 individuals (132 paper, 236 Web) did not qualify for survey ratings because of one or more of the following reasons. Either: (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 three demographic questions. After adjusting for incorrect addresses and removals, the analyzable

response rate was 13.0% for paper and 25.1% 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 were no systematic differences in respondents versus nonrespondents, there would be further evidence signifying that the survey results are unbiased, which supports the validity of the 2017 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 13 RNs, subject matter experts in the practice of newly licensed RNs, met and created a comprehensive list of RN activity statements. A survey was developed and revised before being sent to 12,000 newly licensed RNs selected from lists of candidates who passed the NCLEX-RN between April 15, 2016 through March 15, 2017. The survey response rate was 13.0% for paper and 25.1% for Web. This practice analysis contains the responses of 2,275 newly licensed RNs.

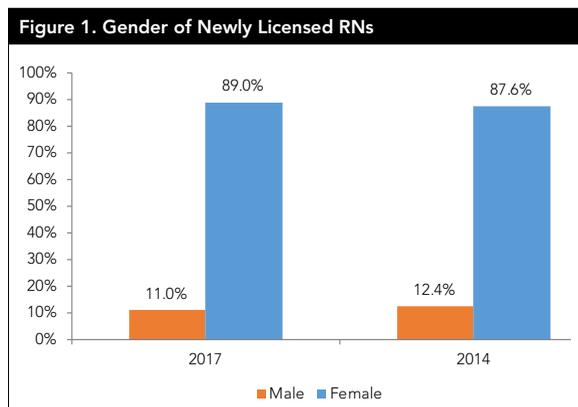
DEMOGRAPHICS, EXPERIENCES AND PRACTICE ENVIRONMENTS OF PARTICIPANTS

Demographics/Past Experiences

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

Age and Gender

The majority of newly licensed RNs (89.0%) indicated their gender as female, a slight increase from the percentage found in the 2014 survey. See Figure 1 for gender. The age of respondent nurses averaged 31.0 years (SD 8.9 years), similar to the average of 31.6 years from the 2014 survey.



Race/Ethnicity of Newly Licensed RNs

70.6% of participants in the current study reported their race/ethnicity as White. Participants also reported their race/ethnicity as follows: 10.4% African American, 8.0% Hispanic, 6.0% Asian Other, and 0.7% Asian Indian. See Figure 2 for race/ethnicity reported by newly licensed RNs.

Of the respondents, 85.2% reported English as their primary language and 10.8% reported both English and another language as their primary languages.

Educational Background

Newly licensed RNs indicated obtaining an associate degree most frequently (50.6%). The second most

frequently chosen response was baccalaureate degree (42.9%). While these percentages were similar to the educational diversity reported in 2014; there was a slight increase in the percentage of respondents reporting baccalaureate degrees and a slight decrease in the percentage of respondents that reported obtaining an associate degree. See Figure 3 for the educational background of the respondents.

Previous Licensed Practical/Vocational Nurse (LPN/VN) or Unlicensed Assistive Personnel (UAP) Experience

Respondents reported working an average of 6.5 months as an RN in the U.S. and reported being an average of 11.6 months post-graduation. The NCSBN Board of Directors approved an updated definition of the entry-level nurse based on findings of a study conducted in 2014. An entry-level nurse is defined as no more than 12 months of experience (previously no more than 6 months). This accounts for the difference between months employed and months since graduation from 2014 and 2017. The data is presented in Figure 4.

Approximately 14.6% of RNs reported previous experience as a LPN/VN and 47.1% reported previous experience as an unlicensed assistive personnel (UAP). The average experience in those positions was 6.1 years as a LPN/VN and 3.1 years as an UAP. The data is presented in Table 2.

Table 2. Average Years LPN/VN or UAP Experience

	2017		2014	
	Yrs. Exp	%*	Yrs. Exp	%*
LPN/VN	6.1	14.6	6.3	16.0
UAP	3.1	47.1	3.6	43.6

**Indicates the percentage of newly licensed RNs with previous LPN/VN or UAP experience

Orientation

The majority of newly licensed RNs (96.6%) responded receiving some form of formal orientation. No formal orientation was reported by 3.4% and 0.9% reported having only classroom instruction or skills lab work for their orientation.

Figure 2. Race/Ethnicity of Newly Licensed RNs

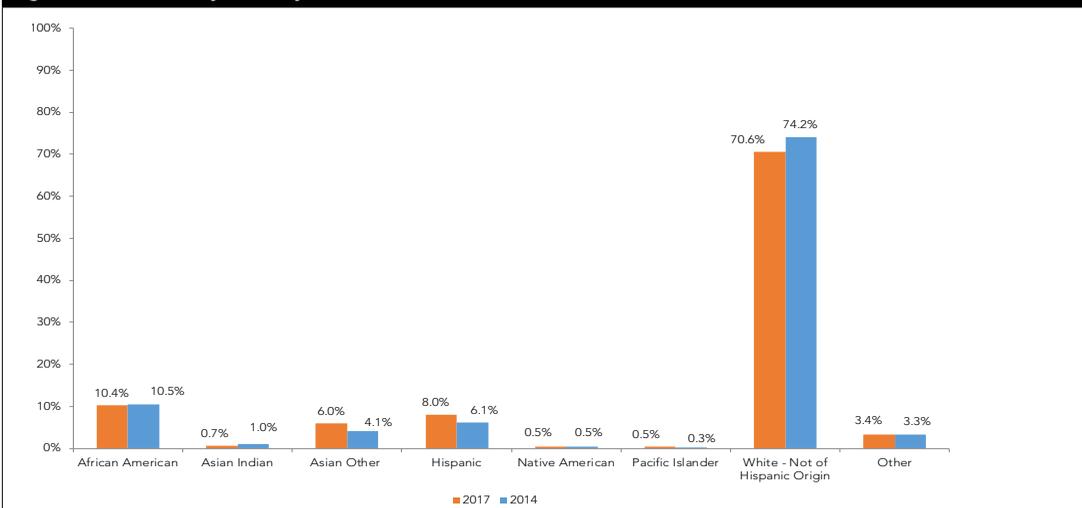


Figure 3. Educational Programs of Newly Licensed RNs

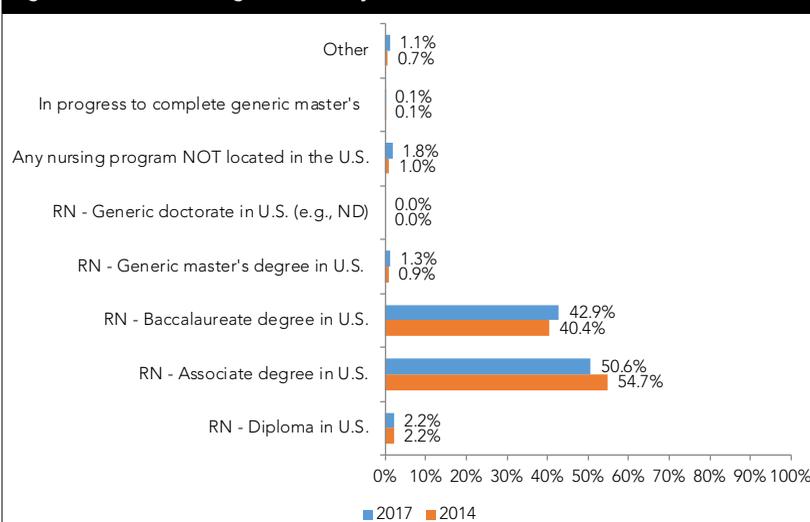


Figure 4. Average Months Since Graduation and Months Employed

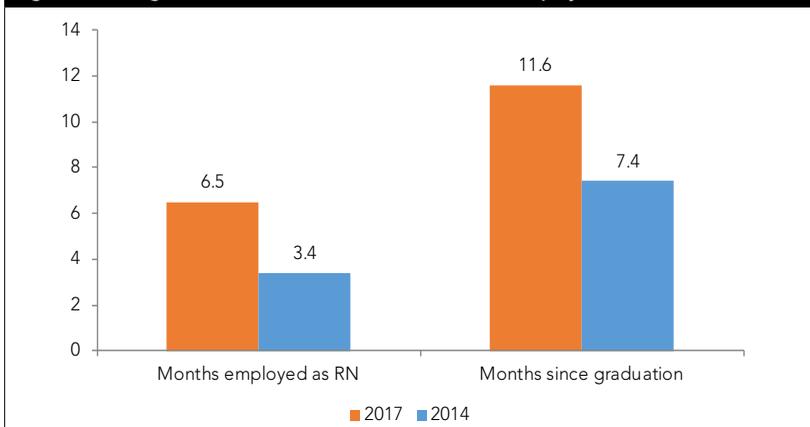


Table 3. Type and Length of Orientation

	2017		2014	
	%	Avg Weeks	%	Avg Weeks
No formal orientation	3.4	N/A	4.6	N/A
Classroom instruction/skills lab work only	0.9	3.6	1.2	2.6
Classroom and/or skills lab plus supervised work with clients	9.7	8.4	11.2	6.3
Work with an assigned preceptor(s) or mentor(s) with or without additional classroom or skills lab work	61.6	9.8	66.5	8.3
A formal internship with or without additional classroom or skills lab work	21.8	13.9	13.6	13.7
Other	2.5	8.6	2.9	6.6

Table 4. Additional Coursework/Certification*

Type of Additional Coursework/Certification	2017	2014
	% (n=2,275)	% (n=2,744)
Advanced Cardiac Life Support	33.7	24.2
Basic Life Support	63.5	57.4
Behavioral Management	5.2	3.4
Chemotherapy	1.2	0.8
Conscious/Moderate Sedation	4.7	3.8
Coronary Care	2.0	1.7
Critical Care	6.7	4.7
Intravenous Therapy	14.2	12.8
Neonatal Advanced Life Support	1.7	0.9
Neonatal Resuscitation	6.3	4.1
Pediatric Advanced Life Support	10.7	6.8
Phlebotomy	6.5	6.6
Peritoneal Dialysis	2.3	1.4
Rehabilitation	1.1	1.2
None	5.8	12.6
Other	11.0	10.2

*Respondents could select all that apply

Table 5. Employment Facilities

Type of Facility/Organization	2017	2014
	% (n=2,275)	% (n=2,744)
Hospital	82.2	72.0
Long-term care facility	7.2	14.7
Community-based or ambulatory care facility/organization	6.8	9.9
Other	3.9	3.3

Table 6. Employment Setting Characteristics

Type of Facility/Organization	2017	2014
	% (n=2,275)	% (n=2,744)
Number of Hospital or Nursing Home Beds		
Less than 50 beds	6.8	6.6
50 – 99 beds	8.4	9.9
100 – 299 beds	25.9	27.0
300 – 499 beds	18.6	19.0
500 or more beds	24.5	21.0
Don't know	7.3	6.2
Other work setting	8.5	10.2
Location of Employment Setting		
Urban/Metropolitan area	57.1	52.9
Suburban	29.5	31.8
Rural	13.4	15.3

Newly licensed RNs reported working with an assigned preceptor (61.6%) for an average of 9.8 weeks, and 9.7% reported performing supervised work with clients for an average of 8.4 weeks. An increased percentage from 2014, 21.8% of respondents reported having a formal internship, which lasted an average of 13.9 weeks. See Table 3 for type of orientation with average time spent in each.

Certifications Earned

In the current study, 94.2% of respondents reported earning additional certifications or completing coursework compared to 87.4% of respondents in 2014. Basic Life Support (63.5%), Advanced Cardiac Life Support (33.7%) and Intravenous Therapy (14.2%) were the most frequently reported certifications. See Table 4 for a complete listing of additional coursework and/or certifications completed. Survey respondents could select more than one certification, resulting in a sum greater than 100%.

Work Settings

Facilities

The majority of newly licensed RNs (82.2%) reported working in hospitals. Only 7.2% reported working in long-term care facilities and 6.8% reported working in community-based or ambulatory care facilities/organizations. Compared to 2014,

there was an increase in the percentage of newly licensed RNs working in hospitals and a decrease in the percentage of newly licensed RNs working in long-term care facilities and community-based or ambulatory care facilities/organizations. The data is presented in Table 5.

Overall, the number of beds reported in hospitals or nursing homes was most commonly distributed among 100-299 beds (25.9%), 500 or more beds (24.5%), and 300-499 beds (18.6%). Only 15.2% reported working in facilities with fewer than 100 beds.

The majority of newly licensed RNs (57.1%) reported working in urban or metropolitan areas, 29.5% work in suburban areas, and 13.4% work in rural areas. Data for the size and location of the facilities where respondents reported working is presented in Table 6.

Practice Settings

Newly licensed RNs reported working in medical/surgical most frequently (27.6%), which is nearly the same percentage reported in 2014. Critical care was the next most commonly reported practice setting, which increased in percentage compared to 2014 (from 18.7% to 23.3%). Conversely, there was a percentage decrease in such settings as nursing home, skilled or intermediate care (from 11.2% to 5.2%); other long-term care (from 2.5% to 0.9%) and rehabilitation (from 5.5% to 3.7%). See Table 7.

Table 7. Practice Settings*

Type of Facility/Organization	2017	2014
	% (n=2,275)	% (n=2,744)
Critical care (e.g., ICU, CCU, step-down units, pediatric/neonatal intensive care, emergency department, postanesthesia recovery unit)	23.3	18.7
Medical-surgical unit or any of its subspecialties (e.g., oncology, orthopedics, neurology)	27.6	27.7
Pediatrics	4.1	3.6
Nursery	1.2	1.2
Labor and delivery	2.6	2.0
Postpartum unit	1.9	1.9
Psychiatry or any of its subspecialties (e.g., detox)	3.6	3.9
Assisted Living	0.5	1.4
Operating room, including outpatient surgery and surgicenters	3.3	2.5
Nursing home, skilled or intermediate care	5.2	11.2
Other long-term care (e.g., residential care, developmental disability)	0.9	2.5
Rehabilitation	3.7	5.5
Subacute unit	1.5	2.0
Transitional care unit	0.8	1.3
Physician/APRN/Dentist office	0.5	1.1
Occupational health	0.1	0.1
Outpatient clinic	2.1	2.4
Home health, including visiting nurses associations	2.2	3.5
Public health	0.6	0.5
Student/school health	0.3	0.4
Hospice care	1.1	1.3
Prison/Correctional Facility/Jail	0.5	0.7
Short Stay/Observational	2.0	1.2
Step-down/Progressive Care	6.5	4.3
Other	4.3	4.5

*Respondents could select all that apply

Figure 5. Client Health Conditions

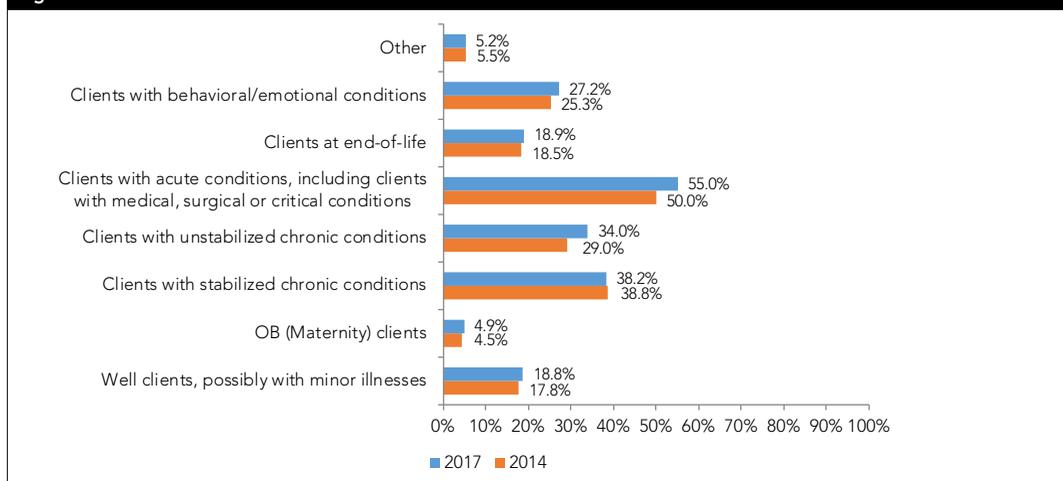


Figure 6. Client Ages

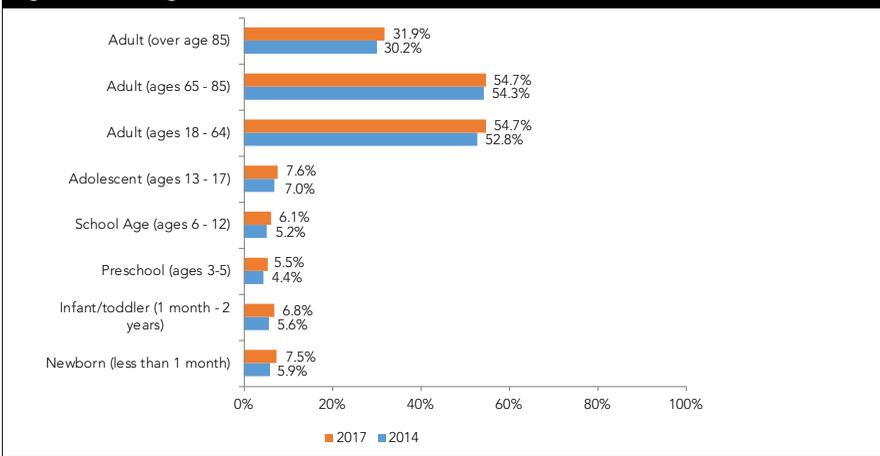
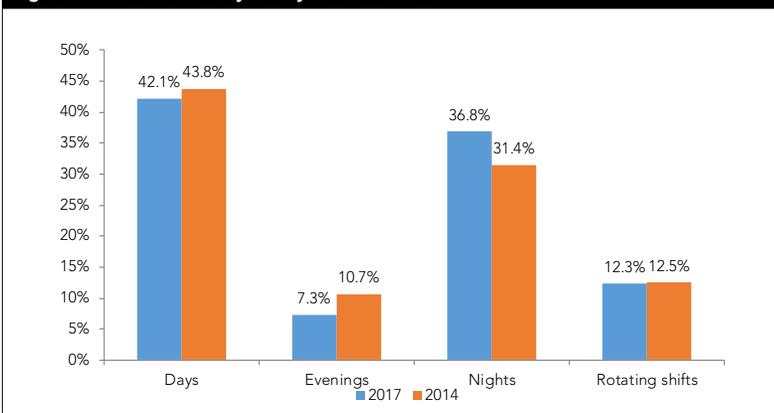


Figure 7. Shifts Worked by Newly Licensed RNs



Client Health Conditions

Newly licensed RNs reported caring for acutely ill clients (55.0%), clients with stabilized chronic conditions (38.2%), clients with unstabilized chronic conditions (34.0%), and clients with behavioral/emotional conditions (27.2%). These results are somewhat similar to the 2014 results; however, there was an increase in the percentage of nurses reporting caring for clients with acute conditions and caring for clients with unstabilized chronic conditions. Survey respondents could select more than one client health condition, resulting in a sum greater than 100%. See Figure 5.

Client Ages

The majority of newly licensed RNs reported that on their last day of work prior to completing the survey they were caring for older adult clients aged 65 to 85 (54.7%), adult clients aged 18 to 64 (54.7%), and

older adult clients aged 85 or older (31.9%). Survey respondents could select more than one client age range, resulting in a sum greater than 100%. See Figure 6.

On average, the respondents were responsible for 9.1 clients on their last workday with a standard deviation of 16.0.

Shifts Worked

The shifts most commonly worked by newly licensed RNs were days (42.1%) and nights (36.8%). Only 12.3% of respondents reported working rotating shifts. See Figure 7 for shifts reported. Note that 1.5% selected “other” for shifts worked and these responses are not reflected in Figure 7.

On a typical workday, the majority of the respondents (73.1%) worked a 12-hour shift while 16.0% worked an 8-hour shift and 3.6% worked a 10-hour shift.

Time Spent in Different Categories of Nursing Activities

Respondents to the current study 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 spent on each activity by the number of hours spent working. Because nurses often perform multiple activities simultaneously, such as teaching while giving medications or providing emotional support while giving routine care, the sum of proportions was greater than one. 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 spent in all the activities. These standardized proportions have the advantage of adding up to one. Newly licensed RNs reported spending the greatest amount of time in management of care (18%), physiological adaption (14%), pharmacological and parenteral therapies (12%), safety and infection control (12%), and basic care and comfort (12%). The least amount of time was reportedly spent on psychosocial integrity (10%), health promotion and maintenance (11%), and reduction of risk potential (11%). Compared to the 2014 study, there were only very slight variations in time spent for 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, team leader, charge nurse, or coordinator. If RNs reported having such responsibilities, they were asked if they had a primary administrative position. Of all respondents, 18.1% reported having such responsibilities and of those, 32.9% reported having a primary administrative position. RNs working in long-term care facilities were more likely to report having administrative responsibilities than RNs working in hospitals (56.6% in long-term care facilities compared to 11.4% in hospitals). In addition, RNs 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 (56.7% in long-term care facilities compared to 15.9% in hospitals). Of the RNs working in community-based settings, 42.6% reported having administrative responsibilities. Of those respondents, 34.7% reported holding a primary administrative position. Compared to 2014, the results represent a slight percentage decrease in administrative responsibilities overall (from 21.4% to 18.1%), but a percentage increase in administrative responsibilities in hospitals (from 9.4% to 11.4%) and community-based care facilities (from 37.7% to 42.6%). See Table 9 for detailed results of administrative responsibilities.

Summary

The newly licensed RNs responding to the 2017 RN Practice Analysis survey were primarily female with an average age of 31.0 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 9.8 weeks. The respondents cared mostly for clients with acute conditions who were either 18-64 years of age or 65-85 years of age.

Table 8. Average Time Spent in Different Categories of Nursing Activities

Categories of Activities		2017 Average Hours	2017 Proportion of Work Hours	2017 Standardized Proportion	2014 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).	6.23	0.55	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).	4.74	0.42	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).	4.28	0.38	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).	4.06	0.36	0.10	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).	4.66	0.41	0.12	0.12

Table 8. Average Time Spent in Different Categories of Nursing Activities

Categories of Activities		2017 Average Hours	2017 Proportion of Work Hours	2017 Standardized Proportion	2014 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 devices, dosage calculation, expected effects/outcomes, medication administration, parenteral/intravenous therapy, pharmacological agents/actions, pharmacological interactions, pharmacological pain management, and total parenteral nutrition).	4.55	0.40	0.12	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/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).	4.53	0.40	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).	5.49	0.48	0.14	0.14

Table 9. Administrative Responsibilities

Facilities	2017		2014	
	Administrative Responsibility	Primary Administrative Position*	Administrative Responsibility	Primary Administrative Position*
	%	%	%	%
All	18.1	32.9	21.4	43.4
Hospital	11.4	15.9	9.4	20.8
Long-term care	56.6	56.7	60.6	61.2
Community-based care	42.6	34.7	37.7	46.8
Other	37.9	62.5	54.3	52.8

*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 setting, frequency of performance, and importance of the activities are discussed. A validation of survey findings with estimates provided by the subject matter expert panel is also provided.

Overview of Methods

The 2017 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 times" to "5 times or more", the frequency with which they had performed the activity on their last day of work. In question B, respondents were 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" and five being "Critically Important." Applicability of the activity statement to practice setting was assessed by analyzing the number of respondents having performed each activity, excluding those that were 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. Table 10 shows that the data suggests strong evidence for the reliability of the measured outcomes in this survey.

Subject Matter Expert (SME) Panel Validation of Survey Findings

The subject matter expert (SME) panel for the 2017 RN Practice Analysis was asked to provide independent ratings of the 142 activity statements. SMEs estimated the percentage of newly licensed RNs performing the activities within their practice setting, 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

Table 10. Reliability Estimates

	Frequency			Importance		
	N Items	N Cases	Scale Reliability	N Items	N Cases	Scale Reliability
Paper Form 1	71	395	0.97	71	395	0.97
Paper Form 2	71	387	0.96	71	387	0.97
Web Form 1	48	480	0.96	48	480	0.95
Web Form 2	47	491	0.95	47	491	0.95
Web Form 3	47	522	0.95	47	522	0.95

from the practice analysis survey. Table 11 illustrates that there were no differences greater than 0.74 with respect to importance between the SME ratings and the newly licensed RNs. In general, the importance ratings of SMEs and survey respondents were somewhat similar; however, SMEs rated most of the activity statements as more important than the respondents.

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 respondents (89.5%) indicated that the survey covered the important nursing activities “well” or “very well.”

Applicability of Activities to Practice Setting

The percentages of newly licensed RNs indicating that the activities were applicable are included in Table 12. The activities ranged from 24.1% applicability (24.1% of the respondents reported that the activity was performed within their work setting) to 100% (100% 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 an antepartum client or a client in labor” (24.1%), “Provide postpartum care and education” (30.1%) and “Provide care and education for the newborn, infant, and toddler client from birth through 2 years” (32.9%). The activities with the highest percentage of applicability for respondents were “Apply principles of infection control (e.g., hand hygiene, aseptic technique, isolation, sterile technique, universal/standard precautions)” (100.0%), “Maintain client confidentiality and privacy” (99.9%), “Ensure proper identification of client when providing care” (99.9%), “Collaborate with interprofessional team members when providing client care” (99.9%), and “Practice in a manner consistent with a code of ethics for nurses” (99.9%).

Frequency of Activity Performance

Respondents were asked to rate the frequency of performance of all activities that were applicable to their work setting. Newly licensed RNs 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: setting-specific and total group. 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 perform this calculation, 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 setting-specific and total group frequency.

Setting-Specific

Average setting-specific frequencies ranged from 0.59 to 4.91. The activities performed with the lowest frequencies were “Implement and monitor phototherapy” (0.59), “Perform and manage care of client receiving peritoneal dialysis” (0.85), and “Perform postmortem care” (0.86). The activities with the highest setting-specific average frequencies of performance were “Apply principles of infection control (e.g., hand hygiene, aseptic technique, isolation, sterile technique, universal/standard precautions)” (4.91), “Provide care within the legal scope of practice” (4.85), 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 4.91. The activities performed with the lowest total group frequency were “Implement and monitor phototherapy” (0.20), “Provide care and education to an antepartum client or a client in labor” (0.34), and “Provide prenatal care and education” (0.37). The activities performed with the

overall highest frequencies were “Apply principles of infection control (e.g., hand hygiene, aseptic technique, isolation, sterile technique, universal/standard precautions)” (4.91), “Provide care within the legal scope of practice” (4.83), and “Ensure proper identification of client when providing care” (4.81). 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 with 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 and total group. Setting-specific importance was calculated by averaging only the ratings of respondents providing frequency ratings for the activity statement (RNs 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 142 activities is included in Table 13.

Setting-Specific

Average setting-specific importance ratings ranged from 3.46 to 4.91. The activities with the lowest importance ratings were “Plan and/or participate in community health education” (3.46) and “Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)” (3.54), and “Participate in performance improvement projects and quality improvement processes” (3.63). The activities with the highest importance ratings were “Prepare and administer medications using rights of medication administration” (4.91), “Ensure proper identification of client when providing care” (4.88), and “Apply principles of infection control (e.g., hand hygiene, aseptic technique, isolation, sterile technique,

universal/standard precautions)” (4.87). Appendix F presents activity statements rank ordered by average setting-specific importance ratings.

Total Group

Average total group importance ratings ranged from 3.36 to 4.91. The activities with the lowest importance ratings were “Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)” (3.36), “Implement and monitor phototherapy” (3.39), and “Plan and/or participate in community health education” (3.40). The activities with the highest importance ratings were “Prepare and administer medications using rights of medication administration” (4.91), “Ensure proper identification of client when providing care” (4.88), and “Apply principles of infection control (e.g., hand hygiene, aseptic technique, isolation, sterile technique, universal/standard precautions)” (4.87). Appendix G presents activity statements rank ordered by average total group importance ratings.

SUMMARY

Respondents to the 2017 RN Practice Analysis found the activities listed in the survey to be representative of the work they performed in their practice setting. In general, the importance ratings of SMEs and respondents were similar (correlation = 0.79), 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 2017 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. 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.

Table 11. Average Frequency and Importance Ratings (Total Group) and Percent Performing from RN Practice Analysis Survey and RN Practice Analysis Survey SME Panel

Activity Number	Activity	Newly Licensed RN Survey Ratings			SME Ratings Results			Rating Differences		
		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, and/or discharge a client	96.7	3.12	4.37	100	3.30	4.60	-3.3	-0.18	-0.23
2	Provide and receive hand-off of care (report) on assigned clients	98.5	3.72	4.71	100	4.10	4.70	-1.5	-0.38	0.01
3	Assign and supervise care of client provided by others (e.g., LPN/VN, assistive personnel, other RNs)	92.7	3.17	4.06	100	4.10	4.50	-7.3	-0.93	-0.44
4	Advocate for client rights and needs	99.6	3.66	4.65	100	3.10	4.40	-0.4	0.56	0.25
5	Prioritize the delivery of client care	99.5	4.61	4.68	100	4.70	4.70	-0.5	-0.09	-0.02
6	Participate in performance improvement projects and quality improvement processes	86.1	1.43	3.62	100	1.70	3.60	-13.9	-0.27	0.02
7	Collaborate with interprofessional team members when providing client care	99.9	4.28	4.57	100	4.30	4.40	-0.1	-0.02	0.17
8	Receive and transcribe health care provider orders	97.1	3.45	4.47	90.0	3.20	4.50	7.1	0.25	-0.03
9	Integrate advanced directives into client plan of care	85.5	1.71	3.92	100	2.10	4.50	-14.5	-0.39	-0.58
10	Verify the client receives appropriate education and consents for care and procedures	99.0	3.38	4.52	100	2.90	4.20	-1.0	0.48	0.32
11	Provide education to clients and staff about client rights and responsibilities	97.6	3.09	4.02	100	1.80	3.70	-2.4	1.29	0.32
12	Assess the need for referrals and obtain necessary orders	94.8	2.73	4.07	100	2.50	3.90	-5.2	0.23	0.17
13	Initiate, evaluate and update client plan of care	98.3	3.84	4.12	100	4.30	4.30	-1.7	-0.46	-0.18
14	Maintain client confidentiality and privacy	99.9	4.70	4.69	100	5.00	5.00	-0.1	-0.30	-0.31
15	Recognize limitations of self and others and utilize resources	99.2	3.75	4.35	100	3.50	4.60	-0.8	0.25	-0.25
16	Report client conditions as required by law (e.g., abuse/neglect and communicable disease)	81.3	0.94	4.49	100	1.00	4.30	-18.7	-0.06	0.19
17	Manage conflict among clients and health care staff	92.0	1.58	3.77	100	1.30	3.80	-8.0	0.28	-0.03
18	Utilize resources to enhance client care (e.g., evidenced-based research, information technology, policies and procedures)	98.3	3.50	4.33	100	3.20	4.30	-1.7	0.30	0.03
19	Recognize ethical dilemmas and take appropriate action	94.0	1.50	4.13	100	1.80	4.40	-6.0	-0.30	-0.27

Table 11. Average Frequency and Importance Ratings (Total Group) and Percent Performing from RN Practice Analysis Survey and RN Practice Analysis Survey SME Panel

Activity Number	Activity	Newly Licensed RN Survey Ratings			SME Ratings Results			Rating Differences		
		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
20	Use approved abbreviations and standard terminology when documenting care	99.5	4.27	3.98	100	3.60	4.10	-0.5	0.67	-0.12
21	Organize workload to manage time effectively	99.5	4.62	4.57	100	5.00	4.90	-0.5	-0.38	-0.33
22	Practice in a manner consistent with a code of ethics for nurses	99.9	4.71	4.72	100	4.70	4.80	-0.1	0.01	-0.08
23	Provide care within the legal scope of practice	99.6	4.83	4.83	100	4.60	5.00	-0.4	0.23	-0.17
24	Practice and advocate for cost effective care	94.5	2.66	3.68	100	2.20	3.50	-5.5	0.46	0.18
25	Apply principles of infection control (e.g., hand hygiene, aseptic technique, isolation, sterile technique, universal/standard precautions)	100.0	4.91	4.87	100	4.70	5.00	0.0	0.21	-0.13
26	Protect client from injury (e.g., falls, electrical hazards)	99.5	4.45	4.79	100	4.70	4.90	-0.5	-0.25	-0.11
27	Verify appropriateness and accuracy of a treatment order	98.7	4.11	4.70	100	3.90	4.70	-1.3	0.21	0.00
28	Follow procedures for handling biohazardous and hazardous materials	98.7	3.40	4.50	100	3.20	4.50	-1.3	0.20	0.00
29	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	92.7	2.44	4.28	90.0	2.50	4.00	2.7	-0.06	0.28
30	Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	99.1	4.26	4.48	100	4.80	4.70	-0.9	-0.54	-0.22
31	Acknowledge and document practice errors and near misses (e.g., incident report for medication error)	89.7	0.95	4.42	100	1.90	4.90	-10.3	-0.95	-0.48
32	Ensure proper identification of client when providing care	99.9	4.81	4.88	100	5.00	4.90	-0.1	-0.19	-0.02
33	Facilitate appropriate and safe use of equipment	99.4	4.20	4.46	100	4.40	4.80	-0.6	-0.20	-0.34
34	Educate client on safety issues	99.0	3.85	4.49	100	3.70	4.40	-1.0	0.15	0.09
35	Participate in emergency response plans (e.g., internal/external disaster, bomb threat, community planning)	81.7	0.79	4.02	100	0.70	4.00	-18.3	0.09	0.02
36	Follow requirements for use of restraints	77.8	1.31	4.28	100	2.40	4.50	-22.2	-1.09	-0.22
37	Educate client and staff regarding infection control measures	98.0	2.89	4.37	100	3.40	4.40	-2.0	-0.51	-0.03
38	Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	98.3	3.44	4.60	100	3.60	4.70	-1.7	-0.16	-0.10

Table 11. Average Frequency and Importance Ratings (Total Group) and Percent Performing from RN Practice Analysis Survey and RN Practice Analysis Survey SME Panel

Activity Number	Activity	Newly Licensed RN Survey Ratings			SME Ratings Results			Rating Differences		
		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
39	Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)	78.9	0.72	4.41	100	1.50	4.60	-21.1	-0.78	-0.19
40	Provide prenatal care and education	34.3	0.37	3.79	50.0	0.70	4.20	-15.7	-0.33	-0.41
41	Plan and/or participate in community health education	64.1	0.88	3.40	60.0	1.00	3.90	4.1	-0.12	-0.50
42	Perform targeted screening assessments (e.g., vision, nutrition)	85.4	2.23	3.81	70.0	2.40	4.10	15.4	-0.17	-0.29
43	Educate client about prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	91.5	2.19	4.01	100	2.80	4.30	-8.5	-0.61	-0.29
44	Educate client about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	96.8	2.89	3.95	90.0	2.60	4.40	6.8	0.29	-0.45
45	Provide postpartum care and education	30.1	0.50	3.73	40.0	0.50	3.60	-9.9	0.00	0.13
46	Perform comprehensive health assessments	94.3	3.87	4.47	100	3.50	4.50	-5.7	0.37	-0.03
47	Assess client's readiness to learn, learning preferences, and barriers to learning	96.9	3.41	4.00	100	3.50	4.20	-3.1	-0.09	-0.20
48	Provide care and education for the newborn, infant, and toddler client from birth through 2 years	32.9	0.80	3.97	30.0	0.50	3.60	2.9	0.30	0.37
49	Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	38.3	0.59	3.67	40.0	0.80	3.90	-1.7	-0.21	-0.23
50	Provide care and education for the adult client ages 18 through 64 years	94.7	4.07	4.32	100	4.70	4.30	-5.3	-0.63	0.02
51	Provide care and education for the adult client ages 65 years and over	86.8	3.47	4.14	100	3.78	4.22	-13.2	-0.31	-0.08
52	Assess client ability to manage care in home environment and plan care accordingly	87.4	2.33	4.15	100	3.00	4.00	-12.6	-0.67	0.15
53	Assess and educate clients about health risks based on family, population, and community characteristics	87.5	2.14	3.67	100	2.33	4.22	-12.5	-0.19	-0.55
54	Provide care and education to an antepartum client or a client in labor	24.1	0.34	3.81	22.2	0.56	3.56	1.9	-0.22	0.25
55	Assess psychosocial, spiritual, and/or occupational factors affecting care and plan interventions	95.9	2.76	3.88	100	3.33	4.11	-4.1	-0.57	-0.23

Table 11. Average Frequency and Importance Ratings (Total Group) and Percent Performing from RN Practice Analysis Survey and RN Practice Analysis Survey SME Panel

Activity Number	Activity	Newly Licensed RN Survey Ratings			SME Ratings Results			Rating Differences		
		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
56	Assess client for abuse or neglect and intervene as appropriate	93.8	2.23	4.32	100	2.11	4.33	-6.2	0.12	-0.01
57	Assess client for substance abuse, dependency, withdrawal, or toxicities and intervene as appropriate	90.5	2.14	4.16	100	2.44	4.33	-9.5	-0.30	-0.17
58	Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	88.5	2.19	4.16	100	2.44	4.00	-11.5	-0.25	0.16
59	Promote a therapeutic environment	99.5	4.34	4.18	100	4.44	4.44	-0.5	-0.10	-0.26
60	Incorporate client cultural practices and beliefs when planning and providing care	97.5	2.62	4.05	100	3.44	3.89	-2.5	-0.82	0.16
61	Provide end-of-life care and education to clients	76.7	0.97	4.02	100	1.56	4.22	-23.3	-0.59	-0.20
62	Assess the potential for violence and use safety precautions	95.8	2.67	4.33	100	2.56	4.56	-4.2	0.11	-0.23
63	Assess family dynamics to determine plan of care	95.1	2.64	3.86	100	3.11	4.22	-4.9	-0.47	-0.36
64	Assess client's ability to cope with life changes and provide support	96.3	2.69	4.13	100	2.44	4.00	-3.7	0.25	0.13
65	Provide care for a client experiencing grief or loss	90.2	1.39	3.92	100	0.89	4.00	-9.8	0.50	-0.08
66	Use therapeutic communication techniques	99.1	4.37	4.29	100	4.89	4.44	-0.9	-0.52	-0.15
67	Incorporate behavioral management techniques when caring for a client	93.0	2.25	3.84	100	3.11	4.33	-7.0	-0.86	-0.49
68	Recognize nonverbal cues to physical and/or psychological stressors	99.1	3.66	4.25	100	4.00	4.56	-0.9	-0.34	-0.31
69	Provide care for a client experiencing visual, auditory, and/or cognitive distortions	92.6	2.41	4.07	100	2.56	4.22	-7.4	-0.15	-0.15
70	Assess and/or intervene in client performance of activities of daily living	94.8	3.19	4.03	100	3.67	4.11	-5.2	-0.48	-0.08
71	Provide client nutrition through tube feedings	83.0	1.63	4.05	88.9	1.89	4.11	-5.9	-0.26	-0.06
72	Perform postmortem care	68.2	0.59	3.69	88.9	0.56	3.33	-20.7	0.03	0.36
73	Perform irrigations (e.g., of bladder, ear, eye)	80.7	0.91	3.70	100	1.33	4.44	-19.3	-0.42	-0.74
74	Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	95.4	3.17	4.16	100	2.33	3.89	-4.6	0.84	0.27

Table 11. Average Frequency and Importance Ratings (Total Group) and Percent Performing from RN Practice Analysis Survey and RN Practice Analysis Survey SME Panel

Activity Number	Activity	Newly Licensed RN Survey Ratings			SME Ratings Results			Rating Differences		
		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
75	Perform skin assessment and/or implement measures to maintain skin integrity and prevent skin breakdown	97.3	4.05	4.51	100	4.22	4.44	-2.7	-0.17	0.07
76	Assess and manage client with an alteration in elimination	95.0	2.99	4.16	100	3.33	4.33	-5.0	-0.34	-0.17
77	Apply, maintain, or remove orthopedic devices	77.0	1.17	3.50	88.9	1.11	3.33	-11.9	0.06	0.17
78	Provide non-pharmacological comfort measures	99.1	3.89	4.03	100	4.11	4.11	-0.9	-0.22	-0.08
79	Monitor the client's nutritional status	95.6	3.26	4.13	100	3.00	4.11	-4.4	0.26	0.02
80	Assess client sleep/rest pattern and intervene as needed	90.7	2.55	3.68	100	2.67	4.11	-9.3	-0.12	-0.43
81	Evaluate client intake and output and intervene as needed	95.9	3.82	4.33	100	3.44	4.11	-4.1	0.38	0.22
82	Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	96.1	3.33	4.24	100	3.56	4.22	-3.9	-0.23	0.02
83	Assess client for pain and intervene as appropriate	99.6	4.53	4.35	100	4.56	4.33	-0.4	-0.03	0.02
84	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupuncture, supplements)	77.3	1.23	3.36	77.8	1.44	3.22	-0.5	-0.21	0.14
85	Evaluate appropriateness and accuracy of medication order for client	99.5	4.35	4.74	100	4.67	4.67	-0.5	-0.32	0.07
86	Prepare and administer medications using rights of medication administration	99.0	4.73	4.91	100	4.89	5.00	-1.0	-0.16	-0.09
87	Perform calculations needed for medication administration	96.0	2.88	4.67	100	3.56	4.67	-4.0	-0.68	0.00
88	Monitor intravenous infusion and maintain site	93.2	4.00	4.68	88.9	4.44	4.44	4.3	-0.44	0.24
89	Handle and/or administer controlled substances within regulatory guidelines	96.9	3.81	4.70	100	4.56	4.89	-3.1	-0.75	-0.19
90	Handle and/or administer high-risk medications	96.0	3.35	4.78	100	4.11	5.00	-4.0	-0.76	-0.22
91	Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)	98.6	4.23	4.75	100	4.78	4.78	-1.4	-0.55	-0.03
92	Titrate dosage of medication based on assessment and ordered parameters	88.1	2.34	4.65	100	2.00	4.22	-11.9	0.34	0.43
93	Administer blood products and evaluate client response	80.4	1.13	4.63	88.9	1.78	4.67	-8.5	-0.65	-0.04

Table 11. Average Frequency and Importance Ratings (Total Group) and Percent Performing from RN Practice Analysis Survey and RN Practice Analysis Survey SME Panel

Activity Number	Activity	Newly Licensed RN Survey Ratings			SME Ratings Results			Rating Differences		
		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
94	Access central venous access devices	86.1	1.99	4.40	87.5	2.38	4.44	-1.4	-0.39	-0.04
95	Educate client about medications	98.6	4.01	4.34	100	3.89	4.44	-1.4	0.12	-0.10
96	Evaluate client response to medication	98.5	4.46	4.69	100	4.67	4.56	-1.5	-0.21	0.13
97	Administer parenteral nutrition and evaluate client response	76.6	1.13	4.02	77.8	1.78	3.67	-1.2	-0.65	0.35
98	Administer medications for pain management	96.0	3.89	4.40	100	3.89	4.67	-4.0	0.00	-0.27
99	Participate in medication reconciliation process	92.7	2.39	4.19	100	3.33	4.67	-7.3	-0.94	-0.48
100	Handle and maintain medication in a safe and controlled environment	98.9	4.70	4.73	100	4.67	4.44	-1.1	0.03	0.29
101	Assess and respond to changes and/or trends in client vital signs	99.2	4.02	4.78	100	4.78	4.89	-0.8	-0.76	-0.11
102	Perform focused assessments	98.6	4.45	4.62	100	4.89	4.75	-1.4	-0.44	-0.13
103	Monitor the results of diagnostic testing and intervene as needed	96.3	3.26	4.43	100	3.67	4.13	-3.7	-0.41	0.30
104	Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)	97.5	3.91	4.54	100	4.22	4.63	-2.5	-0.31	-0.09
105	Evaluate responses to procedures and treatments	98.4	3.81	4.42	100	4.67	4.50	-1.6	-0.86	-0.08
106	Provide preoperative or postoperative education	81.4	1.69	4.09	77.8	1.56	3.75	3.6	0.13	0.34
107	Provide preoperative care	76.2	1.12	3.92	77.8	1.56	3.88	-1.6	-0.44	0.04
108	Manage client during a procedure with moderate sedation	53.2	0.87	4.25	77.8	1.33	4.00	-24.6	-0.46	0.25
109	Manage client following a procedure with moderate sedation	75.5	1.30	4.17	77.8	1.44	4.13	-2.3	-0.14	0.04
110	Obtain blood specimens (e.g. venipuncture, venous access device, central line)	91.2	2.39	4.20	88.9	3.00	4.13	2.3	-0.61	0.07
111	Use precautions to prevent injury and/or complications associated with a procedure or diagnosis	95.4	3.25	4.40	100	3.78	4.25	-4.6	-0.53	0.15
112	Educate client about treatments and procedures	97.2	3.35	4.29	88.9	3.33	3.88	8.3	0.02	0.41
113	Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)	97.1	2.28	3.94	100	2.00	4.00	-2.9	0.28	-0.06

Table 11. Average Frequency and Importance Ratings (Total Group) and Percent Performing from RN Practice Analysis Survey and RN Practice Analysis Survey SME Panel

Activity Number	Activity	Newly Licensed RN Survey Ratings			SME Ratings Results			Rating Differences		
		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
114	Insert, maintain, or remove a nasal/oral gastrointestinal tube	78.3	1.20	3.95	88.9	1.78	4.22	-10.6	-0.58	-0.27
115	Maintain percutaneous feeding tube	77.3	1.15	3.87	88.9	1.44	3.89	-11.6	-0.29	-0.02
116	Insert, maintain, or remove a urinary catheter	92.6	1.99	4.07	88.9	1.67	4.22	3.7	0.32	-0.15
117	Insert, maintain, or remove a peripheral intravenous line	90.7	3.13	4.23	88.9	3.00	4.11	1.8	0.13	0.12
118	Recognize trends and changes in client condition and intervene as needed	98.9	3.59	4.79	88.9	4.33	4.44	10.0	-0.74	0.35
119	Apply and/or maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	89.1	2.79	3.91	88.9	2.67	4.00	0.2	0.12	-0.09
120	Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	85.3	1.83	4.28	88.9	1.78	4.11	-3.6	0.05	0.17
121	Perform emergency care procedures	86.6	1.18	4.64	100	1.67	4.78	-13.4	-0.49	-0.14
122	Monitor and care for clients on a ventilator	49.3	0.91	4.41	66.7	1.33	4.33	-17.4	-0.42	0.08
123	Perform wound care and/or dressing change	93.9	2.37	4.02	100	2.67	4.33	-6.1	-0.30	-0.31
124	Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	57.3	0.62	4.10	77.8	1.22	4.22	-20.5	-0.60	-0.12
125	Provide ostomy care and/or education (e.g., tracheal, enteral)	81.3	1.16	3.89	88.9	1.67	4.11	-7.6	-0.51	-0.22
126	Provide postoperative care	74.6	1.63	4.23	80.0	1.80	4.10	-5.4	-0.17	0.13
127	Perform and manage care of client receiving peritoneal dialysis	56.8	0.48	3.82	90.0	0.60	3.30	-33.2	-0.12	0.52
128	Perform suctioning	83.9	1.61	4.22	90.0	2.40	4.20	-6.1	-0.79	0.02
129	Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	83.4	1.99	3.95	90.0	1.80	3.50	-6.6	0.19	0.45
130	Manage the care of a client on telemetry	74.6	2.78	4.28	80.0	2.90	4.10	-5.4	-0.12	0.18
131	Manage the care of a client with impaired ventilation/oxygenation	90.8	2.31	4.58	90.0	2.40	4.60	0.8	-0.09	-0.02
132	Maintain optimal temperature of client	92.2	2.99	4.20	90.0	2.10	3.90	2.2	0.89	0.30
133	Implement and monitor phototherapy	33.5	0.20	3.39	30.0	0.50	2.89	3.5	-0.30	0.50

Table 11. Average Frequency and Importance Ratings (Total Group) and Percent Performing from RN Practice Analysis Survey and RN Practice Analysis Survey SME Panel

Activity Number	Activity	Newly Licensed RN Survey Ratings			SME Ratings Results			Rating Differences		
		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
134	Manage the care of a client with a pacing device	81.2	1.29	4.12	80.0	1.00	3.90	1.2	0.29	0.22
135	Monitor and maintain arterial lines	58.7	1.01	4.21	70.0	1.70	3.50	-11.3	-0.69	0.71
136	Manage the care of the client with a fluid and electrolyte imbalance	92.0	2.54	4.51	90.0	3.50	4.20	2.0	-0.96	0.31
137	Manage the care of a client with alteration in hemodynamics, tissue perfusion, and/or hemostasis	88.3	2.08	4.43	90.0	3.30	4.70	-1.7	-1.22	-0.27
138	Evaluate the effectiveness of the treatment plan for a client with an acute or chronic diagnosis	94.6	3.52	4.33	100	4.00	4.30	-5.4	-0.48	0.03
139	Identify pathophysiology related to an acute or chronic condition	93.8	2.90	4.27	100	4.20	4.40	-6.2	-1.30	-0.13
140	Manage the care of a client receiving hemodialysis or continuous renal replacement therapy	70.3	1.05	4.17	90.0	1.10	3.60	-19.7	-0.05	0.57
141	Recognize signs and symptoms of client complications and intervene	99.2	3.22	4.76	100	3.90	4.90	-0.8	-0.68	-0.14
142	Educate client regarding an acute or chronic condition	96.3	3.23	4.32	100	3.30	4.20	-3.7	-0.07	0.12

Table 12. Activity Applicability to Setting and Average Frequency of Performance

Activity Number	Activity	Apply to Setting	Average Frequency (Setting-Specific)			Average Frequency (Total Group)		
		%	N	Avg	Std. Err	N	Avg	Std. Err
1	Perform procedures necessary to safely admit, transfer, and/or discharge a client	96.7	695	3.23	0.07	719	3.12	0.07
2	Provide and receive hand-off of care (report) on assigned clients	98.5	766	3.78	0.05	778	3.72	0.05
3	Assign and supervise care of client provided by others (e.g., LPN/VN, assistive personnel, other RNs)	92.7	724	3.42	0.07	781	3.17	0.07
4	Advocate for client rights and needs	99.6	711	3.68	0.06	714	3.66	0.06
5	Prioritize the delivery of client care	99.5	780	4.64	0.03	784	4.61	0.03
6	Participate in performance improvement projects and quality improvement processes	86.1	663	1.66	0.06	770	1.43	0.06
7	Collaborate with interprofessional team members when providing client care	99.9	716	4.28	0.05	717	4.28	0.05
8	Receive and transcribe health care provider orders	97.1	745	3.55	0.06	767	3.45	0.06
9	Integrate advanced directives into client plan of care	85.5	667	2.00	0.07	780	1.71	0.07
10	Verify the client receives appropriate education and consents for care and procedures	99.0	705	3.42	0.06	712	3.38	0.06
11	Provide education to clients and staff about client rights and responsibilities	97.6	762	3.16	0.07	781	3.09	0.07
12	Assess the need for referrals and obtain necessary orders	94.8	731	2.88	0.07	771	2.73	0.07
13	Initiate, evaluate and update client plan of care	98.3	706	3.91	0.06	718	3.84	0.06
14	Maintain client confidentiality and privacy	99.9	768	4.70	0.03	769	4.70	0.03
15	Recognize limitations of self and others and utilize resources	99.2	772	3.78	0.05	778	3.75	0.05
16	Report client conditions as required by law (e.g., abuse/neglect and communicable disease)	81.3	579	1.15	0.07	712	0.94	0.06
17	Manage conflict among clients and health care staff	92.0	715	1.72	0.07	777	1.58	0.06
18	Utilize resources to enhance client care (e.g., evidenced-based research, information technology, policies and procedures)	98.3	759	3.56	0.06	772	3.50	0.06
19	Recognize ethical dilemmas and take appropriate action	94.0	668	1.59	0.07	711	1.50	0.07
20	Use approved abbreviations and standard terminology when documenting care	99.5	772	4.29	0.05	776	4.27	0.05
21	Organize workload to manage time effectively	99.5	774	4.65	0.03	778	4.62	0.03
22	Practice in a manner consistent with a code of ethics for nurses	99.9	706	4.71	0.03	707	4.71	0.03
23	Provide care within the legal scope of practice	99.6	771	4.85	0.02	774	4.83	0.03
24	Practice and advocate for cost effective care	94.5	722	2.82	0.07	764	2.66	0.07
25	Apply principles of infection control (e.g., hand hygiene, aseptic technique, isolation, sterile technique, universal/standard precautions)	100%	715	4.91	0.02	715	4.91	0.02
26	Protect client from injury (e.g., falls, electrical hazards)	99.5	762	4.47	0.04	766	4.45	0.04

Table 12. Activity Applicability to Setting and Average Frequency of Performance

Activity Number	Activity	Apply to Setting	Average Frequency (Setting-Specific)			Average Frequency (Total Group)		
		%	N	Avg	Std. Err	N	Avg	Std. Err
27	Verify appropriateness and accuracy of a treatment order	98.7	766	4.16	0.05	776	4.11	0.05
28	Follow procedures for handling biohazardous and hazardous materials	98.7	699	3.44	0.07	708	3.40	0.07
29	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	92.7	719	2.63	0.08	776	2.44	0.08
30	Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	99.1	767	4.30	0.04	774	4.26	0.05
31	Acknowledge and document practice errors and near misses (e.g., incident report for medication error)	89.7	641	1.06	0.07	715	0.95	0.06
32	Ensure proper identification of client when providing care	99.9	767	4.82	0.02	768	4.81	0.03
33	Facilitate appropriate and safe use of equipment	99.4	770	4.23	0.05	775	4.20	0.05
34	Educate client on safety issues	99.0	704	3.89	0.06	711	3.85	0.06
35	Participate in emergency response plans (e.g., internal/external disaster, bomb threat, community planning)	81.7	634	0.97	0.06	776	0.79	0.05
36	Follow requirements for use of restraints	77.8	598	1.69	0.08	769	1.31	0.07
37	Educate client and staff regarding infection control measures	98.0	698	2.95	0.07	712	2.89	0.07
38	Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	98.3	754	3.50	0.07	767	3.44	0.07
39	Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)	78.9	615	0.92	0.06	779	0.72	0.05
40	Provide prenatal care and education	34.3	243	1.07	0.11	709	0.37	0.04
41	Plan and/or participate in community health education	64.1	497	1.37	0.08	775	0.88	0.06
42	Perform targeted screening assessments (e.g., vision, nutrition)	85.4	661	2.61	0.08	774	2.23	0.07
43	Educate client about prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	91.5	653	2.39	0.08	714	2.19	0.07
44	Educate client about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	96.8	747	2.98	0.07	772	2.89	0.07
45	Provide postpartum care and education	30.1	231	1.67	0.14	767	0.50	0.05
46	Perform comprehensive health assessments	94.3	658	4.10	0.06	698	3.87	0.07
47	Assess client's readiness to learn, learning preferences, and barriers to learning	96.9	752	3.52	0.06	776	3.41	0.07
48	Provide care and education for the newborn, infant, and toddler client from birth through 2 years	32.9	254	2.43	0.14	772	0.80	0.06
49	Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	38.3	274	1.53	0.12	716	0.59	0.05
50	Provide care and education for the adult client ages 18 through 64 years	94.7	727	4.30	0.05	768	4.07	0.06
51	Provide care and education for the adult client ages 65 years and over	86.8	662	4.00	0.06	763	3.47	0.07

Table 12. Activity Applicability to Setting and Average Frequency of Performance

Activity Number	Activity	Apply to Setting	Average Frequency (Setting-Specific)			Average Frequency (Total Group)		
		%	N	Avg	Std. Err	N	Avg	Std. Err
52	Assess client ability to manage care in home environment and plan care accordingly	87.4	620	2.67	0.08	709	2.33	0.07
53	Assess and educate clients about health risks based on family, population, and community characteristics	87.5	677	2.45	0.08	774	2.14	0.07
54	Provide care and education to an antepartum client or a client in labor	24.1	186	1.41	0.15	771	0.34	0.04
55	Assess psychosocial, spiritual, and/or occupational factors affecting care and plan interventions	95.9	686	2.87	0.07	715	2.76	0.07
56	Assess client for abuse or neglect and intervene as appropriate	93.8	715	2.38	0.08	762	2.23	0.08
57	Assess client for substance abuse, dependency, withdrawal, or toxicities and intervene as appropriate	90.5	705	2.36	0.07	779	2.14	0.07
58	Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	88.5	629	2.47	0.08	711	2.19	0.08
59	Promote a therapeutic environment	99.5	766	4.37	0.04	770	4.34	0.04
60	Incorporate client cultural practices and beliefs when planning and providing care	97.5	751	2.69	0.07	770	2.62	0.07
61	Provide end-of-life care and education to clients	76.7	547	1.27	0.08	713	0.97	0.06
62	Assess the potential for violence and use safety precautions	95.8	735	2.78	0.08	767	2.67	0.08
63	Assess family dynamics to determine plan of care	95.1	738	2.77	0.07	776	2.64	0.07
64	Assess client's ability to cope with life changes and provide support	96.3	681	2.79	0.07	707	2.69	0.07
65	Provide care for a client experiencing grief or loss	90.2	697	1.54	0.07	773	1.39	0.06
66	Use therapeutic communication techniques	99.1	759	4.41	0.04	766	4.37	0.05
67	Incorporate behavioral management techniques when caring for a client	93.0	664	2.42	0.07	714	2.25	0.07
68	Recognize nonverbal cues to physical and/or psychological stressors	99.1	759	3.69	0.06	766	3.66	0.06
69	Provide care for a client experiencing visual, auditory, and/or cognitive distortions	92.6	717	2.60	0.07	774	2.41	0.07
70	Assess and/or intervene in client performance of activities of daily living	94.8	669	3.37	0.07	706	3.19	0.07
71	Provide client nutrition through tube feedings	83.0	641	1.96	0.08	772	1.63	0.07
72	Perform postmortem care	68.2	527	0.86	0.06	773	0.59	0.05
73	Perform irrigations (e.g., of bladder, ear, eye)	80.7	578	1.12	0.07	716	0.91	0.06
74	Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	95.4	729	3.32	0.07	764	3.17	0.07
75	Perform skin assessment and/or implement measures to maintain skin integrity and prevent skin breakdown	97.3	753	4.17	0.05	774	4.05	0.06
76	Assess and manage client with an alteration in elimination	95.0	605	3.15	0.07	637	2.99	0.07
77	Apply, maintain, or remove orthopedic devices	77.0	548	1.52	0.08	712	1.17	0.06

Table 12. Activity Applicability to Setting and Average Frequency of Performance

Activity Number	Activity	Apply to Setting	Average Frequency (Setting-Specific)			Average Frequency (Total Group)		
		%	N	Avg	Std. Err	N	Avg	Std. Err
78	Provide non-pharmacological comfort measures	99.1	426	3.93	0.07	430	3.89	0.07
79	Monitor the client's nutritional status	95.6	613	3.41	0.07	641	3.26	0.07
80	Assess client sleep/rest pattern and intervene as needed	90.7	640	2.81	0.07	706	2.55	0.07
81	Evaluate client intake and output and intervene as needed	95.9	701	3.98	0.06	731	3.82	0.06
82	Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	96.1	612	3.47	0.07	637	3.33	0.07
83	Assess client for pain and intervene as appropriate	99.6	709	4.55	0.04	712	4.53	0.04
84	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)	77.3	562	1.59	0.08	727	1.23	0.07
85	Evaluate appropriateness and accuracy of medication order for client	99.5	639	4.37	0.05	642	4.35	0.05
86	Prepare and administer medications using rights of medication administration	99.0	701	4.77	0.03	708	4.73	0.04
87	Perform calculations needed for medication administration	96.0	702	3.00	0.07	731	2.88	0.07
88	Monitor intravenous infusion and maintain site	93.2	594	4.29	0.06	637	4.00	0.07
89	Handle and/or administer controlled substances within regulatory guidelines	96.9	689	3.93	0.06	711	3.81	0.07
90	Handle and/or administer high-risk medications	96.0	695	3.49	0.07	724	3.35	0.07
91	Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)	98.6	634	4.29	0.05	643	4.23	0.06
92	Titrate dosage of medication based on assessment and ordered parameters	88.1	624	2.66	0.08	708	2.34	0.08
93	Administer blood products and evaluate client response	80.4	588	1.40	0.07	731	1.13	0.06
94	Access central venous access devices	86.1	549	2.31	0.09	638	1.99	0.08
95	Educate client about medications	98.6	697	4.07	0.06	707	4.01	0.06
96	Evaluate client response to medication	98.5	708	4.53	0.04	719	4.46	0.04
97	Administer parenteral nutrition and evaluate client response	76.6	492	1.48	0.09	642	1.13	0.07
98	Administer medications for pain management	96.0	679	4.05	0.06	707	3.89	0.06
99	Participate in medication reconciliation process	92.7	676	2.58	0.08	729	2.39	0.08
100	Handle and maintain medication in a safe and controlled environment	98.9	630	4.75	0.03	637	4.70	0.04
101	Assess and respond to changes and/or trends in client vital signs	99.2	717	4.06	0.05	723	4.02	0.06
102	Perform focused assessments	98.6	719	4.51	0.04	729	4.45	0.04

Table 12. Activity Applicability to Setting and Average Frequency of Performance

Activity Number	Activity	Apply to Setting	Average Frequency (Setting-Specific)			Average Frequency (Total Group)		
		%	N	Avg	Std. Err	N	Avg	Std. Err
103	Monitor the results of diagnostic testing and intervene as needed	96.3	629	3.39	0.07	653	3.26	0.07
104	Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)	97.5	699	4.01	0.06	717	3.91	0.06
105	Evaluate responses to procedures and treatments	98.4	725	3.87	0.06	737	3.81	0.06
106	Provide preoperative or postoperative education	81.4	524	2.08	0.09	644	1.69	0.08
107	Provide preoperative care	76.2	546	1.47	0.08	717	1.12	0.06
108	Manage client during a procedure with moderate sedation	53.2	390	1.63	0.1	733	0.87	0.06
109	Manage client following a procedure with moderate sedation	75.5	492	1.73	0.09	652	1.30	0.07
110	Obtain blood specimens (e.g. venipuncture, venous access device, central line)	91.2	654	2.62	0.08	717	2.39	0.08
111	Use precautions to prevent injury and/or complications associated with a procedure or diagnosis	95.4	703	3.41	0.07	737	3.25	0.07
112	Educate client about treatments and procedures	97.2	624	3.45	0.07	642	3.35	0.07
113	Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)	97.1	703	2.35	0.07	724	2.28	0.07
114	Insert, maintain, or remove a nasal/oral gastrointestinal tube	78.3	578	1.53	0.08	738	1.20	0.06
115	Maintain percutaneous feeding tube	77.3	501	1.49	0.08	648	1.15	0.07
116	Insert, maintain, or remove a urinary catheter	92.6	662	2.15	0.07	715	1.99	0.07
117	Insert, maintain, or remove a peripheral intravenous line	90.7	667	3.45	0.07	735	3.13	0.07
118	Recognize trends and changes in client condition and intervene as needed	98.9	636	3.63	0.06	643	3.59	0.07
119	Apply and/or maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	89.1	645	3.13	0.07	724	2.79	0.08
120	Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	85.3	627	2.15	0.08	735	1.83	0.07
121	Perform emergency care procedures	86.6	562	1.37	0.08	649	1.18	0.07
122	Monitor and care for clients on a ventilator	49.3	354	1.84	0.11	718	0.91	0.06
123	Perform wound care and/or dressing change	93.9	697	2.53	0.07	742	2.37	0.07
124	Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	57.3	371	1.09	0.09	647	0.62	0.06
125	Provide ostomy care and/or education (e.g., tracheal, enteral)	81.3	588	1.43	0.07	723	1.16	0.06
126	Provide postoperative care	74.6	534	2.19	0.09	716	1.63	0.08
127	Perform and manage care of client receiving peritoneal dialysis	56.8	371	0.85	0.08	653	0.48	0.05
128	Perform suctioning	83.9	599	1.92	0.08	714	1.61	0.07

Table 12. Activity Applicability to Setting and Average Frequency of Performance

Activity Number	Activity	Apply to Setting	Average Frequency (Setting-Specific)			Average Frequency (Total Group)		
		%	N	Avg	Std. Err	N	Avg	Std. Err
129	Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	83.4	620	2.38	0.08	743	1.99	0.08
130	Manage the care of a client on telemetry	74.6	481	3.73	0.08	645	2.78	0.09
131	Manage the care of a client with impaired ventilation/oxygenation	90.8	652	2.54	0.08	718	2.31	0.07
132	Maintain optimal temperature of client	92.2	677	3.24	0.07	734	2.99	0.08
133	Implement and monitor phototherapy	33.5	217	0.59	0.09	648	0.20	0.03
134	Manage the care of a client with a pacing device	81.2	580	1.59	0.08	714	1.29	0.07
135	Monitor and maintain arterial lines	58.7	428	1.72	0.1	729	1.01	0.07
136	Manage the care of the client with a fluid and electrolyte imbalance	92.0	590	2.76	0.08	641	2.54	0.08
137	Manage the care of a client with alteration in hemodynamics, tissue perfusion, and/or hemostasis	88.3	636	2.35	0.08	720	2.08	0.08
138	Evaluate the effectiveness of the treatment plan for a client with an acute or chronic diagnosis	94.6	697	3.72	0.06	737	3.52	0.07
139	Identify pathophysiology related to an acute or chronic condition	93.8	610	3.09	0.07	650	2.90	0.08
140	Manage the care of a client receiving hemodialysis or continuous renal replacement therapy	70.3	505	1.49	0.08	718	1.05	0.06
141	Recognize signs and symptoms of client complications and intervene	99.2	733	3.25	0.07	739	3.22	0.07
142	Educate client regarding an acute or chronic condition	96.3	620	3.35	0.07	644	3.23	0.07

Table 13. 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.
1	Perform procedures necessary to safely admit, transfer, and/or discharge a client	578	4.40	0.03	595	4.37	0.03
2	Provide and receive hand-off of care (report) on assigned clients	602	4.71	0.02	608	4.71	0.02
3	Assign and supervise care of client provided by others (e.g., LPN/VN, assistive personnel, other RNs)	542	4.12	0.04	578	4.06	0.04
4	Advocate for client rights and needs	588	4.65	0.02	591	4.65	0.02
5	Prioritize the delivery of client care	608	4.68	0.02	610	4.68	0.02
6	Participate in performance improvement projects and quality improvement processes	493	3.63	0.04	566	3.62	0.04
7	Collaborate with interprofessional team members when providing client care	593	4.57	0.02	594	4.57	0.02
8	Receive and transcribe health care provider orders	582	4.51	0.03	600	4.47	0.03
9	Integrate advanced directives into client plan of care	494	4.04	0.04	568	3.92	0.04
10	Verify the client receives appropriate education and consents for care and procedures	586	4.54	0.03	593	4.52	0.03
11	Provide education to clients and staff about client rights and responsibilities	592	4.04	0.04	609	4.02	0.04
12	Assess the need for referrals and obtain necessary orders	539	4.12	0.04	567	4.07	0.04
13	Initiate, evaluate and update client plan of care	587	4.12	0.04	596	4.12	0.04
14	Maintain client confidentiality and privacy	599	4.69	0.02	600	4.69	0.02
15	Recognize limitations of self and others and utilize resources	577	4.36	0.03	582	4.35	0.03
16	Report client conditions as required by law (e.g., abuse/neglect and communicable disease)	472	4.51	0.03	576	4.49	0.03
17	Manage conflict among clients and health care staff	551	3.76	0.04	599	3.77	0.04
18	Utilize resources to enhance client care (e.g., evidenced-based research, information technology, policies and procedures)	564	4.34	0.03	573	4.33	0.03
19	Recognize ethical dilemmas and take appropriate action	556	4.13	0.04	588	4.13	0.04
20	Use approved abbreviations and standard terminology when documenting care	601	3.98	0.04	604	3.98	0.04
21	Organize workload to manage time effectively	576	4.57	0.03	580	4.57	0.03
22	Practice in a manner consistent with a code of ethics for nurses	590	4.72	0.02	590	4.72	0.02
23	Provide care within the legal scope of practice	602	4.83	0.02	603	4.83	0.02

Table 13. 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.
24	Practice and advocate for cost effective care	540	3.72	0.04	573	3.68	0.04
25	Apply principles of infection control (e.g., hand hygiene, aseptic technique, isolation, sterile technique, universal/standard precautions)	592	4.87	0.02	592	4.87	0.02
26	Protect client from injury (e.g., falls, electrical hazards)	600	4.81	0.02	603	4.79	0.02
27	Verify appropriateness and accuracy of a treatment order	570	4.71	0.02	576	4.70	0.03
28	Follow procedures for handling biohazardous and hazardous materials	579	4.51	0.03	587	4.50	0.03
29	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	561	4.30	0.03	601	4.28	0.03
30	Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	570	4.49	0.03	576	4.48	0.03
31	Acknowledge and document practice errors and near misses (e.g., incident report for medication error)	525	4.45	0.03	584	4.42	0.03
32	Ensure proper identification of client when providing care	603	4.88	0.02	603	4.88	0.02
33	Facilitate appropriate and safe use of equipment	574	4.46	0.03	579	4.46	0.03
34	Educate client on safety issues	580	4.50	0.03	586	4.49	0.03
35	Participate in emergency response plans (e.g., internal/external disaster, bomb threat, community planning)	481	4.07	0.04	598	4.02	0.04
36	Follow requirements for use of restraints	439	4.37	0.04	561	4.28	0.04
37	Educate client and staff regarding infection control measures	573	4.39	0.03	585	4.37	0.03
38	Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	592	4.61	0.03	599	4.60	0.03
39	Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)	450	4.42	0.04	563	4.41	0.03
40	Provide prenatal care and education	193	4.02	0.07	534	3.79	0.05
41	Plan and/or participate in community health education	367	3.46	0.05	584	3.40	0.04
42	Perform targeted screening assessments (e.g., vision, nutrition)	482	3.87	0.04	557	3.81	0.04
43	Educate client about prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	541	4.03	0.04	586	4.01	0.04
44	Educate client about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	583	3.95	0.03	599	3.95	0.03

Table 13. 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.
45	Provide postpartum care and education	159	4.08	0.07	515	3.73	0.05
46	Perform comprehensive health assessments	543	4.51	0.03	574	4.47	0.03
47	Assess client's readiness to learn, learning preferences, and barriers to learning	586	4.02	0.03	600	4.00	0.03
48	Provide care and education for the newborn, infant, and toddler client from birth through 2 years	181	4.36	0.06	517	3.97	0.05
49	Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	212	3.92	0.06	538	3.67	0.05
50	Provide care and education for the adult client ages 18 through 64 years	566	4.36	0.03	598	4.32	0.03
51	Provide care and education for the adult client ages 65 years and over	489	4.22	0.03	554	4.14	0.04
52	Assess client ability to manage care in home environment and plan care accordingly	505	4.22	0.04	567	4.15	0.04
53	Assess and educate clients about health risks based on family, population, and community characteristics	515	3.73	0.04	594	3.67	0.04
54	Provide care and education to an antepartum client or a client in labor	120	4.17	0.08	502	3.81	0.06
55	Assess psychosocial, spiritual, and/or occupational factors affecting care and plan interventions	566	3.92	0.04	588	3.88	0.04
56	Assess client for abuse or neglect and intervene as appropriate	552	4.35	0.03	588	4.32	0.03
57	Assess client for substance abuse, dependency, withdrawal, or toxicities and intervene as appropriate	521	4.22	0.04	570	4.16	0.04
58	Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	516	4.20	0.04	575	4.16	0.04
59	Promote a therapeutic environment	603	4.18	0.03	606	4.18	0.03
60	Incorporate client cultural practices and beliefs when planning and providing care	559	4.06	0.04	573	4.05	0.03
61	Provide end-of-life care and education to clients	441	4.09	0.04	568	4.02	0.04
62	Assess the potential for violence and use safety precautions	573	4.35	0.03	596	4.33	0.03
63	Assess family dynamics to determine plan of care	548	3.89	0.04	576	3.86	0.04
64	Assess client's ability to cope with life changes and provide support	564	4.13	0.03	583	4.13	0.03
65	Provide care for a client experiencing grief or loss	530	3.95	0.04	590	3.92	0.04
66	Use therapeutic communication techniques	571	4.30	0.03	577	4.29	0.03

Table 13. 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.
67	Incorporate behavioral management techniques when caring for a client	544	3.88	0.04	580	3.84	0.04
68	Recognize nonverbal cues to physical and/or psychological stressors	596	4.26	0.03	600	4.25	0.03
69	Provide care for a client experiencing visual, auditory, and/or cognitive distortions	534	4.11	0.03	573	4.07	0.03
70	Assess and/or intervene in client performance of activities of daily living	551	4.09	0.04	577	4.03	0.04
71	Provide client nutrition through tube feedings	497	4.17	0.04	590	4.05	0.04
72	Perform postmortem care	378	3.76	0.05	543	3.69	0.05
73	Perform irrigations (e.g., of bladder, ear, eye)	464	3.78	0.04	563	3.70	0.04
74	Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	574	4.20	0.03	596	4.16	0.03
75	Perform skin assessment and/or implement measures to maintain skin integrity and prevent skin breakdown	565	4.52	0.03	579	4.51	0.03
76	Assess and manage client with an alteration in elimination	518	4.20	0.04	540	4.16	0.04
77	Apply, maintain, or remove orthopedic devices	439	3.64	0.05	557	3.50	0.05
78	Provide non-pharmacological comfort measures	267	4.03	0.05	271	4.03	0.05
79	Monitor the client's nutritional status	522	4.16	0.04	541	4.13	0.04
80	Assess client sleep/rest pattern and intervene as needed	530	3.74	0.04	570	3.68	0.04
81	Evaluate client intake and output and intervene as needed	538	4.37	0.03	561	4.33	0.04
82	Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	521	4.29	0.03	537	4.24	0.04
83	Assess client for pain and intervene as appropriate	581	4.35	0.03	583	4.35	0.03
84	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)	419	3.54	0.05	541	3.36	0.05
85	Evaluate appropriateness and accuracy of medication order for client	548	4.75	0.02	550	4.74	0.02
86	Prepare and administer medications using rights of medication administration	574	4.91	0.01	577	4.91	0.01
87	Perform calculations needed for medication administration	542	4.68	0.03	563	4.67	0.03
88	Monitor intravenous infusion and maintain site	510	4.73	0.02	542	4.68	0.03
89	Handle and/or administer controlled substances within regulatory guidelines	569	4.71	0.02	582	4.70	0.03

Table 13. 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.
90	Handle and/or administer high-risk medications	540	4.81	0.02	564	4.78	0.02
91	Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)	545	4.77	0.02	551	4.75	0.02
92	Titrate dosage of medication based on assessment and ordered parameters	506	4.70	0.03	571	4.65	0.03
93	Administer blood products and evaluate client response	450	4.72	0.03	555	4.63	0.03
94	Access central venous access devices	467	4.49	0.03	528	4.40	0.04
95	Educate client about medications	573	4.35	0.03	580	4.34	0.03
96	Evaluate client response to medication	559	4.69	0.02	567	4.69	0.02
97	Administer parenteral nutrition and evaluate client response	419	4.18	0.04	531	4.02	0.05
98	Administer medications for pain management	561	4.43	0.03	578	4.40	0.03
99	Participate in medication reconciliation process	517	4.21	0.04	556	4.19	0.04
100	Handle and maintain medication in a safe and controlled environment	541	4.74	0.02	546	4.73	0.02
101	Assess and respond to changes and/or trends in client vital signs	590	4.77	0.02	593	4.78	0.02
102	Perform focused assessments	559	4.63	0.02	566	4.62	0.03
103	Monitor the results of diagnostic testing and intervene as needed	538	4.46	0.03	552	4.43	0.03
104	Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)	570	4.57	0.03	585	4.54	0.03
105	Evaluate responses to procedures and treatments	565	4.43	0.03	573	4.42	0.03
106	Provide preoperative or postoperative education	435	4.23	0.04	529	4.09	0.04
107	Provide preoperative care	434	3.97	0.05	560	3.92	0.04
108	Manage client during a procedure with moderate sedation	281	4.44	0.05	517	4.25	0.05
109	Manage client following a procedure with moderate sedation	410	4.26	0.05	527	4.17	0.05
110	Obtain blood specimens (e.g. venipuncture, venous access device, central line)	525	4.28	0.03	568	4.20	0.04
111	Use precautions to prevent injury and/or complications associated with a procedure or diagnosis	538	4.42	0.03	562	4.40	0.03
112	Educate client about treatments and procedures	533	4.31	0.03	546	4.29	0.03
113	Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)	570	3.95	0.04	584	3.94	0.04
114	Insert, maintain, or remove a nasal/oral gastrointestinal tube	433	4.02	0.04	542	3.95	0.04

Table 13. 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.
115	Maintain percutaneous feeding tube	411	3.98	0.05	524	3.87	0.05
116	Insert, maintain, or remove a urinary catheter	538	4.12	0.04	571	4.07	0.04
117	Insert, maintain, or remove a peripheral intravenous line	510	4.28	0.03	560	4.23	0.04
118	Recognize trends and changes in client condition and intervene as needed	549	4.80	0.02	554	4.79	0.02
119	Apply and/or maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	525	3.99	0.04	579	3.91	0.04
120	Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	474	4.34	0.03	547	4.28	0.04
121	Perform emergency care procedures	470	4.71	0.03	535	4.64	0.03
122	Monitor and care for clients on a ventilator	276	4.63	0.05	537	4.41	0.05
123	Perform wound care and/or dressing change	532	4.06	0.04	562	4.02	0.04
124	Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	301	4.34	0.05	503	4.10	0.05
125	Provide ostomy care and/or education (e.g., tracheal, enteral)	470	3.97	0.04	569	3.89	0.04
126	Provide postoperative care	407	4.40	0.04	536	4.23	0.04
127	Perform and manage care of client receiving peritoneal dialysis	309	4.02	0.06	515	3.82	0.06
128	Perform suctioning	481	4.27	0.04	560	4.22	0.04
129	Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	476	4.02	0.04	557	3.95	0.04
130	Manage the care of a client on telemetry	409	4.48	0.03	532	4.28	0.05
131	Manage the care of a client with impaired ventilation/oxygenation	532	4.63	0.03	575	4.58	0.03
132	Maintain optimal temperature of client	520	4.23	0.04	558	4.20	0.04
133	Implement and monitor phototherapy	178	3.74	0.08	499	3.39	0.06
134	Manage the care of a client with a pacing device	457	4.22	0.04	555	4.12	0.04
135	Monitor and maintain arterial lines	327	4.43	0.04	527	4.21	0.05
136	Manage the care of the client with a fluid and electrolyte imbalance	506	4.56	0.03	538	4.51	0.03
137	Manage the care of a client with alteration in hemodynamics, tissue perfusion, and/or hemostasis	514	4.52	0.03	575	4.43	0.04
138	Evaluate the effectiveness of the treatment plan for a client with an acute or chronic diagnosis	543	4.37	0.03	566	4.33	0.03
139	Identify pathophysiology related to an acute or chronic condition	520	4.31	0.03	547	4.27	0.04

Table 13. 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.
140	Manage the care of a client receiving hemodialysis or continuous renal replacement therapy	392	4.31	0.04	545	4.17	0.04
141	Recognize signs and symptoms of client complications and intervene	567	4.76	0.02	571	4.76	0.02
142	Educate client regarding an acute or chronic condition	532	4.33	0.03	546	4.32	0.03

REFERENCES

- American Educational Research Association, American Psychological Association, and National Council on Measurement in Education. (2014). *Standards for Educational and Psychological Testing*. Washington, D.C.: AERA.
- Cronbach, L. J. (1951). Coefficient Alpha and the Internal Structure of Tests. *Psychometrika*, 16, 297-334.
- Raymond, M.R. (2001). Job Analysis and the specifications of content for licensure and certification Examinations. *Applied Measurement in Education*, 14(4), 369-415.

APPENDIX A: 2017 RN PRACTICE ANALYSIS METHODOLOGY EXPERT

Alan Mead, PhD, is the president of Talent Algorithms Inc. In his role as president, Dr. Mead has an extensive work history in the areas of psychometrics and test development. He has numerous outreach efforts and grant activities related to the field of test and assessment development. Dr. Mead has authored peer-reviewed articles on item writing, the effects of culture on reasoning, multistage testing, ethical decision-making process, item response theories, and computerized testing. He has also written numerous book chapters on item analysis, computerized assessment, technology based selection and assessment reliability. Dr. Mead also teaches Industrial Organizational Psychology at Illinois Institute of Technology and at Roosevelt University in Chicago, IL.

Michael C. Edwards, PhD, is an associate professor at Arizona State University, department of psychology. In his role as professor, Edwards teaches courses in quantitative psychology, measurement and statistics. In addition, he consults on grants researching self-reporting methods of data collection and validation of assessments. Edwards has authored numerous articles related to measurement models and analysis of inventories. He has served as a manuscript reviewer for journals in psychology, statistics and assessment, including *Applied Psychological Measurement*, *Educational Assessment* and *Psychological Assessment*. He has served on advisory committees for the College Board and the American Institute of Certified Public Accountants.

Jerome V. D'Agostino, PhD, is professor at The Ohio State University, department of educational studies. In his role as professor, D'Agostino teaches courses in statistics, research design and tests and measurement. In addition, he works as principal investigator on grants researching program evaluation and assessments development. D'Agostino has authored numerous articles related to assessment validation, item response analysis and reading recovery. He has also written numerous book chapters on formative assessment, achievement testing, and reliability and validity issues. He has served as an editor for *Journal of Education for Students Placed at Risk* and a reviewer for *Educational Evaluation and Policy Analysis*, *American Educational Research Journal*, *Applied Measurement in Education*, *Educational Measurement: Issues & Practice*.

APPENDIX B: SUBJECT MATTER EXPERT PANEL

Member: Jessica Ashlock, MSN, RN, PCCN

Board: Iowa Board of Nursing (Area II)

Specialty: Nursing Education/Float Nurse for intermediate medical/surgical units

Ashlock has 9 years of nursing experience and is currently a lecturer at the University of Iowa College of Nursing for junior and senior level BSN pre-licensure students. She is also a staff nurse at the University of Iowa Hospitals and Clinics in the float pool and works with entry-level nurses.

Member: Barbara Blozen, EdD, MA, RN, BC, CNL

Board: New Jersey Board of Nursing (Area IV)

Specialty: Adult Medical Surgical and Adult Psych

Blozen has 37 years of nursing experience and is an Associate Professor at New Jersey City University. Her interaction with entry-level nurses occurs both in the classroom and the clinical setting. In the classroom, she interacts with entry-level nurses as they are pursuing their baccalaureate degree. She also teaches nursing students, and interacts with entry-level nurses, in the clinical setting.

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: Thelma Boyd, MSN, RN-BC

Board: Missouri Board of Nursing (Area II)

Specialty: Medical-Surgical

Boyd has 37 years of nursing experience and is currently a medical-surgical clinical educator at St. Charles Community College. In this role, she is responsible for facilitating pre-licensure nurses' learning experience and planning clinical instructions.

Member: Laura Colley, RN, BSN

Board: College of Registered Nurses of British Columbia and Association of Registered Nurses of British Columbia (Associate Member)

Specialty: Critical Care and Education

Colley has 22 years of nursing experience and is a General Clinical Nurse Educator at Fraser Health in Surrey, British Columbia. Her current role is to facilitate orientation to Fraser Health Authority (FHA). Through orientation she interacts with new graduates to ensure their practice aligns with FHA policies and procedures.

- Member:** Maricel Estacio, RN, BSN
Board: College and Association of Registered Nurses of Alberta (Associate Member)
Specialty: Neurosurgery and Neuro Trauma

Estacio has 8 years of nursing experience. She is a Registered Nurse specializing in neurosurgery and neurotrauma at Alberta Health Services in Edmonton, Alberta where she trains and works alongside new graduate nurses.

- Member:** Sharon Kleinfelder, RN
Board: Delaware State Board of Nursing (Area IV)
Specialty: LTC/Rehabilitation

Kleinfelder has 31 years of nursing experience. She is a Nurse Educator in a long-term care facility for Genesis Healthcare Milford Center. She provides orientation to the new nurses and is a support person while they are becoming familiar with the processes.

- Member:** Christopher Kohler, RN, BSN, MAN, NE-BC
Board: Minnesota State Board of Nursing (Area II)
Specialty: Cardiovascular Surgery Progressive Care

Kohler has 21 years of nursing experience and is currently the Nurse Manager of a cardiovascular surgery PCU in Rochester, MN. In his role, he interviews and hires newly graduated RNs.

- Member:** Carlene Martinez, MSN, RN
Board: New York Board of Nursing (Area IV)
Specialty: Nursing Education/Educator Emergency Department

Martinez has 34 years of nursing experience and is currently a Nurse Educator for the Emergency Department at St. Barnabas Hospital in Bronx, NY. Additionally, she is a Clinical Instructor for beginning-level nursing students. She teaches, supports, mentors, guides and develops critical thinking skills of learners in the health care environment.

- Member:** Gregory Maruzzella, MSN, RN, CCRN
Board: North Carolina Board of Nursing (Area III)
Specialty: Adult Health/Medical Intensive Care

Maruzzella has 8 years of nursing experience and is currently a Clinical Team Lead in a medical ICU at Duke University Hospital in Durham, NC. He assists with onboarding and the supervision of newly graduated nurses' orientation including: scheduling, preceptor assignment, class scheduling, and regularly scheduled assessment of how well the new graduate nurses are meeting goals and progressing through orientation.

Member: Mojolaolu Nwagbala, RN, BSN
Board: California Board of Nursing (Area I)
Specialty: Psychiatry

Nwagbala is a newly-licensed nurse at Riverside County in Riverside, CA and works alongside entry-level RNs at the workplace. Together they collaborate with a team of doctors and other professionals to provide safe and effective care to clients experiencing psychiatric emergencies.

Member: Monica Schneider, RN, BSN
Board: Oregon Board of Nursing (Area I)
Specialty: Emergency and Trauma Services

Schneider has 1.5 years of nursing experience at Providence Hospital in Medford, OR. She has new-grad nurses, student nurses and paramedic students under her guidance for the purpose of shadowing/orienting to her unit several times a year.

Member: Kayce Tugg, MSN, RN, AOCN, P-PCA
Board: Florida Board of Nursing (Area III)
Specialty: Patient and Nursing Education/Oncology and Medical Surgical Nursing

Tugg is a Lead Infusion Nurse at Gastro Health in Miami, FL specializing in inflammatory bowel disease. She also works as a Clinical Educator at Baptist Health South Florida, a position she's held since 1984, specializing in medical surgical nursing and oncology. She precepts and mentors new graduate nurses and has developed several onboarding and developmental programs for new graduate nurses at her organization. She is also a Nurse Educator for ANCC accredited Nursing Residency Program for BHSF.

Member: Rachel Wood, RN, BSN, CEN, CPEN
Board: Virginia Board of Nursing (Area III)
Specialty: Education/Emergency Nursing/Pediatrics

Wood has 12 years of nursing experience and is currently a Clinical Nurse Educator at Bon Secours Richmond Community Hospital in Richmond, VA. She provides ongoing education, onboarding, orientation support, and assistance with the six-month New Graduate Residency program.

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 – 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.

1. Perform procedures necessary to safely admit, transfer, and/or discharge a client
2. Assign and supervise care of client provided by others (e.g., LPN/VN, assistive personnel, other RNs)
3. Prioritize the delivery of client care
4. Collaborate with interprofessional team members when providing client care
5. Integrate advanced directives into client plan of care
6. Provide education to clients and staff about client rights and responsibilities
7. Initiate, evaluate and update client plan of care
8. Recognize limitations of self and others and utilize resources
9. Manage conflict among clients and health care staff
10. Recognize ethical dilemmas and take appropriate action
11. Organize workload to manage time effectively
12. Provide care within the legal scope of practice
13. Apply principles of infection control (e.g., hand hygiene, aseptic technique, isolation, sterile technique, universal/standard precautions)
14. Verify appropriateness and accuracy of a treatment order
15. Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)
16. Acknowledge and document practice errors and near misses (e.g., incident report for medication error)
17. Facilitate appropriate and safe use of equipment
18. Participate in emergency response plans (e.g., internal/external disaster, bomb threat, community planning)
19. Educate client and staff regarding infection control measures
20. Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)

	A - FREQUENCY						B - IMPORTANCE					
	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
1.	N	0	1	2	3	4	5	1	2	3	4	5
2.	N	0	1	2	3	4	5	1	2	3	4	5
3.	N	0	1	2	3	4	5	1	2	3	4	5
4.	N	0	1	2	3	4	5	1	2	3	4	5
5.	N	0	1	2	3	4	5	1	2	3	4	5
6.	N	0	1	2	3	4	5	1	2	3	4	5
7.	N	0	1	2	3	4	5	1	2	3	4	5
8.	N	0	1	2	3	4	5	1	2	3	4	5
9.	N	0	1	2	3	4	5	1	2	3	4	5
10.	N	0	1	2	3	4	5	1	2	3	4	5
11.	N	0	1	2	3	4	5	1	2	3	4	5
12.	N	0	1	2	3	4	5	1	2	3	4	5
13.	N	0	1	2	3	4	5	1	2	3	4	5
14.	N	0	1	2	3	4	5	1	2	3	4	5
15.	N	0	1	2	3	4	5	1	2	3	4	5
16.	N	0	1	2	3	4	5	1	2	3	4	5
17.	N	0	1	2	3	4	5	1	2	3	4	5
18.	N	0	1	2	3	4	5	1	2	3	4	5
19.	N	0	1	2	3	4	5	1	2	3	4	5
20.	N	0	1	2	3	4	5	1	2	3	4	5

SECTION 1: NURSING ACTIVITIES *(continued)*

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.

	A - FREQUENCY						B - IMPORTANCE					
	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
21. Plan and/or participate in community health education	N	0	1	2	3	4	5	1	2	3	4	5
22. Educate client about prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	N	0	1	2	3	4	5	1	2	3	4	5
23. Provide postpartum care and education	N	0	1	2	3	4	5	1	2	3	4	5
24. Assess client's readiness to learn, learning preferences, and barriers to learning	N	0	1	2	3	4	5	1	2	3	4	5
25. Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	N	0	1	2	3	4	5	1	2	3	4	5
26. Provide care and education for the adult client ages 65 years and over	N	0	1	2	3	4	5	1	2	3	4	5
27. Assess and educate clients about health risks based on family, population, and community characteristics	N	0	1	2	3	4	5	1	2	3	4	5
28. Assess psychosocial, spiritual, and/or occupational factors affecting care and plan interventions	N	0	1	2	3	4	5	1	2	3	4	5
29. Assess client for substance abuse, dependency, withdrawal, or toxicities and intervene as appropriate	N	0	1	2	3	4	5	1	2	3	4	5
30. Promote a therapeutic environment	N	0	1	2	3	4	5	1	2	3	4	5
31. Provide end-of-life care and education to clients	N	0	1	2	3	4	5	1	2	3	4	5
32. Assess family dynamics to determine plan of care	N	0	1	2	3	4	5	1	2	3	4	5
33. Provide care for a client experiencing grief or loss	N	0	1	2	3	4	5	1	2	3	4	5
34. Incorporate behavioral management techniques when caring for a client	N	0	1	2	3	4	5	1	2	3	4	5
35. Provide care for a client experiencing visual, auditory, and/or cognitive distortions	N	0	1	2	3	4	5	1	2	3	4	5
36. Provide client nutrition through tube feedings	N	0	1	2	3	4	5	1	2	3	4	5
37. Perform irrigations (e.g., of bladder, ear, eye)	N	0	1	2	3	4	5	1	2	3	4	5
38. Perform skin assessment and/or implement measures to maintain skin integrity and prevent skin breakdown	N	0	1	2	3	4	5	1	2	3	4	5
39. Apply, maintain, or remove orthopedic devices	N	0	1	2	3	4	5	1	2	3	4	5
40. Monitor the client's nutritional status	N	0	1	2	3	4	5	1	2	3	4	5
41. Evaluate client intake and output and intervene as needed	N	0	1	2	3	4	5	1	2	3	4	5
42. Assess client for pain and intervene as appropriate	N	0	1	2	3	4	5	1	2	3	4	5
43. Evaluate appropriateness and accuracy of medication order for client	N	0	1	2	3	4	5	1	2	3	4	5
44. Perform calculations needed for medication administration	N	0	1	2	3	4	5	1	2	3	4	5
45. Handle and/or administer controlled substances within regulatory guidelines	N	0	1	2	3	4	5	1	2	3	4	5
46. Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)	N	0	1	2	3	4	5	1	2	3	4	5
47. Administer blood products and evaluate client response	N	0	1	2	3	4	5	1	2	3	4	5
48. Educate client about medications	N	0	1	2	3	4	5	1	2	3	4	5
49. Administer parenteral nutrition and evaluate client response	N	0	1	2	3	4	5	1	2	3	4	5
50. Participate in medication reconciliation process	N	0	1	2	3	4	5	1	2	3	4	5

SECTION 1: NURSING ACTIVITIES *(continued)*

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.

	A - FREQUENCY						B - IMPORTANCE					
	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
51. Assess and respond to changes and/or trends in client vital signs	N	0	1	2	3	4	5	1	2	3	4	5
52. Monitor the results of diagnostic testing and intervene as needed	N	0	1	2	3	4	5	1	2	3	4	5
53. Evaluate responses to procedures and treatments	N	0	1	2	3	4	5	1	2	3	4	5
54. Provide preoperative care	N	0	1	2	3	4	5	1	2	3	4	5
55. Manage client following a procedure with moderate sedation	N	0	1	2	3	4	5	1	2	3	4	5
56. Use precautions to prevent injury and/or complications associated with a procedure or diagnosis	N	0	1	2	3	4	5	1	2	3	4	5
57. Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)	N	0	1	2	3	4	5	1	2	3	4	5
58. Maintain percutaneous feeding tube	N	0	1	2	3	4	5	1	2	3	4	5
59. Insert, maintain, or remove a peripheral intravenous line	N	0	1	2	3	4	5	1	2	3	4	5
60. Apply and/or maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	N	0	1	2	3	4	5	1	2	3	4	5
61. Perform emergency care procedures	N	0	1	2	3	4	5	1	2	3	4	5
62. Perform wound care and/or dressing change	N	0	1	2	3	4	5	1	2	3	4	5
63. Provide ostomy care and/or education (e.g., tracheal, enteral)	N	0	1	2	3	4	5	1	2	3	4	5
64. Perform and manage care of client receiving peritoneal dialysis	N	0	1	2	3	4	5	1	2	3	4	5
65. Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	N	0	1	2	3	4	5	1	2	3	4	5
66. Manage the care of a client with impaired ventilation/oxygenation	N	0	1	2	3	4	5	1	2	3	4	5
67. Implement and monitor phototherapy	N	0	1	2	3	4	5	1	2	3	4	5
68. Monitor and maintain arterial lines	N	0	1	2	3	4	5	1	2	3	4	5
69. Manage the care of a client with alteration in hemodynamics, tissue perfusion, and/or hemostasis	N	0	1	2	3	4	5	1	2	3	4	5
70. Identify pathophysiology related to an acute or chronic condition	N	0	1	2	3	4	5	1	2	3	4	5
71. Recognize signs and symptoms of client complications and intervene	N	0	1	2	3	4	5	1	2	3	4	5

72. 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

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

SECTION 2: EXPERIENCE AND ORIENTATION

INSTRUCTIONS FOR SECTIONS 2-5: Please record your responses by marking the appropriate ovals. For questions concerning numbers, mark ovals in both the first and second columns so that the numbers associated with the selected ovals represent your answer. For example, if your answer is 24, you will mark the following:

2	4
0	0
1	1
2	2
3	3
4	4

1. What is the total number of months you have worked as an RN in the U.S. or its territories?

		MONTHS
0	0	
1	1	
2	2	
3	3	
4	4	
5	5	
6	6	
7	7	
8	8	
9	9	

2. Have you ever worked outside the U.S. or its territories as an RN?

- Yes
- No

→ If yes, what is the total number of months you worked outside the U.S. or its territories as an RN?

		MONTHS
0	0	
1	1	
2	2	
3	3	
4	4	
5	5	
6	6	
7	7	
8	8	
9	9	

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

- No formal orientation → Skip to question 5
- 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: _____

4. If you had an orientation period, how many weeks was it?

		NUMBER OF WEEKS IN ORIENTATION
0	0	
1	1	
2	2	
3	3	
4	4	
5	5	
6	6	
7	7	
8	8	
9	9	

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: _____

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

- Yes → If yes, is this your primary position?
- No

- Yes
- No

SECTION 3: WORK ENVIRONMENT

1. Which of the following **best** describes **most** 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 **best** describes the ages of **most** of your clients on the last day you worked? (Select ALL that apply)

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

3. Which of the following choices **best** describes your employment setting/specialty area on the last day you worked? 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 appropriate oval 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., 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
- Other, please specify: _____

4. Which of the following **best** describes the type of facility/organization where your employment setting/specialty area is located? (Select only ONE)

- 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)/dentist office, clinic, school, prison, etc.)
- Other, please specify: _____

5. If you work in a hospital 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 nursing home

6. Which of the following **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 your shift on a typical work day? (Select only ONE)

- 8 hours
- 10 hours
- 12 hours
- Varied 8 hours and 12 hours
- Other, please specify: _____

8. Which **best** describes the location of your employment setting? (Select only ONE)

- Urban/Metropolitan area
- Suburban
- Rural

SECTION 4: DESCRIPTION OF YOUR LAST DAY OF WORK

1. How many hours did you work on the last shift you worked?

HOURS

0	0
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9

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 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.

NUMBER OF CLIENTS

0	0	0
1	1	1
2	2	2
3	3	3
4	4	4
5	5	5
6	6	6
7	7	7
8	8	8
9	9	9

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 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.

Set of Activities	Approximate Amount of Time (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.	0	1	2	3	4	5	6	7	8	>8
2. Safety and Infection Control: Protect clients and health care personnel from health and environmental hazards.	0	1	2	3	4	5	6	7	8	>8
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	>8
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	1	2	3	4	5	6	7	8	>8
5. Basic Care and Comfort: Provide comfort and assistance in the performance of activities of daily living.	0	1	2	3	4	5	6	7	8	>8
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	>8
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	7	8	>8
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	7	8	>8

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.

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

- Yes → If "yes," for how many years and months?
 No

YEARS		MONTHS	
0	0	0	0
1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

4. What is your age in years?

YEARS	
0	0
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9

5. Which of the following best 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

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

- Yes → If "yes," for how many years and months?
 No

YEARS		MONTHS	
0	0	0	0
1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

6. What is your primary language?

- English English and another language Another language

7. What type of basic 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 nursing education program in question 7?

MONTHS	
0	0
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9

3. What is your gender?

- Male Female

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: _____

E-mail Address: _____

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

Daytime or Early Evening Phone Number with Area Code:

()	-			-				
0	0	0	0	0	0	0	0	0	0
1	1	1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5	5	5
6	6	6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7	7	7
8	8	8	8	8	8	8	8	8	8
9	9	9	9	9	9	9	9	9	9

THANK YOU FOR PARTICIPATING IN THIS IMPORTANT WORK!

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 – 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.

	A - FREQUENCY						B - IMPORTANCE					
	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
1. Provide and receive hand-off of care (report) on assigned clients	N	0	1	2	3	4	5	1	2	3	4	5
2. Advocate for client rights and needs	N	0	1	2	3	4	5	1	2	3	4	5
3. Participate in performance improvement projects and quality improvement processes	N	0	1	2	3	4	5	1	2	3	4	5
4. Receive and transcribe health care provider orders	N	0	1	2	3	4	5	1	2	3	4	5
5. Verify the client receives appropriate education and consents for care and procedures	N	0	1	2	3	4	5	1	2	3	4	5
6. Assess the need for referrals and obtain necessary orders	N	0	1	2	3	4	5	1	2	3	4	5
7. Maintain client confidentiality and privacy	N	0	1	2	3	4	5	1	2	3	4	5
8. Report client conditions as required by law (e.g., abuse/neglect and communicable disease)	N	0	1	2	3	4	5	1	2	3	4	5
9. Utilize resources to enhance client care (e.g., evidenced-based research, information technology, policies and procedures)	N	0	1	2	3	4	5	1	2	3	4	5
10. Use approved abbreviations and standard terminology when documenting care	N	0	1	2	3	4	5	1	2	3	4	5
11. Practice in a manner consistent with a code of ethics for nurses	N	0	1	2	3	4	5	1	2	3	4	5
12. Practice and advocate for cost effective care	N	0	1	2	3	4	5	1	2	3	4	5
13. Protect client from injury (e.g., falls, electrical hazards)	N	0	1	2	3	4	5	1	2	3	4	5
14. Follow procedures for handling biohazardous and hazardous materials	N	0	1	2	3	4	5	1	2	3	4	5
15. Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	N	0	1	2	3	4	5	1	2	3	4	5
16. Ensure proper identification of client when providing care	N	0	1	2	3	4	5	1	2	3	4	5
17. Educate client on safety issues	N	0	1	2	3	4	5	1	2	3	4	5
18. Follow requirements for use of restraints	N	0	1	2	3	4	5	1	2	3	4	5
19. Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	N	0	1	2	3	4	5	1	2	3	4	5
20. Provide prenatal care and education	N	0	1	2	3	4	5	1	2	3	4	5

SECTION 1: NURSING ACTIVITIES *(continued)*

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.

	A - FREQUENCY						B - IMPORTANCE					
	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
21. Perform targeted screening assessments (e.g., vision, nutrition)	N	0	1	2	3	4	5	1	2	3	4	5
22. Educate client about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	N	0	1	2	3	4	5	1	2	3	4	5
23. Perform comprehensive health assessments	N	0	1	2	3	4	5	1	2	3	4	5
24. Provide care and education for the newborn, infant, and toddler client from birth through 2 years	N	0	1	2	3	4	5	1	2	3	4	5
25. Provide care and education for the adult client ages 18 through 64 years	N	0	1	2	3	4	5	1	2	3	4	5
26. Assess client ability to manage care in home environment and plan care accordingly	N	0	1	2	3	4	5	1	2	3	4	5
27. Provide care and education to an antepartum client or a client in labor	N	0	1	2	3	4	5	1	2	3	4	5
28. Assess client for abuse or neglect and intervene as appropriate	N	0	1	2	3	4	5	1	2	3	4	5
29. Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	N	0	1	2	3	4	5	1	2	3	4	5
30. Incorporate client cultural practices and beliefs when planning and providing care	N	0	1	2	3	4	5	1	2	3	4	5
31. Assess the potential for violence and use safety precautions	N	0	1	2	3	4	5	1	2	3	4	5
32. Assess client’s ability to cope with life changes and provide support	N	0	1	2	3	4	5	1	2	3	4	5
33. Use therapeutic communication techniques	N	0	1	2	3	4	5	1	2	3	4	5
34. Recognize nonverbal cues to physical and/or psychological stressors	N	0	1	2	3	4	5	1	2	3	4	5
35. Assess and/or intervene in client performance of activities of daily living	N	0	1	2	3	4	5	1	2	3	4	5
36. Perform postmortem care	N	0	1	2	3	4	5	1	2	3	4	5
37. Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	N	0	1	2	3	4	5	1	2	3	4	5
38. Assess and manage client with an alteration in elimination	N	0	1	2	3	4	5	1	2	3	4	5
39. Provide non-pharmacological comfort measures	N	0	1	2	3	4	5	1	2	3	4	5
40. Assess client sleep/rest pattern and intervene as needed	N	0	1	2	3	4	5	1	2	3	4	5
41. Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	N	0	1	2	3	4	5	1	2	3	4	5
42. Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)	N	0	1	2	3	4	5	1	2	3	4	5
43. Prepare and administer medications using rights of medication administration	N	0	1	2	3	4	5	1	2	3	4	5
44. Monitor intravenous infusion and maintain site	N	0	1	2	3	4	5	1	2	3	4	5
45. Handle and/or administer high-risk medications	N	0	1	2	3	4	5	1	2	3	4	5
46. Titrate dosage of medication based on assessment and ordered parameters	N	0	1	2	3	4	5	1	2	3	4	5
47. Access central venous access devices	N	0	1	2	3	4	5	1	2	3	4	5
48. Evaluate client response to medication	N	0	1	2	3	4	5	1	2	3	4	5
49. Administer medications for pain management	N	0	1	2	3	4	5	1	2	3	4	5
50. Handle and maintain medication in a safe and controlled environment	N	0	1	2	3	4	5	1	2	3	4	5

SECTION 1: NURSING ACTIVITIES *(continued)*

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.

- 51. Perform focused assessments
- 52. Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)
- 53. Provide preoperative or postoperative education
- 54. Manage client during a procedure with moderate sedation
- 55. Obtain blood specimens (e.g. venipuncture, venous access device, central line)
- 56. Educate client about treatments and procedures
- 57. Insert, maintain, or remove a nasal/oral gastrointestinal tube
- 58. Insert, maintain, or remove a urinary catheter
- 59. Recognize trends and changes in client condition and intervene as needed
- 60. Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)
- 61. Monitor and care for clients on a ventilator
- 62. Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)
- 63. Provide postoperative care
- 64. Perform suctioning
- 65. Manage the care of a client on telemetry
- 66. Maintain optimal temperature of client
- 67. Manage the care of a client with a pacing device
- 68. Manage the care of the client with a fluid and electrolyte imbalance
- 69. Evaluate the effectiveness of the treatment plan for a client with an acute or chronic diagnosis
- 70. Manage the care of a client receiving hemodialysis or continuous renal replacement therapy
- 71. Educate client regarding an acute or chronic condition

	A - FREQUENCY						B - IMPORTANCE					
	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
51. Perform focused assessments	N	0	1	2	3	4	5	1	2	3	4	5
52. Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)	N	0	1	2	3	4	5	1	2	3	4	5
53. Provide preoperative or postoperative education	N	0	1	2	3	4	5	1	2	3	4	5
54. Manage client during a procedure with moderate sedation	N	0	1	2	3	4	5	1	2	3	4	5
55. Obtain blood specimens (e.g. venipuncture, venous access device, central line)	N	0	1	2	3	4	5	1	2	3	4	5
56. Educate client about treatments and procedures	N	0	1	2	3	4	5	1	2	3	4	5
57. Insert, maintain, or remove a nasal/oral gastrointestinal tube	N	0	1	2	3	4	5	1	2	3	4	5
58. Insert, maintain, or remove a urinary catheter	N	0	1	2	3	4	5	1	2	3	4	5
59. Recognize trends and changes in client condition and intervene as needed	N	0	1	2	3	4	5	1	2	3	4	5
60. Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	N	0	1	2	3	4	5	1	2	3	4	5
61. Monitor and care for clients on a ventilator	N	0	1	2	3	4	5	1	2	3	4	5
62. Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	N	0	1	2	3	4	5	1	2	3	4	5
63. Provide postoperative care	N	0	1	2	3	4	5	1	2	3	4	5
64. Perform suctioning	N	0	1	2	3	4	5	1	2	3	4	5
65. Manage the care of a client on telemetry	N	0	1	2	3	4	5	1	2	3	4	5
66. Maintain optimal temperature of client	N	0	1	2	3	4	5	1	2	3	4	5
67. Manage the care of a client with a pacing device	N	0	1	2	3	4	5	1	2	3	4	5
68. Manage the care of the client with a fluid and electrolyte imbalance	N	0	1	2	3	4	5	1	2	3	4	5
69. Evaluate the effectiveness of the treatment plan for a client with an acute or chronic diagnosis	N	0	1	2	3	4	5	1	2	3	4	5
70. Manage the care of a client receiving hemodialysis or continuous renal replacement therapy	N	0	1	2	3	4	5	1	2	3	4	5
71. Educate client regarding an acute or chronic condition	N	0	1	2	3	4	5	1	2	3	4	5

72. 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

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

SECTION 2: EXPERIENCE AND ORIENTATION

INSTRUCTIONS FOR SECTIONS 2-5: Please record your responses by marking the appropriate ovals. For questions concerning numbers, mark ovals in both the first and second columns so that the numbers associated with the selected ovals represent your answer. For example, if your answer is 24, you will mark the following:

2	4
0	0
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9

1. What is the total number of months you have worked as an RN in the U.S. or its territories?

		MONTHS
0	0	
1	1	
2	2	
3	3	
4	4	
5	5	
6	6	
7	7	
8	8	
9	9	

2. Have you ever worked outside the U.S. or its territories as an RN?

- Yes
 No

→ If yes, what is the total number of months you worked outside the U.S. or its territories as an RN?

		MONTHS
0	0	
1	1	
2	2	
3	3	
4	4	
5	5	
6	6	
7	7	
8	8	
9	9	

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

- No formal orientation → Skip to question 5
 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:

4. If you had an orientation period, how many weeks was it?

		NUMBER OF WEEKS IN ORIENTATION
0	0	
1	1	
2	2	
3	3	
4	4	
5	5	
6	6	
7	7	
8	8	
9	9	

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: _____

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

- Yes → If yes, is this your primary position?
 No Yes
 No

SECTION 3: WORK ENVIRONMENT

1. Which of the following **best** describes **most** 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 **best** describes the ages of **most** of your clients on the last day you worked? (Select ALL that apply)

- Newborns (less than 1 month)
- Infants/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 **best** describes your employment setting/specialty area on the last day you worked? 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 appropriate oval 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., 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
- Other, please specify: _____

4. Which of the following **best** describes the type of facility/organization where your employment setting/specialty area is located? (Select only ONE)

- 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)/dentist office, clinic, school, prison, etc.)
- Other, please specify: _____

5. If you work in a hospital 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 nursing home

6. Which of the following **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 your shift on a typical work day? (Select only ONE)

- 8 hours
- 10 hours
- 12 hours
- Varied 8 hours and 12 hours
- Other, please specify: _____

8. Which **best** describes the location of your employment setting? (Select only ONE)

- Urban/Metropolitan area
- Suburban
- Rural

SECTION 4: DESCRIPTION OF YOUR LAST DAY OF WORK

1. How many hours did you work on the last shift you worked?

HOURS

0	0
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9

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 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.

NUMBER OF CLIENTS

0	0	0
1	1	1
2	2	2
3	3	3
4	4	4
5	5	5
6	6	6
7	7	7
8	8	8
9	9	9

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 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.

Set of Activities	Approximate Amount of Time (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.	0	1	2	3	4	5	6	7	8	>8
2. Safety and Infection Control: Protect clients and health care personnel from health and environmental hazards.	0	1	2	3	4	5	6	7	8	>8
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	>8
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	1	2	3	4	5	6	7	8	>8
5. Basic Care and Comfort: Provide comfort and assistance in the performance of activities of daily living.	0	1	2	3	4	5	6	7	8	>8
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	>8
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	7	8	>8
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	7	8	>8

Web Form 1



RN 2017-1

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 **best** 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 **last day of work**. 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.

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.

[Continue to the Next Page](#)

**RN 2017-1****INTRODUCTION**

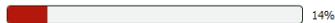
1. What type(s) of nursing license do you hold? **(Select ALL that apply)**

- RN
 LPN/VN

[Previous Page](#)[Continue to the Next Page](#)**RN 2017-1****INTRODUCTION**

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

- Yes
 No

[Previous Page](#)[Continue to the Next Page](#)

**RN 2017-1****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
- No

[Previous Page](#)[Continue to the Next Page](#)



RN 2017-1

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 - If an activity does not apply to your work setting, choose "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 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 Perform procedures necessary to safely admit, transfer, and/or discharge a client	<input type="text"/>	<input type="text"/>
2 Advocate for client rights and needs	<input type="text"/>	<input type="text"/>
3 Collaborate with interprofessional team members when providing client care	<input type="text"/>	<input type="text"/>
4 Verify the client receives appropriate education and consents for care and procedures	<input type="text"/>	<input type="text"/>
5 Initiate, evaluate and update client plan of care	<input type="text"/>	<input type="text"/>
6 Report client conditions as required by law (e.g., abuse/neglect and communicable disease)	<input type="text"/>	<input type="text"/>
7 Recognize ethical dilemmas and take appropriate action	<input type="text"/>	<input type="text"/>
8 Practice in a manner consistent with a code of ethics for nurses	<input type="text"/>	<input type="text"/>
9 Apply principles of infection control (e.g., hand hygiene, aseptic technique, isolation, sterile technique, universal/standard precautions)	<input type="text"/>	<input type="text"/>
10 Follow procedures for handling biohazardous and hazardous materials	<input type="text"/>	<input type="text"/>
11 Acknowledge and document practice errors and near misses (e.g., incident report for medication error)	<input type="text"/>	<input type="text"/>
12 Educate client on safety issues	<input type="text"/>	<input type="text"/>
13 Educate client and staff regarding infection control measures	<input type="text"/>	<input type="text"/>
14 Provide prenatal care and education	<input type="text"/>	<input type="text"/>
15 Educate client about prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	<input type="text"/>	<input type="text"/>
16 Perform comprehensive health assessments	<input type="text"/>	<input type="text"/>
17 Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	<input type="text"/>	<input type="text"/>
18 Assess client ability to manage care in home environment and plan care accordingly	<input type="text"/>	<input type="text"/>
19 Assess psychosocial, spiritual, and/or occupational factors affecting care and plan interventions	<input type="text"/>	<input type="text"/>

20 Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	<input type="text"/>	<input type="text"/>
21 Provide end-of-life care and education to clients	<input type="text"/>	<input type="text"/>
22 Assess client's ability to cope with life changes and provide support	<input type="text"/>	<input type="text"/>
23 Incorporate behavioral management techniques when caring for a client	<input type="text"/>	<input type="text"/>
24 Assess and/or intervene in client performance of activities of daily living	<input type="text"/>	<input type="text"/>
25 Perform irrigations (e.g., of bladder, ear, eye)	<input type="text"/>	<input type="text"/>

[Previous Page](#)[Continue to the Next Page](#)



RN 2017-1

SECTION 1: NURSING ACTIVITIES

Question A – FREQUENCY - If an activity does not apply to your work setting, choose "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 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
26 Assess and manage client with an alteration in elimination	<input type="text"/>	<input type="text"/>
27 Monitor the client's nutritional status	<input type="text"/>	<input type="text"/>
28 Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	<input type="text"/>	<input type="text"/>
29 Evaluate appropriateness and accuracy of medication order for client	<input type="text"/>	<input type="text"/>
30 Monitor intravenous infusion and maintain site	<input type="text"/>	<input type="text"/>
31 Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)	<input type="text"/>	<input type="text"/>
32 Access central venous access devices	<input type="text"/>	<input type="text"/>
33 Administer parenteral nutrition and evaluate client response	<input type="text"/>	<input type="text"/>
34 Handle and maintain medication in a safe and controlled environment	<input type="text"/>	<input type="text"/>
35 Monitor the results of diagnostic testing and intervene as needed	<input type="text"/>	<input type="text"/>
36 Provide preoperative or postoperative education	<input type="text"/>	<input type="text"/>
37 Manage client following a procedure with moderate sedation	<input type="text"/>	<input type="text"/>
38 Educate client about treatments and procedures	<input type="text"/>	<input type="text"/>
39 Maintain percutaneous feeding tube	<input type="text"/>	<input type="text"/>
40 Recognize trends and changes in client condition and intervene as needed	<input type="text"/>	<input type="text"/>
41 Perform emergency care procedures	<input type="text"/>	<input type="text"/>
42 Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	<input type="text"/>	<input type="text"/>
43 Perform and manage care of client receiving peritoneal dialysis	<input type="text"/>	<input type="text"/>
44 Manage the care of a client on telemetry	<input type="text"/>	<input type="text"/>
45 Implement and monitor phototherapy	<input type="text"/>	<input type="text"/>
46 Manage the care of the client with a fluid and electrolyte imbalance	<input type="text"/>	<input type="text"/>
47 Identify pathophysiology related to an acute or chronic condition	<input type="text"/>	<input type="text"/>
48 Educate client regarding an acute or chronic condition	<input type="text"/>	<input type="text"/>

49. 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

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



Previous Page

Continue to the Next Page



RN 2017-1

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).

Months:

2a. Have you ever worked outside the U.S. or its territories as an RN?

- Yes
- No



Previous Page

Continue to the Next Page

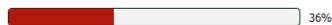


RN 2017-1

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:



Previous Page

Continue to the Next Page



RN 2017-1

SECTION 2: EXPERIENCE AND ORIENTATION

3. Which of the following **best** 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):



Previous Page

Continue to the Next Page



RN 2017-1

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:



Previous Page

Continue to the Next Page



RN 2017-1

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)

**RN 2017-1****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

[Previous Page](#)[Continue to the Next Page](#)**RN 2017-1****SECTION 2: EXPERIENCE AND ORIENTATION**

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

- Yes
 No

[Previous Page](#)[Continue to the Next Page](#)



RN 2017-1

SECTION 3: WORK ENVIRONMENT

1. Which of the following **best** describes **most** 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 **best** describes the ages of **most** 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)

3. Which of the following choices **best** describes your employment setting/specialty area **on the last day you worked**? 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)

- | | |
|--|--|
| <input type="checkbox"/> Critical care (e.g., ICU, CCU, step-down units, pediatric/neonatal intensive care, emergency department, post-anesthesia recovery unit) | <input type="checkbox"/> Subacute unit |
| <input type="checkbox"/> Medical-surgical unit or any of its sub-specialties (e.g., oncology, orthopedics, neurology) | <input type="checkbox"/> Transitional care unit |
| <input type="checkbox"/> Pediatrics | <input type="checkbox"/> Physician/Advanced Practice RN/Nurse Practitioner (NP)/Dentist office |
| <input type="checkbox"/> Nursery | <input type="checkbox"/> Occupational health |
| <input type="checkbox"/> Labor and delivery | <input type="checkbox"/> Outpatient clinic |
| <input type="checkbox"/> Postpartum unit | <input type="checkbox"/> Home health, including visiting nurses associations |
| <input type="checkbox"/> Psychiatry or any of its sub-specialties (e.g., detox) | <input type="checkbox"/> Public health |
| <input type="checkbox"/> Assisted Living | <input type="checkbox"/> Student/school health |
| <input type="checkbox"/> Operating room, including outpatient surgery and surgicenters | <input type="checkbox"/> Hospice care |
| <input type="checkbox"/> Nursing home, skilled or intermediate care | <input type="checkbox"/> Prison/Correctional Facility/Jail |
| <input type="checkbox"/> Other long-term care (e.g., residential care, developmental disability) | <input type="checkbox"/> Short Stay/Observational |
| <input type="checkbox"/> Rehabilitation | <input type="checkbox"/> Step-down/Progressive Care |
| <input type="checkbox"/> Other (please specify) | |

4. Which of the following **best** describes the type of facility/organization where your employment setting/specialty area is located? (**Select only ONE**)

- 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)/dentist office, clinic, school, prison, etc.)
- Other (please specify)

5. If you work in a hospital 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 nursing home

6. Which of the following **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 your shift **on a typical work day**? (**Select only ONE**)

- 8 hours
- 10 hours
- 12 hours
- Varied 8 hours and 12 hours
- Other (please specify)

8. Which **best** describes the location of your employment setting?

- Urban/Metropolitan area
- Suburban
- Rural

 64%

Previous Page

Continue to the Next Page



RN 2017-1

SECTION 4: DESCRIPTION OF YOUR LAST DAY OF WORK

1. How many hours did you work on the **last shift you worked**? Please enter a positive, whole number only and round up (e.g., 20).

Hours:

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 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:

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 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

	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.	<input type="radio"/>									
2. Safety and Infection Control: Protect clients and health care personnel from health and environmental hazards.	<input type="radio"/>									
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.	<input type="radio"/>									
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.	<input type="radio"/>									
5. Basic Care and Comfort: Provide comfort and assistance in the performance of activities of daily living.	<input type="radio"/>									
6. Pharmacological and Parenteral Therapies: Provide care related to the administration of medications and parenteral therapies.	<input type="radio"/>									
7. Reduction of Risk Potential: Reduce the likelihood that clients will develop complications or health problems related to existing conditions, treatments or procedures.	<input type="radio"/>									
8. Physiological Adaptation: Manage and provide care for clients with acute, chronic or life threatening physical health conditions.	<input type="radio"/>									



Previous Page

Continue to the Next Page

**RN 2017-1****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?

- Yes
 No

[Previous Page](#)[Continue to the Next Page](#)**RN 2017-1****SECTION 5: DEMOGRAPHIC INFORMATION**

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

Years:

Months:

[Previous Page](#)[Continue to the Next Page](#)

**RN 2017-1****SECTION 5: DEMOGRAPHIC INFORMATION**

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

Yes

No



Previous Page

Continue to the Next Page

**RN 2017-1****SECTION 5: DEMOGRAPHIC INFORMATION**

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

Years:

Months:



Previous Page

Continue to the Next Page

**RN 2017-1****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).

Age:

5. Which of the following **best** 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 **basic** 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:



Previous Page

Continue to the Next Page

**RN 2017-1****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.

95%

[Previous Page](#)[Continue to the Next Page](#)**RN 2017-1****Thank you!**

Thank you for your participation in this important study.

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

100%

[Previous Page](#)[Submit Survey](#)

Web Form 2



RN 2017-2

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 **best** 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 **last day of work**. 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.

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.

 5%

[Continue to the Next Page](#)

**RN 2017-2****INTRODUCTION**

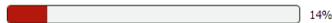
1. What type(s) of nursing license do you hold? (Select ALL that apply)

- RN
 LPN/VN

[Previous Page](#)[Continue to the Next Page](#)**RN 2017-2****INTRODUCTION**

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

- Yes
 No

[Previous Page](#)[Continue to the Next Page](#)

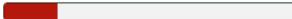


RN 2017-2

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
- No

 18%

Previous Page

Continue to the Next Page



RN 2017-2

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 - If an activity does not apply to your work setting, choose "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 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	<input type="text"/>	<input type="text"/>
2 Prioritize the delivery of client care	<input type="text"/>	<input type="text"/>
3 Receive and transcribe health care provider orders	<input type="text"/>	<input type="text"/>
4 Provide education to clients and staff about client rights and responsibilities	<input type="text"/>	<input type="text"/>
5 Maintain client confidentiality and privacy	<input type="text"/>	<input type="text"/>
6 Manage conflict among clients and health care staff	<input type="text"/>	<input type="text"/>
7 Use approved abbreviations and standard terminology when documenting care	<input type="text"/>	<input type="text"/>
8 Provide care within the legal scope of practice	<input type="text"/>	<input type="text"/>
9 Protect client from injury (e.g., falls, electrical hazards)	<input type="text"/>	<input type="text"/>
10 Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	<input type="text"/>	<input type="text"/>
11 Ensure proper identification of client when providing care	<input type="text"/>	<input type="text"/>
12 Participate in emergency response plans (e.g., internal/external disaster, bomb threat, community planning)	<input type="text"/>	<input type="text"/>
13 Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	<input type="text"/>	<input type="text"/>
14 Plan and/or participate in community health education	<input type="text"/>	<input type="text"/>
15 Educate client about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	<input type="text"/>	<input type="text"/>
16 Assess client's readiness to learn, learning preferences, and barriers to learning	<input type="text"/>	<input type="text"/>
17 Provide care and education for the adult client ages 18 through 64 years	<input type="text"/>	<input type="text"/>
18 Assess and educate clients about health risks based on family, population, and community characteristics	<input type="text"/>	<input type="text"/>
19 Assess client for abuse or neglect and intervene as appropriate	<input type="text"/>	<input type="text"/>
20 Promote a therapeutic environment	<input type="text"/>	<input type="text"/>
21 Assess the potential for violence and use safety precautions	<input type="text"/>	<input type="text"/>
22 Provide care for a client experiencing grief or loss	<input type="text"/>	<input type="text"/>
23 Recognize nonverbal cues to physical and/or psychological stressors	<input type="text"/>	<input type="text"/>
24 Provide client nutrition through tube feedings	<input type="text"/>	<input type="text"/>
25 Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	<input type="text"/>	<input type="text"/>

 23%

Previous Page

Continue to the Next Page



RN 2017-2
SECTION 1: NURSING ACTIVITIES

Question A – FREQUENCY - If an activity does not apply to your work setting, choose "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 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
26 Apply, maintain, or remove orthopedic devices	<input type="text"/>	<input type="text"/>
27 Assess client sleep/rest pattern and intervene as needed	<input type="text"/>	<input type="text"/>
28 Assess client for pain and intervene as appropriate	<input type="text"/>	<input type="text"/>
29 Prepare and administer medications using rights of medication administration	<input type="text"/>	<input type="text"/>
30 Handle and/or administer controlled substances within regulatory guidelines	<input type="text"/>	<input type="text"/>
31 Titrate dosage of medication based on assessment and ordered parameters	<input type="text"/>	<input type="text"/>
32 Educate client about medications	<input type="text"/>	<input type="text"/>
33 Administer medications for pain management	<input type="text"/>	<input type="text"/>
34 Assess and respond to changes and/or trends in client vital signs	<input type="text"/>	<input type="text"/>
35 Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)	<input type="text"/>	<input type="text"/>
36 Provide preoperative care	<input type="text"/>	<input type="text"/>
37 Obtain blood specimens (e.g. venipuncture, venous access device, central line)	<input type="text"/>	<input type="text"/>
38 Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)	<input type="text"/>	<input type="text"/>
39 Insert, maintain, or remove a urinary catheter	<input type="text"/>	<input type="text"/>
40 Apply and/or maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	<input type="text"/>	<input type="text"/>
41 Monitor and care for clients on a ventilator	<input type="text"/>	<input type="text"/>
42 Provide ostomy care and/or education (e.g., tracheal, enteral)	<input type="text"/>	<input type="text"/>
43 Perform suctioning	<input type="text"/>	<input type="text"/>
44 Manage the care of a client with impaired ventilation/oxygenation	<input type="text"/>	<input type="text"/>
45 Manage the care of a client with a pacing device	<input type="text"/>	<input type="text"/>
46 Manage the care of a client with alteration in hemodynamics, tissue perfusion, and/or hemostasis	<input type="text"/>	<input type="text"/>
47 Manage the care of a client receiving hemodialysis or continuous renal replacement therapy	<input type="text"/>	<input type="text"/>

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



[Previous Page](#)

[Continue to the Next Page](#)



RN 2017-2

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).

Months:

2a. Have you ever worked outside the U.S. or its territories as an RN?

- Yes
- No



[Previous Page](#)

[Continue to the Next Page](#)



RN 2017-2

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:



Previous Page

Continue to the Next Page



RN 2017-2

SECTION 2: EXPERIENCE AND ORIENTATION

3. Which of the following best 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):



Previous Page

Continue to the Next Page



RN 2017-2

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:



45%

Previous Page

Continue to the Next Page



RN 2017-2

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)



50%

Previous Page

Continue to the Next Page

**RN 2017-2****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

[Previous Page](#)[Continue to the Next Page](#)**RN 2017-2****SECTION 2: EXPERIENCE AND ORIENTATION**

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

- Yes
 No

[Previous Page](#)[Continue to the Next Page](#)



RN 2017-2

SECTION 3: WORK ENVIRONMENT

1. Which of the following **best** describes **most** 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 **best** describes the ages of **most** 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)

3. Which of the following choices **best** describes your employment setting/specialty area **on the last day you worked**? 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**)

- | | |
|--|--|
| <input type="checkbox"/> Critical care (e.g., ICU, CCU, step-down units, pediatric/neonatal intensive care, emergency department, post-anesthesia recovery unit) | <input type="checkbox"/> Subacute unit |
| <input type="checkbox"/> Medical-surgical unit or any of its sub-specialties (e.g., oncology, orthopedics, neurology) | <input type="checkbox"/> Transitional care unit |
| <input type="checkbox"/> Pediatrics | <input type="checkbox"/> Physician/Advanced Practice RN/Nurse Practitioner (NP)/Dentist office |
| <input type="checkbox"/> Nursery | <input type="checkbox"/> Occupational health |
| <input type="checkbox"/> Labor and delivery | <input type="checkbox"/> Outpatient clinic |
| <input type="checkbox"/> Postpartum unit | <input type="checkbox"/> Home health, including visiting nurses associations |
| <input type="checkbox"/> Psychiatry or any of its sub-specialties (e.g., detox) | <input type="checkbox"/> Public health |
| <input type="checkbox"/> Assisted Living | <input type="checkbox"/> Student/school health |
| <input type="checkbox"/> Operating room, including outpatient surgery and surgicenters | <input type="checkbox"/> Hospice care |
| <input type="checkbox"/> Nursing home, skilled or intermediate care | <input type="checkbox"/> Prison/Correctional Facility/Jail |
| <input type="checkbox"/> Other long-term care (e.g., residential care, developmental disability) | <input type="checkbox"/> Short Stay/Observational |
| <input type="checkbox"/> Rehabilitation | <input type="checkbox"/> Step-down/Progressive Care |
| <input type="checkbox"/> Other (please specify) | |

4. Which of the following **best** describes the type of facility/organization where your employment setting/specialty area is located? (**Select only ONE**)

- 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)/dentist office, clinic, school, prison, etc.)
- Other (please specify)

5. If you work in a hospital 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 nursing home

6. Which of the following **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 your shift **on a typical work day**? (**Select only ONE**)

- 8 hours
- 10 hours
- 12 hours
- Varied 8 hours and 12 hours
- Other (please specify)

8. Which **best** describes the location of your employment setting?

- Urban/Metropolitan area
- Suburban
- Rural



64%

[Previous Page](#)
[Continue to the Next Page](#)



RN 2017-2

SECTION 4: DESCRIPTION OF YOUR LAST DAY OF WORK

1. How many hours did you work on the **last shift you worked**? Please enter a positive, whole number only and round up (e.g., 20).

Hours:

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 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:

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 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

	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.	<input type="radio"/>									
2. Safety and Infection Control: Protect clients and health care personnel from health and environmental hazards.	<input type="radio"/>									
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.	<input type="radio"/>									
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.	<input type="radio"/>									
5. Basic Care and Comfort: Provide comfort and assistance in the performance of activities of daily living.	<input type="radio"/>									
6. Pharmacological and Parenteral Therapies: Provide care related to the administration of medications and parenteral therapies.	<input type="radio"/>									
7. Reduction of Risk Potential: Reduce the likelihood that clients will develop complications or health problems related to existing conditions, treatments or procedures.	<input type="radio"/>									
8. Physiological Adaptation: Manage and provide care for clients with acute, chronic or life threatening physical health conditions.	<input type="radio"/>									





RN 2017-2

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?

Yes

No



Previous Page

Continue to the Next Page



RN 2017-2

SECTION 5: DEMOGRAPHIC INFORMATION

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

Years:

Months:



Previous Page

Continue to the Next Page

**RN 2017-2****SECTION 5: DEMOGRAPHIC INFORMATION**

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

Yes

No



Previous Page

Continue to the Next Page

**RN 2017-2****SECTION 5: DEMOGRAPHIC INFORMATION**

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

Years:

Months:



Previous Page

Continue to the Next Page

**RN 2017-2****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).

Age:

5. Which of the following **best** 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 **basic** 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:

91%

Previous Page

Continue to the Next Page



RN 2017-2
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.



[Previous Page](#) [Continue to the Next Page](#)



RN 2017-2
Thank you!

Thank you for your participation in this important study.
To finalize your survey, please click the **Submit Survey** button below.



[Previous Page](#) [Submit Survey](#)

Web Form 3



RN 2017-3

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 **best** 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 **last day of work**. 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.

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.



Continue to the Next Page

**RN 2017-3****INTRODUCTION**

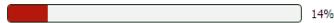
1. What type(s) of nursing license do you hold? **(Select ALL that apply)**

- RN
- LPN/VN

[Previous Page](#)[Continue to the Next Page](#)**RN 2017-3****INTRODUCTION**

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

- Yes
- No

[Previous Page](#)[Continue to the Next Page](#)



RN 2017-3

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
- No


[Previous Page](#)
[Continue to the Next Page](#)


RN 2017-3

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 - If an activity does not apply to your work setting, choose "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 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.

1 Assign and supervise care of client provided by others (e.g., LPN/VN, assistive personnel, other RNs)	<input type="text"/>	<input type="text"/>
2 Participate in performance improvement projects and quality improvement processes	<input type="text"/>	<input type="text"/>
3 Integrate advanced directives into client plan of care	<input type="text"/>	<input type="text"/>
4 Assess the need for referrals and obtain necessary orders	<input type="text"/>	<input type="text"/>
5 Recognize limitations of self and others and utilize resources	<input type="text"/>	<input type="text"/>
6 Utilize resources to enhance client care (e.g., evidenced-based research, information technology, policies and procedures)	<input type="text"/>	<input type="text"/>
7 Organize workload to manage time effectively	<input type="text"/>	<input type="text"/>
8 Practice and advocate for cost effective care	<input type="text"/>	<input type="text"/>
9 Verify appropriateness and accuracy of a treatment order	<input type="text"/>	<input type="text"/>
10 Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	<input type="text"/>	<input type="text"/>
11 Facilitate appropriate and safe use of equipment	<input type="text"/>	<input type="text"/>
12 Follow requirements for use of restraints	<input type="text"/>	<input type="text"/>
13 Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)	<input type="text"/>	<input type="text"/>
14 Perform targeted screening assessments (e.g., vision, nutrition)	<input type="text"/>	<input type="text"/>
15 Provide postpartum care and education	<input type="text"/>	<input type="text"/>
16 Provide care and education for the newborn, infant, and toddler client from birth through 2 years	<input type="text"/>	<input type="text"/>
17 Provide care and education for the adult client ages 65 years and over	<input type="text"/>	<input type="text"/>
18 Provide care and education to an antepartum client or a client in labor	<input type="text"/>	<input type="text"/>
19 Assess client for substance abuse, dependency, withdrawal, or toxicities and intervene as appropriate	<input type="text"/>	<input type="text"/>
20 Incorporate client cultural practices and beliefs when planning and providing care	<input type="text"/>	<input type="text"/>
21 Assess family dynamics to determine plan of care	<input type="text"/>	<input type="text"/>
22 Use therapeutic communication techniques	<input type="text"/>	<input type="text"/>
23 Provide care for a client experiencing visual, auditory, and/or cognitive distortions	<input type="text"/>	<input type="text"/>
24 Perform postmortem care	<input type="text"/>	<input type="text"/>
25 Perform skin assessment and/or implement measures to maintain skin integrity and prevent skin breakdown	<input type="text"/>	<input type="text"/>



[Previous Page](#)
[Continue to the Next Page](#)



RN 2017-3
SECTION 1: NURSING ACTIVITIES

Question A – FREQUENCY - If an activity does not apply to your work setting, choose "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 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
26 Provide non-pharmacological comfort measures	<input type="text"/>	<input type="text"/>
27 Evaluate client intake and output and intervene as needed	<input type="text"/>	<input type="text"/>
28 Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)	<input type="text"/>	<input type="text"/>
29 Perform calculations needed for medication administration	<input type="text"/>	<input type="text"/>
30 Handle and/or administer high-risk medications	<input type="text"/>	<input type="text"/>
31 Administer blood products and evaluate client response	<input type="text"/>	<input type="text"/>
32 Evaluate client response to medication	<input type="text"/>	<input type="text"/>
33 Participate in medication reconciliation process	<input type="text"/>	<input type="text"/>
34 Perform focused assessments	<input type="text"/>	<input type="text"/>
35 Evaluate responses to procedures and treatments	<input type="text"/>	<input type="text"/>
36 Manage client during a procedure with moderate sedation	<input type="text"/>	<input type="text"/>
37 Use precautions to prevent injury and/or complications associated with a procedure or diagnosis	<input type="text"/>	<input type="text"/>
38 Insert, maintain, or remove a nasal/oral gastrointestinal tube	<input type="text"/>	<input type="text"/>
39 Insert, maintain, or remove a peripheral intravenous line	<input type="text"/>	<input type="text"/>
40 Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	<input type="text"/>	<input type="text"/>
41 Perform wound care and/or dressing change	<input type="text"/>	<input type="text"/>
42 Provide postoperative care	<input type="text"/>	<input type="text"/>
43 Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	<input type="text"/>	<input type="text"/>
44 Maintain optimal temperature of client	<input type="text"/>	<input type="text"/>
45 Monitor and maintain arterial lines	<input type="text"/>	<input type="text"/>
46 Evaluate the effectiveness of the treatment plan for a client with an acute or chronic diagnosis	<input type="text"/>	<input type="text"/>
47 Recognize signs and symptoms of client complications and intervene	<input type="text"/>	<input type="text"/>

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



Previous Page

Continue to the Next Page



RN 2017-3

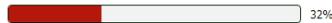
SECTION 2: EXPERIENCE AND ORIENTATION

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).

Months:

2a. Have you ever worked outside the U.S. or its territories as an RN?

- Yes
- No



Previous Page

Continue to the Next Page



RN 2017-3

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:



Previous Page

Continue to the Next Page



RN 2017-3

SECTION 2: EXPERIENCE AND ORIENTATION

3. Which of the following **best** 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):



Previous Page

Continue to the Next Page



RN 2017-3

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:



Previous Page

Continue to the Next Page



RN 2017-3

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)



Previous Page

Continue to the Next Page

**RN 2017-3****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



Previous Page

Continue to the Next Page

**RN 2017-3****SECTION 2: EXPERIENCE AND ORIENTATION**

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

Yes

No



Previous Page

Continue to the Next Page



RN 2017-3

SECTION 3: WORK ENVIRONMENT

1. Which of the following **best** describes **most** 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 **best** describes the ages of **most** 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)

3. Which of the following choices **best** describes your employment setting/specialty area **on the last day you worked**? 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)**

- | | |
|--|--|
| <input type="checkbox"/> Critical care (e.g., ICU, CCU, step-down units, pediatric/neonatal intensive care, emergency department, post-anesthesia recovery unit) | <input type="checkbox"/> Subacute unit |
| <input type="checkbox"/> Medical-surgical unit or any of its sub-specialties (e.g., oncology, orthopedics, neurology) | <input type="checkbox"/> Transitional care unit |
| <input type="checkbox"/> Pediatrics | <input type="checkbox"/> Physician/Advanced Practice RN/Nurse Practitioner (NP)/Dentist office |
| <input type="checkbox"/> Nursery | <input type="checkbox"/> Occupational health |
| <input type="checkbox"/> Labor and delivery | <input type="checkbox"/> Outpatient clinic |
| <input type="checkbox"/> Postpartum unit | <input type="checkbox"/> Home health, including visiting nurses associations |
| <input type="checkbox"/> Psychiatry or any of its sub-specialties (e.g., detox) | <input type="checkbox"/> Public health |
| <input type="checkbox"/> Assisted Living | <input type="checkbox"/> Student/school health |
| <input type="checkbox"/> Operating room, including outpatient surgery and surgicenters | <input type="checkbox"/> Hospice care |
| <input type="checkbox"/> Nursing home, skilled or intermediate care | <input type="checkbox"/> Prison/Correctional Facility/Jail |
| <input type="checkbox"/> Other long-term care (e.g., residential care, developmental disability) | <input type="checkbox"/> Short Stay/Observational |
| <input type="checkbox"/> Rehabilitation | <input type="checkbox"/> Step-down/Progressive Care |
| <input type="checkbox"/> Other (please specify) | |

4. Which of the following **best** describes the type of facility/organization where your employment setting/specialty area is located? (**Select only ONE**)

- 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)/dentist office, clinic, school, prison, etc.)
- Other (please specify)

5. If you work in a hospital 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 nursing home

6. Which of the following **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 your shift **on a typical work day**? (**Select only ONE**)

- 8 hours
- 10 hours
- 12 hours
- Varied 8 hours and 12 hours
- Other (please specify)

8. Which **best** describes the location of your employment setting?

- Urban/Metropolitan area
- Suburban
- Rural



Previous Page

Continue to the Next Page



RN 2017-3

SECTION 4: DESCRIPTION OF YOUR LAST DAY OF WORK

1. How many hours did you work on the **last shift you worked**? Please enter a positive, whole number only and round up (e.g., 20).

Hours:

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 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:

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 1/4 hours on a set of activities, select the option "2". If you spent 3 and 3/4 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

	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.	<input type="radio"/>									
2. Safety and Infection Control: Protect clients and health care personnel from health and environmental hazards.	<input type="radio"/>									
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.	<input type="radio"/>									
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.	<input type="radio"/>									
5. Basic Care and Comfort: Provide comfort and assistance in the performance of activities of daily living.	<input type="radio"/>									
6. Pharmacological and Parenteral Therapies: Provide care related to the administration of medications and parenteral therapies.	<input type="radio"/>									
7. Reduction of Risk Potential: Reduce the likelihood that clients will develop complications or health problems related to existing conditions, treatments or procedures.	<input type="radio"/>									
8. Physiological Adaptation: Manage and provide care for clients with acute, chronic or life threatening physical health conditions.	<input type="radio"/>									



**RN 2017-3****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?

Yes

No



Previous Page

Continue to the Next Page

**RN 2017-3****SECTION 5: DEMOGRAPHIC INFORMATION**

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

Years:

Months:



Previous Page

Continue to the Next Page

**RN 2017-3****SECTION 5: DEMOGRAPHIC INFORMATION**

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

- Yes
 No

[Previous Page](#)[Continue to the Next Page](#)**RN 2017-3****SECTION 5: DEMOGRAPHIC INFORMATION**

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

Years:

Months:

[Previous Page](#)[Continue to the Next Page](#)

**RN 2017-3****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).

Age:

5. Which of the following **best** 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 **basic** 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:

91%

Previous Page

Continue to the Next Page



RN 2017-3

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:

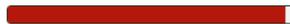
Daytime or Early Evening

Phone Number with Area

Code:

E-mail address:

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

 95%

[Previous Page](#)

[Continue to the Next Page](#)



RN 2017-3

Thank you!

Thank you for your participation in this important study.

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

 100%

[Previous Page](#)

[Submit Survey](#)

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

Activities Rank Ordered by Average Setting-Specific Frequency*				
Activity Number	Activity	Average Frequency (Setting-Specific)		
		N	Avg	Std. Err
133	Implement and monitor phototherapy	217	0.59	0.09
127	Perform and manage care of client receiving peritoneal dialysis	371	0.85	0.08
72	Perform postmortem care	527	0.86	0.06
39	Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)	615	0.92	0.06
35	Participate in emergency response plans (e.g., internal/external disaster, bomb threat, community planning)	634	0.97	0.06
31	Acknowledge and document practice errors and near misses (e.g., incident report for medication error)	641	1.06	0.07
40	Provide prenatal care and education	243	1.07	0.11
124	Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	371	1.09	0.09
73	Perform irrigations (e.g., of bladder, ear, eye)	578	1.12	0.07
16	Report client conditions as required by law (e.g., abuse/neglect and communicable disease)	579	1.15	0.07
61	Provide end-of-life care and education to clients	547	1.27	0.08
121	Perform emergency care procedures	562	1.37	0.08
41	Plan and/or participate in community health education	497	1.37	0.08
93	Administer blood products and evaluate client response	588	1.4	0.07
54	Provide care and education to an antepartum client or a client in labor	186	1.41	0.15
125	Provide ostomy care and/or education (e.g., tracheal, enteral)	588	1.43	0.07
107	Provide preoperative care	546	1.47	0.08
97	Administer parenteral nutrition and evaluate client response	492	1.48	0.09
115	Maintain percutaneous feeding tube	501	1.49	0.08
140	Manage the care of a client receiving hemodialysis or continuous renal replacement therapy	505	1.49	0.08
77	Apply, maintain, or remove orthopedic devices	548	1.52	0.08
114	Insert, maintain, or remove a nasal/oral gastrointestinal tube	578	1.53	0.08
49	Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	274	1.53	0.12
65	Provide care for a client experiencing grief or loss	697	1.54	0.07
134	Manage the care of a client with a pacing device	580	1.59	0.08
84	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)	562	1.59	0.08
19	Recognize ethical dilemmas and take appropriate action	668	1.59	0.07
108	Manage client during a procedure with moderate sedation	390	1.63	0.1
6	Participate in performance improvement projects and quality improvement processes	663	1.66	0.06
45	Provide postpartum care and education	231	1.67	0.14
36	Follow requirements for use of restraints	598	1.69	0.08
17	Manage conflict among clients and health care staff	715	1.72	0.07
135	Monitor and maintain arterial lines	428	1.72	0.1
109	Manage client following a procedure with moderate sedation	492	1.73	0.09

*Activities are rank ordered from least to most frequently performed

Activities Rank Ordered by Average Setting-Specific Frequency*				
Activity Number	Activity	Average Frequency (Setting-Specific)		
		N	Avg	Std. Err
122	Monitor and care for clients on a ventilator	354	1.84	0.11
128	Perform suctioning	599	1.92	0.08
71	Provide client nutrition through tube feedings	641	1.96	0.08
9	Integrate advanced directives into client plan of care	667	2.00	0.07
106	Provide preoperative or postoperative education	524	2.08	0.09
116	Insert, maintain, or remove a urinary catheter	662	2.15	0.07
120	Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	627	2.15	0.08
126	Provide postoperative care	534	2.19	0.09
94	Access central venous access devices	549	2.31	0.09
137	Manage the care of a client with alteration in hemodynamics, tissue perfusion, and/or hemostasis	636	2.35	0.08
113	Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)	703	2.35	0.07
57	Assess client for substance abuse, dependency, withdrawal, or toxicities and intervene as appropriate	705	2.36	0.07
56	Assess client for abuse or neglect and intervene as appropriate	715	2.38	0.08
129	Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	620	2.38	0.08
43	Educate client about prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	653	2.39	0.08
67	Incorporate behavioral management techniques when caring for a client	664	2.42	0.07
48	Provide care and education for the newborn, infant, and toddler client from birth through 2 years	254	2.43	0.14
53	Assess and educate clients about health risks based on family, population, and community characteristics	677	2.45	0.08
58	Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	629	2.47	0.08
123	Perform wound care and/or dressing change	697	2.53	0.07
131	Manage the care of a client with impaired ventilation/oxygenation	652	2.54	0.08
99	Participate in medication reconciliation process	676	2.58	0.08
69	Provide care for a client experiencing visual, auditory, and/or cognitive distortions	717	2.6	0.07
42	Perform targeted screening assessments (e.g., vision, nutrition)	661	2.61	0.08
110	Obtain blood specimens (e.g. venipuncture, venous access device, central line)	654	2.62	0.08
29	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	719	2.63	0.08
92	Titrate dosage of medication based on assessment and ordered parameters	624	2.66	0.08
52	Assess client ability to manage care in home environment and plan care accordingly	620	2.67	0.08
60	Incorporate client cultural practices and beliefs when planning and providing care	751	2.69	0.07
136	Manage the care of the client with a fluid and electrolyte imbalance	590	2.76	0.08
63	Assess family dynamics to determine plan of care	738	2.77	0.07
62	Assess the potential for violence and use safety precautions	735	2.78	0.08
64	Assess client's ability to cope with life changes and provide support	681	2.79	0.07
80	Assess client sleep/rest pattern and intervene as needed	640	2.81	0.07
24	Practice and advocate for cost effective care	722	2.82	0.07
55	Assess psychosocial, spiritual, and/or occupational factors affecting care and plan interventions	686	2.87	0.07

*Activities are rank ordered from least to most frequently performed

Activities Rank Ordered by Average Setting-Specific Frequency*				
Activity Number	Activity	Average Frequency (Setting-Specific)		
		N	Avg	Std. Err
12	Assess the need for referrals and obtain necessary orders	731	2.88	0.07
37	Educate client and staff regarding infection control measures	698	2.95	0.07
44	Educate client about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	747	2.98	0.07
87	Perform calculations needed for medication administration	702	3.00	0.07
139	Identify pathophysiology related to an acute or chronic condition	610	3.09	0.07
119	Apply and/or maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	645	3.13	0.07
76	Assess and manage client with an alteration in elimination	605	3.15	0.07
11	Provide education to clients and staff about client rights and responsibilities	762	3.16	0.07
1	Perform procedures necessary to safely admit, transfer, and/or discharge a client	695	3.23	0.07
132	Maintain optimal temperature of client	677	3.24	0.07
141	Recognize signs and symptoms of client complications and intervene	733	3.25	0.07
74	Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	729	3.32	0.07
142	Educate client regarding an acute or chronic condition	620	3.35	0.07
70	Assess and/or intervene in client performance of activities of daily living	669	3.37	0.07
103	Monitor the results of diagnostic testing and intervene as needed	629	3.39	0.07
79	Monitor the client's nutritional status	613	3.41	0.07
111	Use precautions to prevent injury and/or complications associated with a procedure or diagnosis	703	3.41	0.07
3	Assign and supervise care of client provided by others (e.g., LPN/VN, assistive personnel, other RNs)	724	3.42	0.07
10	Verify the client receives appropriate education and consents for care and procedures	705	3.42	0.06
28	Follow procedures for handling biohazardous and hazardous materials	699	3.44	0.07
112	Educate client about treatments and procedures	624	3.45	0.07
117	Insert, maintain, or remove a peripheral intravenous line	667	3.45	0.07
82	Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	612	3.47	0.07
90	Handle and/or administer high-risk medications	695	3.49	0.07
38	Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	754	3.5	0.07
47	Assess client's readiness to learn, learning preferences, and barriers to learning	752	3.52	0.06
8	Receive and transcribe health care provider orders	745	3.55	0.06
18	Utilize resources to enhance client care (e.g., evidenced-based research, information technology, policies and procedures)	759	3.56	0.06
118	Recognize trends and changes in client condition and intervene as needed	636	3.63	0.06
4	Advocate for client rights and needs	711	3.68	0.06
68	Recognize nonverbal cues to physical and/or psychological stressors	759	3.69	0.06
138	Evaluate the effectiveness of the treatment plan for a client with an acute or chronic diagnosis	697	3.72	0.06
130	Manage the care of a client on telemetry	481	3.73	0.08
2	Provide and receive hand-off of care (report) on assigned clients	766	3.78	0.05

*Activities are rank ordered from least to most frequently performed

Activities Rank Ordered by Average Setting-Specific Frequency*				
Activity Number	Activity	Average Frequency (Setting-Specific)		
		N	Avg	Std. Err
15	Recognize limitations of self and others and utilize resources	772	3.78	0.05
105	Evaluate responses to procedures and treatments	725	3.87	0.06
34	Educate client on safety issues	704	3.89	0.06
13	Initiate, evaluate and update client plan of care	706	3.91	0.06
89	Handle and/or administer controlled substances within regulatory guidelines	689	3.93	0.06
78	Provide non-pharmacological comfort measures	426	3.93	0.07
81	Evaluate client intake and output and intervene as needed	701	3.98	0.06
51	Provide care and education for the adult client ages 65 years and over	662	4.00	0.06
104	Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)	699	4.01	0.06
98	Administer medications for pain management	679	4.05	0.06
101	Assess and respond to changes and/or trends in client vital signs	717	4.06	0.05
95	Educate client about medications	697	4.07	0.06
46	Perform comprehensive health assessments	658	4.1	0.06
27	Verify appropriateness and accuracy of a treatment order	766	4.16	0.05
75	Perform skin assessment and/or implement measures to maintain skin integrity and prevent skin breakdown	753	4.17	0.05
33	Facilitate appropriate and safe use of equipment	770	4.23	0.05
7	Collaborate with interprofessional team members when providing client care	716	4.28	0.05
88	Monitor intravenous infusion and maintain site	594	4.29	0.06
91	Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)	634	4.29	0.05
20	Use approved abbreviations and standard terminology when documenting care	772	4.29	0.05
50	Provide care and education for the adult client ages 18 through 64 years	727	4.3	0.05
30	Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	767	4.3	0.04
85	Evaluate appropriateness and accuracy of medication order for client	639	4.37	0.05
59	Promote a therapeutic environment	766	4.37	0.04
66	Use therapeutic communication techniques	759	4.41	0.04
26	Protect client from injury (e.g., falls, electrical hazards)	762	4.47	0.04
102	Perform focused assessments	719	4.51	0.04
96	Evaluate client response to medication	708	4.53	0.04
83	Assess client for pain and intervene as appropriate	709	4.55	0.04
5	Prioritize the delivery of client care	780	4.64	0.03
21	Organize workload to manage time effectively	774	4.65	0.03
14	Maintain client confidentiality and privacy	768	4.7	0.03
22	Practice in a manner consistent with a code of ethics for nurses	706	4.71	0.03
100	Handle and maintain medication in a safe and controlled environment	630	4.75	0.03
86	Prepare and administer medications using rights of medication administration	701	4.77	0.03
32	Ensure proper identification of client when providing care	767	4.82	0.02
23	Provide care within the legal scope of practice	771	4.85	0.02
25	Apply principles of infection control (e.g., hand hygiene, aseptic technique, isolation, sterile technique, universal/standard precautions)	715	4.91	0.02

*Activities are rank ordered from least to most frequently performed

APPENDIX E: ACTIVITIES RANK ORDERED BY AVERAGE TOTAL GROUP FREQUENCY*

Activities Rank Ordered by Average Total Group Frequency*				
Activity Number	Activity	Average Frequency (Total Group)		
		N	Avg	Std. Err.
133	Implement and monitor phototherapy	648	0.2	0.03
54	Provide care and education to an antepartum client or a client in labor	771	0.34	0.04
40	Provide prenatal care and education	709	0.37	0.04
127	Perform and manage care of client receiving peritoneal dialysis	653	0.48	0.05
45	Provide postpartum care and education	767	0.5	0.05
72	Perform postmortem care	773	0.59	0.05
49	Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	716	0.59	0.05
124	Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	647	0.62	0.06
39	Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)	779	0.72	0.05
35	Participate in emergency response plans (e.g., internal/external disaster, bomb threat, community planning)	776	0.79	0.05
48	Provide care and education for the newborn, infant, and toddler client from birth through 2 years	772	0.8	0.06
108	Manage client during a procedure with moderate sedation	733	0.87	0.06
41	Plan and/or participate in community health education	775	0.88	0.06
122	Monitor and care for clients on a ventilator	718	0.91	0.06
73	Perform irrigations (e.g., of bladder, ear, eye)	716	0.91	0.06
16	Report client conditions as required by law (e.g., abuse/neglect and communicable disease)	712	0.94	0.06
31	Acknowledge and document practice errors and near misses (e.g., incident report for medication error)	715	0.95	0.06
61	Provide end-of-life care and education to clients	713	0.97	0.06
135	Monitor and maintain arterial lines	729	1.01	0.07
140	Manage the care of a client receiving hemodialysis or continuous renal replacement therapy	718	1.05	0.06
107	Provide preoperative care	717	1.12	0.06
93	Administer blood products and evaluate client response	731	1.13	0.06
97	Administer parenteral nutrition and evaluate client response	642	1.13	0.07
115	Maintain percutaneous feeding tube	648	1.15	0.07
125	Provide ostomy care and/or education (e.g., tracheal, enteral)	723	1.16	0.06
77	Apply, maintain, or remove orthopedic devices	712	1.17	0.06
121	Perform emergency care procedures	649	1.18	0.07
114	Insert, maintain, or remove a nasal/oral gastrointestinal tube	738	1.2	0.06
84	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)	727	1.23	0.07
134	Manage the care of a client with a pacing device	714	1.29	0.07
109	Manage client following a procedure with moderate sedation	652	1.3	0.07
36	Follow requirements for use of restraints	769	1.31	0.07
65	Provide care for a client experiencing grief or loss	773	1.39	0.06

*Activities are rank ordered from least to most frequently performed.

Activities Rank Ordered by Average Total Group Frequency*				
Activity Number	Activity	Average Frequency (Total Group)		
		N	Avg	Std. Err.
6	Participate in performance improvement projects and quality improvement processes	770	1.43	0.06
19	Recognize ethical dilemmas and take appropriate action	711	1.5	0.07
17	Manage conflict among clients and health care staff	777	1.58	0.06
128	Perform suctioning	714	1.61	0.07
71	Provide client nutrition through tube feedings	772	1.63	0.07
126	Provide postoperative care	716	1.63	0.08
106	Provide preoperative or postoperative education	644	1.69	0.08
9	Integrate advanced directives into client plan of care	780	1.71	0.07
120	Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	735	1.83	0.07
94	Access central venous access devices	638	1.99	0.08
116	Insert, maintain, or remove a urinary catheter	715	1.99	0.07
129	Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	743	1.99	0.08
137	Manage the care of a client with alteration in hemodynamics, tissue perfusion, and/or hemostasis	720	2.08	0.08
53	Assess and educate clients about health risks based on family, population, and community characteristics	774	2.14	0.07
57	Assess client for substance abuse, dependency, withdrawal, or toxicities and intervene as appropriate	779	2.14	0.07
43	Educate client about prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	714	2.19	0.07
58	Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	711	2.19	0.08
56	Assess client for abuse or neglect and intervene as appropriate	762	2.23	0.08
42	Perform targeted screening assessments (e.g., vision, nutrition)	774	2.23	0.07
67	Incorporate behavioral management techniques when caring for a client	714	2.25	0.07
113	Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)	724	2.28	0.07
131	Manage the care of a client with impaired ventilation/oxygenation	718	2.31	0.07
52	Assess client ability to manage care in home environment and plan care accordingly	709	2.33	0.07
92	Titrate dosage of medication based on assessment and ordered parameters	708	2.34	0.08
123	Perform wound care and/or dressing change	742	2.37	0.07
110	Obtain blood specimens (e.g. venipuncture, venous access device, central line)	717	2.39	0.08
99	Participate in medication reconciliation process	729	2.39	0.08
69	Provide care for a client experiencing visual, auditory, and/or cognitive distortions	774	2.41	0.07
29	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	776	2.44	0.08
136	Manage the care of the client with a fluid and electrolyte imbalance	641	2.54	0.08
80	Assess client sleep/rest pattern and intervene as needed	706	2.55	0.07
60	Incorporate client cultural practices and beliefs when planning and providing care	770	2.62	0.07
63	Assess family dynamics to determine plan of care	776	2.64	0.07
24	Practice and advocate for cost effective care	764	2.66	0.07
62	Assess the potential for violence and use safety precautions	767	2.67	0.08
64	Assess client's ability to cope with life changes and provide support	707	2.69	0.07
12	Assess the need for referrals and obtain necessary orders	771	2.73	0.07

*Activities are rank ordered from least to most frequently performed.

Activities Rank Ordered by Average Total Group Frequency*				
Activity Number	Activity	Average Frequency (Total Group)		
		N	Avg	Std. Err.
55	Assess psychosocial, spiritual, and/or occupational factors affecting care and plan interventions	715	2.76	0.07
130	Manage the care of a client on telemetry	645	2.78	0.09
119	Apply and/or maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	724	2.79	0.08
87	Perform calculations needed for medication administration	731	2.88	0.07
44	Educate client about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	772	2.89	0.07
37	Educate client and staff regarding infection control measures	712	2.89	0.07
139	Identify pathophysiology related to an acute or chronic condition	650	2.9	0.08
76	Assess and manage client with an alteration in elimination	637	2.99	0.07
132	Maintain optimal temperature of client	734	2.99	0.08
11	Provide education to clients and staff about client rights and responsibilities	781	3.09	0.07
1	Perform procedures necessary to safely admit, transfer, and/or discharge a client	719	3.12	0.07
117	Insert, maintain, or remove a peripheral intravenous line	735	3.13	0.07
3	Assign and supervise care of client provided by others (e.g., LPN/VN, assistive personnel, other RNs)	781	3.17	0.07
74	Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	764	3.17	0.07
70	Assess and/or intervene in client performance of activities of daily living	706	3.19	0.07
141	Recognize signs and symptoms of client complications and intervene	739	3.22	0.07
142	Educate client regarding an acute or chronic condition	644	3.23	0.07
111	Use precautions to prevent injury and/or complications associated with a procedure or diagnosis	737	3.25	0.07
79	Monitor the client's nutritional status	641	3.26	0.07
103	Monitor the results of diagnostic testing and intervene as needed	653	3.26	0.07
82	Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	637	3.33	0.07
112	Educate client about treatments and procedures	642	3.35	0.07
90	Handle and/or administer high-risk medications	724	3.35	0.07
10	Verify the client receives appropriate education and consents for care and procedures	712	3.38	0.06
28	Follow procedures for handling biohazardous and hazardous materials	708	3.4	0.07
47	Assess client's readiness to learn, learning preferences, and barriers to learning	776	3.41	0.07
38	Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	767	3.44	0.07
8	Receive and transcribe health care provider orders	767	3.45	0.06
51	Provide care and education for the adult client ages 65 years and over	763	3.47	0.07
18	Utilize resources to enhance client care (e.g., evidenced-based research, information technology, policies and procedures)	772	3.5	0.06
138	Evaluate the effectiveness of the treatment plan for a client with an acute or chronic diagnosis	737	3.52	0.07
118	Recognize trends and changes in client condition and intervene as needed	643	3.59	0.07
4	Advocate for client rights and needs	714	3.66	0.06
68	Recognize nonverbal cues to physical and/or psychological stressors	766	3.66	0.06

*Activities are rank ordered from least to most frequently performed.

Activities Rank Ordered by Average Total Group Frequency*				
Activity Number	Activity	Average Frequency (Total Group)		
		N	Avg	Std. Err.
2	Provide and receive hand-off of care (report) on assigned clients	778	3.72	0.05
15	Recognize limitations of self and others and utilize resources	778	3.75	0.05
105	Evaluate responses to procedures and treatments	737	3.81	0.06
89	Handle and/or administer controlled substances within regulatory guidelines	711	3.81	0.07
81	Evaluate client intake and output and intervene as needed	731	3.82	0.06
13	Initiate, evaluate and update client plan of care	718	3.84	0.06
34	Educate client on safety issues	711	3.85	0.06
46	Perform comprehensive health assessments	698	3.87	0.07
98	Administer medications for pain management	707	3.89	0.06
78	Provide non-pharmacological comfort measures	430	3.89	0.07
104	Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)	717	3.91	0.06
88	Monitor intravenous infusion and maintain site	637	4.00	0.07
95	Educate client about medications	707	4.01	0.06
101	Assess and respond to changes and/or trends in client vital signs	723	4.02	0.06
75	Perform skin assessment and/or implement measures to maintain skin integrity and prevent skin breakdown	774	4.05	0.06
50	Provide care and education for the adult client ages 18 through 64 years	768	4.07	0.06
27	Verify appropriateness and accuracy of a treatment order	776	4.11	0.05
33	Facilitate appropriate and safe use of equipment	775	4.2	0.05
91	Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)	643	4.23	0.06
30	Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	774	4.26	0.05
20	Use approved abbreviations and standard terminology when documenting care	776	4.27	0.05
7	Collaborate with interprofessional team members when providing client care	717	4.28	0.05
59	Promote a therapeutic environment	770	4.34	0.04
85	Evaluate appropriateness and accuracy of medication order for client	642	4.35	0.05
66	Use therapeutic communication techniques	766	4.37	0.05
102	Perform focused assessments	729	4.45	0.04
26	Protect client from injury (e.g., falls, electrical hazards)	766	4.45	0.04
96	Evaluate client response to medication	719	4.46	0.04
83	Assess client for pain and intervene as appropriate	712	4.53	0.04
5	Prioritize the delivery of client care	784	4.61	0.03
21	Organize workload to manage time effectively	778	4.62	0.03
100	Handle and maintain medication in a safe and controlled environment	637	4.7	0.04
14	Maintain client confidentiality and privacy	769	4.7	0.03
22	Practice in a manner consistent with a code of ethics for nurses	707	4.71	0.03
86	Prepare and administer medications using rights of medication administration	708	4.73	0.04
32	Ensure proper identification of client when providing care	768	4.81	0.03
23	Provide care within the legal scope of practice	774	4.83	0.03
25	Apply principles of infection control (e.g., hand hygiene, aseptic technique, isolation, sterile technique, universal/standard precautions)	715	4.91	0.02

*Activities are rank ordered from least to most frequently performed.

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

Activities Rank Ordered by Average Setting-Specific Importance*				
Activity Number	Activity	Setting-Specific Importance		
		N	Avg	Std. Err.
41	Plan and/or participate in community health education	367	3.46	0.05
84	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)	419	3.54	0.05
6	Participate in performance improvement projects and quality improvement processes	493	3.63	0.04
77	Apply, maintain, or remove orthopedic devices	439	3.64	0.05
24	Practice and advocate for cost effective care	540	3.72	0.04
53	Assess and educate clients about health risks based on family, population, and community characteristics	515	3.73	0.04
80	Assess client sleep/rest pattern and intervene as needed	530	3.74	0.04
133	Implement and monitor phototherapy	178	3.74	0.08
17	Manage conflict among clients and health care staff	551	3.76	0.04
72	Perform postmortem care	378	3.76	0.05
73	Perform irrigations (e.g., of bladder, ear, eye)	464	3.78	0.04
42	Perform targeted screening assessments (e.g., vision, nutrition)	482	3.87	0.04
67	Incorporate behavioral management techniques when caring for a client	544	3.88	0.04
63	Assess family dynamics to determine plan of care	548	3.89	0.04
55	Assess psychosocial, spiritual, and/or occupational factors affecting care and plan interventions	566	3.92	0.04
49	Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	212	3.92	0.06
44	Educate client about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	583	3.95	0.03
113	Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)	570	3.95	0.04
65	Provide care for a client experiencing grief or loss	530	3.95	0.04
125	Provide ostomy care and/or education (e.g., tracheal, enteral)	470	3.97	0.04
107	Provide preoperative care	434	3.97	0.05
115	Maintain percutaneous feeding tube	411	3.98	0.05
20	Use approved abbreviations and standard terminology when documenting care	601	3.98	0.04
119	Apply and/or maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	525	3.99	0.04
47	Assess client's readiness to learn, learning preferences, and barriers to learning	586	4.02	0.03
114	Insert, maintain, or remove a nasal/oral gastrointestinal tube	433	4.02	0.04
127	Perform and manage care of client receiving peritoneal dialysis	309	4.02	0.06
40	Provide prenatal care and education	193	4.02	0.07
129	Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	476	4.02	0.04
43	Educate client about prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	541	4.03	0.04
78	Provide non-pharmacological comfort measures	267	4.03	0.05
9	Integrate advanced directives into client plan of care	494	4.04	0.04
11	Provide education to clients and staff about client rights and responsibilities	592	4.04	0.04
60	Incorporate client cultural practices and beliefs when planning and providing care	559	4.06	0.04
123	Perform wound care and/or dressing change	532	4.06	0.04

*Activities are rank ordered from least to most important.

Activities Rank Ordered by Average Setting-Specific Importance*				
Activity Number	Activity	Setting-Specific Importance		
		N	Avg	Std. Err.
35	Participate in emergency response plans (e.g., internal/external disaster, bomb threat, community planning)	481	4.07	0.04
45	Provide postpartum care and education	159	4.08	0.07
70	Assess and/or intervene in client performance of activities of daily living	551	4.09	0.04
61	Provide end-of-life care and education to clients	441	4.09	0.04
69	Provide care for a client experiencing visual, auditory, and/or cognitive distortions	534	4.11	0.03
12	Assess the need for referrals and obtain necessary orders	539	4.12	0.04
3	Assign and supervise care of client provided by others (e.g., LPN/VN, assistive personnel, other RNs)	542	4.12	0.04
13	Initiate, evaluate and update client plan of care	587	4.12	0.04
116	Insert, maintain, or remove a urinary catheter	538	4.12	0.04
64	Assess client's ability to cope with life changes and provide support	564	4.13	0.03
19	Recognize ethical dilemmas and take appropriate action	556	4.13	0.04
79	Monitor the client's nutritional status	522	4.16	0.04
54	Provide care and education to an antepartum client or a client in labor	120	4.17	0.08
71	Provide client nutrition through tube feedings	497	4.17	0.04
97	Administer parenteral nutrition and evaluate client response	419	4.18	0.04
59	Promote a therapeutic environment	603	4.18	0.03
76	Assess and manage client with an alteration in elimination	518	4.2	0.04
74	Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	574	4.2	0.03
58	Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	516	4.2	0.04
99	Participate in medication reconciliation process	517	4.21	0.04
52	Assess client ability to manage care in home environment and plan care accordingly	505	4.22	0.04
57	Assess client for substance abuse, dependency, withdrawal, or toxicities and intervene as appropriate	521	4.22	0.04
134	Manage the care of a client with a pacing device	457	4.22	0.04
51	Provide care and education for the adult client ages 65 years and over	489	4.22	0.03
132	Maintain optimal temperature of client	520	4.23	0.04
106	Provide preoperative or postoperative education	435	4.23	0.04
109	Manage client following a procedure with moderate sedation	410	4.26	0.05
68	Recognize nonverbal cues to physical and/or psychological stressors	596	4.26	0.03
128	Perform suctioning	481	4.27	0.04
117	Insert, maintain, or remove a peripheral intravenous line	510	4.28	0.03
110	Obtain blood specimens (e.g. venipuncture, venous access device, central line)	525	4.28	0.03
82	Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	521	4.29	0.03
29	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	561	4.3	0.03
66	Use therapeutic communication techniques	571	4.3	0.03
112	Educate client about treatments and procedures	533	4.31	0.03
139	Identify pathophysiology related to an acute or chronic condition	520	4.31	0.03
140	Manage the care of a client receiving hemodialysis or continuous renal replacement therapy	392	4.31	0.04

*Activities are rank ordered from least to most important.

Activities Rank Ordered by Average Setting-Specific Importance*				
Activity Number	Activity	Setting-Specific Importance		
		N	Avg	Std. Err.
142	Educate client regarding an acute or chronic condition	532	4.33	0.03
124	Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	301	4.34	0.05
120	Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	474	4.34	0.03
18	Utilize resources to enhance client care (e.g., evidenced-based research, information technology, policies and procedures)	564	4.34	0.03
56	Assess client for abuse or neglect and intervene as appropriate	552	4.35	0.03
83	Assess client for pain and intervene as appropriate	581	4.35	0.03
62	Assess the potential for violence and use safety precautions	573	4.35	0.03
95	Educate client about medications	573	4.35	0.03
50	Provide care and education for the adult client ages 18 through 64 years	566	4.36	0.03
48	Provide care and education for the newborn, infant, and toddler client from birth through 2 years	181	4.36	0.06
15	Recognize limitations of self and others and utilize resources	577	4.36	0.03
81	Evaluate client intake and output and intervene as needed	538	4.37	0.03
138	Evaluate the effectiveness of the treatment plan for a client with an acute or chronic diagnosis	543	4.37	0.03
36	Follow requirements for use of restraints	439	4.37	0.04
37	Educate client and staff regarding infection control measures	573	4.39	0.03
1	Perform procedures necessary to safely admit, transfer, and/or discharge a client	578	4.4	0.03
126	Provide postoperative care	407	4.4	0.04
39	Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)	450	4.42	0.04
111	Use precautions to prevent injury and/or complications associated with a procedure or diagnosis	538	4.42	0.03
98	Administer medications for pain management	561	4.43	0.03
105	Evaluate responses to procedures and treatments	565	4.43	0.03
135	Monitor and maintain arterial lines	327	4.43	0.04
108	Manage client during a procedure with moderate sedation	281	4.44	0.05
31	Acknowledge and document practice errors and near misses (e.g., incident report for medication error)	525	4.45	0.03
33	Facilitate appropriate and safe use of equipment	574	4.46	0.03
103	Monitor the results of diagnostic testing and intervene as needed	538	4.46	0.03
130	Manage the care of a client on telemetry	409	4.48	0.03
94	Access central venous access devices	467	4.49	0.03
30	Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	570	4.49	0.03
34	Educate client on safety issues	580	4.5	0.03
28	Follow procedures for handling biohazardous and hazardous materials	579	4.51	0.03
46	Perform comprehensive health assessments	543	4.51	0.03
8	Receive and transcribe health care provider orders	582	4.51	0.03
16	Report client conditions as required by law (e.g., abuse/neglect and communicable disease)	472	4.51	0.03
137	Manage the care of a client with alteration in hemodynamics, tissue perfusion, and/or hemostasis	514	4.52	0.03

*Activities are rank ordered from least to most important.

Activities Rank Ordered by Average Setting-Specific Importance*				
Activity Number	Activity	Setting-Specific Importance		
		N	Avg	Std. Err.
75	Perform skin assessment and/or implement measures to maintain skin integrity and prevent skin breakdown	565	4.52	0.03
10	Verify the client receives appropriate education and consents for care and procedures	586	4.54	0.03
136	Manage the care of the client with a fluid and electrolyte imbalance	506	4.56	0.03
7	Collaborate with interprofessional team members when providing client care	593	4.57	0.02
21	Organize workload to manage time effectively	576	4.57	0.03
104	Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)	570	4.57	0.03
38	Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	592	4.61	0.03
131	Manage the care of a client with impaired ventilation/oxygenation	532	4.63	0.03
122	Monitor and care for clients on a ventilator	276	4.63	0.05
102	Perform focused assessments	559	4.63	0.02
4	Advocate for client rights and needs	588	4.65	0.02
87	Perform calculations needed for medication administration	542	4.68	0.03
5	Prioritize the delivery of client care	608	4.68	0.02
96	Evaluate client response to medication	559	4.69	0.02
14	Maintain client confidentiality and privacy	599	4.69	0.02
92	Titrate dosage of medication based on assessment and ordered parameters	506	4.7	0.03
89	Handle and/or administer controlled substances within regulatory guidelines	569	4.71	0.02
121	Perform emergency care procedures	470	4.71	0.03
2	Provide and receive hand-off of care (report) on assigned clients	602	4.71	0.02
27	Verify appropriateness and accuracy of a treatment order	570	4.71	0.02
93	Administer blood products and evaluate client response	450	4.72	0.03
22	Practice in a manner consistent with a code of ethics for nurses	590	4.72	0.02
88	Monitor intravenous infusion and maintain site	510	4.73	0.02
100	Handle and maintain medication in a safe and controlled environment	541	4.74	0.02
85	Evaluate appropriateness and accuracy of medication order for client	548	4.75	0.02
141	Recognize signs and symptoms of client complications and intervene	567	4.76	0.02
101	Assess and respond to changes and/or trends in client vital signs	590	4.77	0.02
91	Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)	545	4.77	0.02
118	Recognize trends and changes in client condition and intervene as needed	549	4.8	0.02
90	Handle and/or administer high-risk medications	540	4.81	0.02
26	Protect client from injury (e.g., falls, electrical hazards)	600	4.81	0.02
23	Provide care within the legal scope of practice	602	4.83	0.02
25	Apply principles of infection control (e.g., hand hygiene, aseptic technique, isolation, sterile technique, universal/standard precautions)	592	4.87	0.02
32	Ensure proper identification of client when providing care	603	4.88	0.02
86	Prepare and administer medications using rights of medication administration	574	4.91	0.01

*Activities are rank ordered from least to most important.

APPENDIX G: ACTIVITIES RANK ORDERED BY AVERAGE TOTAL GROUP IMPORTANCE*

Activities Rank Ordered by Average Total Group Importance*				
Activity Number	Activity	Total Group Importance		
		N	Avg	Std. Err.
84	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupuncture, supplements)	541	3.36	0.05
133	Implement and monitor phototherapy	499	3.39	0.06
41	Plan and/or participate in community health education	584	3.4	0.04
77	Apply, maintain, or remove orthopedic devices	557	3.5	0.05
6	Participate in performance improvement projects and quality improvement processes	566	3.62	0.04
53	Assess and educate clients about health risks based on family, population, and community characteristics	594	3.67	0.04
49	Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	538	3.67	0.05
80	Assess client sleep/rest pattern and intervene as needed	570	3.68	0.04
24	Practice and advocate for cost effective care	573	3.68	0.04
72	Perform postmortem care	543	3.69	0.05
73	Perform irrigations (e.g., of bladder, ear, eye)	563	3.7	0.04
45	Provide postpartum care and education	515	3.73	0.05
17	Manage conflict among clients and health care staff	599	3.77	0.04
40	Provide prenatal care and education	534	3.79	0.05
42	Perform targeted screening assessments (e.g., vision, nutrition)	557	3.81	0.04
54	Provide care and education to an antepartum client or a client in labor	502	3.81	0.06
127	Perform and manage care of client receiving peritoneal dialysis	515	3.82	0.06
67	Incorporate behavioral management techniques when caring for a client	580	3.84	0.04
63	Assess family dynamics to determine plan of care	576	3.86	0.04
115	Maintain percutaneous feeding tube	524	3.87	0.05
55	Assess psychosocial, spiritual, and/or occupational factors affecting care and plan interventions	588	3.88	0.04
125	Provide ostomy care and/or education (e.g., tracheal, enteral)	569	3.89	0.04
119	Apply and/or maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	579	3.91	0.04
9	Integrate advanced directives into client plan of care	568	3.92	0.04
65	Provide care for a client experiencing grief or loss	590	3.92	0.04
107	Provide preoperative care	560	3.92	0.04
113	Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)	584	3.94	0.04
44	Educate client about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	599	3.95	0.03
114	Insert, maintain, or remove a nasal/oral gastrointestinal tube	542	3.95	0.04
129	Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	557	3.95	0.04
48	Provide care and education for the newborn, infant, and toddler client from birth through 2 years	517	3.97	0.05
20	Use approved abbreviations and standard terminology when documenting care	604	3.98	0.04
47	Assess client's readiness to learn, learning preferences, and barriers to learning	600	4.00	0.03
43	Educate client about prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	586	4.01	0.04

*Activities are rank ordered from least to most important

Activities Rank Ordered by Average Total Group Importance*				
Activity Number	Activity	Total Group Importance		
		N	Avg	Std. Err.
97	Administer parenteral nutrition and evaluate client response	531	4.02	0.05
35	Participate in emergency response plans (e.g., internal/external disaster, bomb threat, community planning)	598	4.02	0.04
123	Perform wound care and/or dressing change	562	4.02	0.04
11	Provide education to clients and staff about client rights and responsibilities	609	4.02	0.04
61	Provide end-of-life care and education to clients	568	4.02	0.04
70	Assess and/or intervene in client performance of activities of daily living	577	4.03	0.04
78	Provide non-pharmacological comfort measures	271	4.03	0.05
60	Incorporate client cultural practices and beliefs when planning and providing care	573	4.05	0.03
71	Provide client nutrition through tube feedings	590	4.05	0.04
3	Assign and supervise care of client provided by others (e.g., LPN/VN, assistive personnel, other RNs)	578	4.06	0.04
12	Assess the need for referrals and obtain necessary orders	567	4.07	0.04
116	Insert, maintain, or remove a urinary catheter	571	4.07	0.04
69	Provide care for a client experiencing visual, auditory, and/or cognitive distortions	573	4.07	0.03
106	Provide preoperative or postoperative education	529	4.09	0.04
124	Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	503	4.1	0.05
13	Initiate, evaluate and update client plan of care	596	4.12	0.04
134	Manage the care of a client with a pacing device	555	4.12	0.04
64	Assess client's ability to cope with life changes and provide support	583	4.13	0.03
79	Monitor the client's nutritional status	541	4.13	0.04
19	Recognize ethical dilemmas and take appropriate action	588	4.13	0.04
51	Provide care and education for the adult client ages 65 years and over	554	4.14	0.04
52	Assess client ability to manage care in home environment and plan care accordingly	567	4.15	0.04
76	Assess and manage client with an alteration in elimination	540	4.16	0.04
57	Assess client for substance abuse, dependency, withdrawal, or toxicities and intervene as appropriate	570	4.16	0.04
74	Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	596	4.16	0.03
58	Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	575	4.16	0.04
109	Manage client following a procedure with moderate sedation	527	4.17	0.05
140	Manage the care of a client receiving hemodialysis or continuous renal replacement therapy	545	4.17	0.04
59	Promote a therapeutic environment	606	4.18	0.03
99	Participate in medication reconciliation process	556	4.19	0.04
132	Maintain optimal temperature of client	558	4.2	0.04
110	Obtain blood specimens (e.g. venipuncture, venous access device, central line)	568	4.2	0.04
135	Monitor and maintain arterial lines	527	4.21	0.05
128	Perform suctioning	560	4.22	0.04
117	Insert, maintain, or remove a peripheral intravenous line	560	4.23	0.04
126	Provide postoperative care	536	4.23	0.04
82	Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	537	4.24	0.04

*Activities are rank ordered from least to most important

Activities Rank Ordered by Average Total Group Importance*				
Activity Number	Activity	Total Group Importance		
		N	Avg	Std. Err.
108	Manage client during a procedure with moderate sedation	517	4.25	0.05
68	Recognize nonverbal cues to physical and/or psychological stressors	600	4.25	0.03
139	Identify pathophysiology related to an acute or chronic condition	547	4.27	0.04
36	Follow requirements for use of restraints	561	4.28	0.04
29	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	601	4.28	0.03
130	Manage the care of a client on telemetry	532	4.28	0.05
120	Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	547	4.28	0.04
112	Educate client about treatments and procedures	546	4.29	0.03
66	Use therapeutic communication techniques	577	4.29	0.03
56	Assess client for abuse or neglect and intervene as appropriate	588	4.32	0.03
142	Educate client regarding an acute or chronic condition	546	4.32	0.03
50	Provide care and education for the adult client ages 18 through 64 years	598	4.32	0.03
62	Assess the potential for violence and use safety precautions	596	4.33	0.03
81	Evaluate client intake and output and intervene as needed	561	4.33	0.04
138	Evaluate the effectiveness of the treatment plan for a client with an acute or chronic diagnosis	566	4.33	0.03
18	Utilize resources to enhance client care (e.g., evidenced-based research, information technology, policies and procedures)	573	4.33	0.03
95	Educate client about medications	580	4.34	0.03
83	Assess client for pain and intervene as appropriate	583	4.35	0.03
15	Recognize limitations of self and others and utilize resources	582	4.35	0.03
37	Educate client and staff regarding infection control measures	585	4.37	0.03
1	Perform procedures necessary to safely admit, transfer, and/or discharge a client	595	4.37	0.03
94	Access central venous access devices	528	4.4	0.04
98	Administer medications for pain management	578	4.4	0.03
111	Use precautions to prevent injury and/or complications associated with a procedure or diagnosis	562	4.4	0.03
122	Monitor and care for clients on a ventilator	537	4.41	0.05
39	Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)	563	4.41	0.03
31	Acknowledge and document practice errors and near misses (e.g., incident report for medication error)	584	4.42	0.03
105	Evaluate responses to procedures and treatments	573	4.42	0.03
137	Manage the care of a client with alteration in hemodynamics, tissue perfusion, and/or hemostasis	575	4.43	0.04
103	Monitor the results of diagnostic testing and intervene as needed	552	4.43	0.03
33	Facilitate appropriate and safe use of equipment	579	4.46	0.03
46	Perform comprehensive health assessments	574	4.47	0.03
8	Receive and transcribe health care provider orders	600	4.47	0.03
30	Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	576	4.48	0.03
34	Educate client on safety issues	586	4.49	0.03

*Activities are rank ordered from least to most important

Activities Rank Ordered by Average Total Group Importance*				
Activity Number	Activity	Total Group Importance		
		N	Avg	Std. Err.
16	Report client conditions as required by law (e.g., abuse/neglect and communicable disease)	576	4.49	0.03
28	Follow procedures for handling biohazardous and hazardous materials	587	4.5	0.03
136	Manage the care of the client with a fluid and electrolyte imbalance	538	4.51	0.03
75	Perform skin assessment and/or implement measures to maintain skin integrity and prevent skin breakdown	579	4.51	0.03
10	Verify the client receives appropriate education and consents for care and procedures	593	4.52	0.03
104	Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)	585	4.54	0.03
7	Collaborate with interprofessional team members when providing client care	594	4.57	0.02
21	Organize workload to manage time effectively	580	4.57	0.03
131	Manage the care of a client with impaired ventilation/oxygenation	575	4.58	0.03
38	Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	599	4.6	0.03
102	Perform focused assessments	566	4.62	0.03
93	Administer blood products and evaluate client response	555	4.63	0.03
121	Perform emergency care procedures	535	4.64	0.03
4	Advocate for client rights and needs	591	4.65	0.02
92	Titrate dosage of medication based on assessment and ordered parameters	571	4.65	0.03
87	Perform calculations needed for medication administration	563	4.67	0.03
88	Monitor intravenous infusion and maintain site	542	4.68	0.03
5	Prioritize the delivery of client care	610	4.68	0.02
96	Evaluate client response to medication	567	4.69	0.02
14	Maintain client confidentiality and privacy	600	4.69	0.02
89	Handle and/or administer controlled substances within regulatory guidelines	582	4.7	0.03
27	Verify appropriateness and accuracy of a treatment order	576	4.7	0.03
2	Provide and receive hand-off of care (report) on assigned clients	608	4.71	0.02
22	Practice in a manner consistent with a code of ethics for nurses	590	4.72	0.02
100	Handle and maintain medication in a safe and controlled environment	546	4.73	0.02
85	Evaluate appropriateness and accuracy of medication order for client	550	4.74	0.02
91	Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)	551	4.75	0.02
141	Recognize signs and symptoms of client complications and intervene	571	4.76	0.02
101	Assess and respond to changes and/or trends in client vital signs	593	4.78	0.02
90	Handle and/or administer high-risk medications	564	4.78	0.02
26	Protect client from injury (e.g., falls, electrical hazards)	603	4.79	0.02
118	Recognize trends and changes in client condition and intervene as needed	554	4.79	0.02
23	Provide care within the legal scope of practice	603	4.83	0.02
25	Apply principles of infection control (e.g., hand hygiene, aseptic technique, isolation, sterile technique, universal/standard precautions)	592	4.87	0.02
32	Ensure proper identification of client when providing care	603	4.88	0.02
86	Prepare and administer medications using rights of medication administration	577	4.91	0.01

*Activities are rank ordered from least to most important

APPENDIX H: 2017 RN PRACTICE ANALYSIS SURVEY NONRESPONDENT 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 2017 RN Practice Analysis had an adequate analyzable response rate of approximately 19%, many individuals did not respond to the survey. Out of the 12,000 newly licensed RNs who were invited to take the survey, 2,643 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 2017 RN Practice Analysis 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 2017 RN Practice Analysis Nonrespondent Study 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 licensed RNs who were invited, but did not respond to the 2017 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 2017 RN Practice

Analysis survey. A total of 50 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, including employment setting/specialty, and length of time working as an RN. In addition, nonrespondents were asked to rate the frequency of performance and importance of 10 activities that were listed in the 2017 RN Practice Analysis survey. Nonrespondents were thanked for their time and the data collected was recorded.

Nonrespondent Results

Reasons for Not Responding

Reasons provided by the nonrespondent RNs included "did not receive" (21 responses or 42%), "too busy" (15 responses or 30%) or "other" (12 responses or 24%). One of the nonrespondents indicated not liking or not trusting surveys as the reason for not returning the survey. Another one of the nonrespondents indicated not caring as the reason for not returning the survey.

Months Employed as an RN

Nonrespondents were asked how many total months they worked as an RN. Nonrespondents indicated that on average they worked 8.6 months as an RN, while respondents averaged 6.5 months. The average number of months worked is greater because nonrespondents were contacted about six weeks after the 2017 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 and are included in Table 1. The largest percentage (38% or 19 nonrespondents) worked in critical care. Medical-surgical units were also frequently cited (18% or 9 nonrespondents). These results are similar to the 2017 RN Practice Analysis survey, which identified that the largest percentage of respondents worked in medical-surgical (27.6%) and critical care (23.3%). 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 provided by the nonrespondents were compared to the average response rating of the 2017 RN Practice Analysis Survey respondents. See Table 3.

Most of the frequency ratings were similar between nonrespondents and respondents, except "Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)", "Assess client ability to manage care in home environment and plan care accordingly", "Incorporate behavioral management techniques when caring for a client", and "Participate in medication reconciliation process". Each of these had a frequency rating difference of more than one point.

Summary

The nonrespondent study suggests that the main reasons individuals did not complete the 2017 RN Practice Analysis survey was because they were either too busy or did not receive the survey. In summary, most of the activity statement ratings 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 2017 RN Practice Analysis results.

Table H1. Employment Setting/Specialty*

Job Title	Nonresponders		Responders	
	Frequency	%	Frequency	%
Critical care	19	38.0	531	23.3
Medical-surgical	9	18.0	627	27.6
Pediatrics	2	4.00	93	4.1
Nursery	0	0.0	28	1.2
Labor and delivery	5	10.0	59	2.6
Postpartum unit	0	0.0	44	1.9
Psychiatry or subspecialties	3	6.0	83	3.6
Assisted living	1	2.0	11	0.5
Operating room	0	0.0	74	3.3
Nursing home	1	2.0	119	5.2
Other long term care	1	2.0	21	0.9
Rehabilitation	0	0.0	84	3.7
Sub-acute unit	2	4.0	33	1.5
Transitional care unit	0	0.0	19	0.8
Physician/APRN/Dentist office	3	6.0	11	0.5
Occupational health	0	0.0	3	0.1
Outpatient clinic	2	4.0	48	2.1
Home health	1	2.0	51	2.2

Table H1. Employment Setting/Specialty*

Job Title	Nonresponders		Responders	
	Frequency	%	Frequency	%
Public health	1	2.0	13	0.6
Student/school health	0	0.0	6	0.3
Hospice care	0	0.0	25	1.1
Prison	0	0.0	11	0.5
Short Stay	0	0.0	46	2
Step-down	0	0.0	149	6.5
Other	0	0.0	97	4.3

*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 projects and quality improvement processes	4.30 (n=50)	3.62 (n=566)
15	Recognize limitations of self and others and utilize resources	4.70 (n=50)	4.35 (n=582)
29	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	4.84 (n=50)	4.28 (n=601)
52	Assess client ability to manage care in home environment and plan care accordingly	4.68 (n=50)	4.15 (n=567)
67	Incorporate behavioral management techniques when caring for a client	4.42 (n=50)	3.84 (n=580)
84	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)	4.10 (n=50)	3.36 (n=541)
99	Participate in medication reconciliation process	4.86 (n=50)	4.19 (n=556)
108	Manage client during a procedure with moderate sedation	4.84 (n=50)	4.25 (n=517)
122	Monitor and care for clients on a ventilator	4.80 (n=50)	4.41 (n=537)
132	Maintain optimal temperature of client	4.72 (n=50)	4.20 (n=558)

Table H3. Activity Statement Frequency Ratings

Activity #	Activity Statement	Nonresponder Rating	Responder Rating
6	Participate in performance improvement projects and quality improvement processes	2.12 (n=50)	1.43 (n=770)
15	Recognize limitations of self and others and utilize resources	4.10 (n=50)	3.75 (n=778)
29	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	3.90 (n=50)	2.44 (n=776)
52	Assess client ability to manage care in home environment and plan care accordingly	3.36 (n=50)	2.33 (n=709)
67	Incorporate behavioral management techniques when caring for a client	3.76 (n=50)	2.25 (n=714)
84	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)	2.20 (n=50)	1.23 (n=727)
99	Participate in medication reconciliation process	4.04 (n=50)	2.39 (n=729)
108	Manage client during a procedure with moderate sedation	1.22 (n=50)	0.87 (n=733)
122	Monitor and care for clients on a ventilator	1.06 (n=50)	0.91 (n=718)
132	Maintain optimal temperature of client	3.16 (n=50)	2.99 (n=734)

Part 2

2017 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 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 examinations. Because the health care industry is rapidly changing, practice analysis studies are traditionally conducted by NCSBN 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 was 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 13 RNs was assembled to assist with the practice analysis. Two of the 13 panelists were RNs licensed/registered in Canada. Panel members worked with, educated and/or supervised the practice of RNs within their first twelve 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 the NCLEX for licensure/registration decisions, all 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 142 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 the questions from the U.S. survey were slightly modified to accommodate for different terminology used in Canada. Three forms of the survey were created to reduce the number of activity statements on each survey and sent via Web to a sample of newly licensed/registered (RNs). Except for slight differences in terminology, the survey forms were identical to the U.S. Web survey. Two of the survey forms contained 47 activity statements each and one survey form contained 48 activity statements. Except for the activity statements unique to each survey form, the surveys were identical. The survey forms were also translated to French.

Survey Process

Sample Selection

Two samples were randomly selected from the candidates who successfully passed the NCLEX-RN within 10 regulatory bodies in Canada from April 15, 2016 to March 15, 2017. One sample was selected for the English survey and another sample for the French survey. First, a sample of 3,000 entry-level RNs who passed the English version of the exam in Canada during that time was randomly selected for the English survey. Due to the limited number of candidates who took and passed the French version of the exam during that time, it was necessary to use the entire population (48) for the French survey.

Both the English and French surveys were divided equally into three forms and sent via Web to newly licensed/registered RNs. A total of 3,000 newly licensed/registered RNs each received one of the three English forms and a total of 48 newly licensed/registered RNs each received one of the three French forms.

Table 1 presents the correspondence of sample and respondents by regulatory body for the English survey.

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 2017.

Return Rates

Out of the 3,000 English surveys sent, a total of 1,114 surveys were returned (382 surveys for Form 1; 361 surveys for Form 2; and 371 surveys for Form 3). The raw response rate was approximately 37.1%. There were 255 individuals that did not qualify for survey ratings based on one of the following reasons. Either: (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 for the English survey was 28.6%.

Out of the 48 French surveys sent, a total of 19 surveys were returned (5 for Form 1 and Form 2 each and 9 for Form 3). The raw response rate was 39.6%. There were two individuals that did not qualify for survey ratings due to previously mentioned reasons. After adjusting for removals, the analyzable response rate for the French survey was 35.4%.

RN Practice Analysis Survey Nonrespondent 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. The nonrespondents rated the activity statements similar to the respondents, which provides support to the validity of the survey results.

Demographics, Experiences and Practice Environments of Participants

Demographics/Past Experiences

The majority of survey respondents (91.4%) indicated their gender as female. The age of respondent nurses averaged 27.3 years (SD 6.4 years). Respondents indicated their racial/ethnic background as follows: 72.7% White, 6.0% South Asian, 6.0% Filipino, 3.6% Chinese, and 2.9% Black.

Newly licensed/registered RNs listed obtaining a baccalaureate degree most frequently (92.8%) as the educational preparation for initial RN licensure/registration.

Responders indicated working an average of 7.5 months as an RN in Canada and reported being an average of 14.3 months post-graduation. Approximately 11.1% of newly licensed/registered RNs reported previous experience as a registered practical nurse (RPN) and 37.7% reported previous experience as unlicensed assistive personnel (UAP). The average experience in those positions was 4.8 years as a RPN and 2.2 years as an UAP.

Orientation

The majority of newly licensed/registered RNs (97.3%) received some form of formal orientation. No formal orientation was reported by 2.7% and 4.0% 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 (65.2%) for an average of 5.7 weeks, and 21.7% reported having a classroom and/or skills lab plus supervised work with clients for an average of 3.7 weeks.

Certifications Earned

In the current study, 92.2% of respondents reported earning additional certifications or completing coursework. Basic Life Support (47.6%), Intravenous Therapy (30.6%), and Advanced Cardiac Life Support (14.4%) were the most frequently reported certifications.

Facilities

The majority of newly licensed/registered RNs (80.7%) in this study reported working in hospitals. Only 10.2% reported working in long-term care and 7.3% reported working in community-based or ambulatory care facilities/organizations.

Overall, the number of beds reported in hospitals or nursing homes was most commonly distributed among 500 or more beds (21.7%), 100-299 beds (19.5%), and 300-499 beds (13.7%). Approximately 25.7% of respondents indicated working in facilities containing less than 100 beds.

The majority of newly licensed/registered RNs (61.8%) reported working in urban or metropolitan areas, 22.7% in rural areas, and 15.5% in suburban areas.

Practice Settings

Newly licensed/registered RNs reported working in the medical/surgical (33.1%) and critical care (12.9%) settings. Some other commonly reported settings include nursing home, skilled or immediate care (5.7%), pediatrics (4.1%), and psychiatry or any of its subspecialties (e.g., detox) (3.3%).

Client Health Conditions and Ages

A majority of the newly licensed/registered RNs reported that they cared for clients with acute conditions (44.5%). The next percentage of respondents reported caring for clients with stabilized chronic conditions (37.4%), clients with behavioral/emotional conditions (30.6%) and clients with unstabilized chronic conditions (30.5%). There was an increase in the percentage of nurses that reported providing care for clients within each type of health condition included in the survey.

In terms of age, the majority of newly licensed/registered RNs reported caring for older adult clients aged 65 to 85 (50.5%), adult clients aged 18 to 64 (45.2%), older adult clients over age 85 (33.6%) and newborns (less than 1 month) (11.1%).

Shifts Worked

The shifts most commonly worked by newly licensed/registered RNs were rotating shifts (74.4%) and days (15.7%).

Time Spent in Different Categories of Nursing Activities

Newly licensed/registered RNs reported spending the greatest amount of time in management of care (19%), physiological adaptation (14%), and basic care and comfort (13%).

Administrative Responsibilities/Primary Administrative Position

Of the respondents, 33.8% reported having administrative responsibilities and of those respondents, 24.5% reported having a primary administrative position. RNs working in long-term care facilities were far more likely to report having administrative responsibilities than RNs working in hospitals (73.3% in long-term care compared to 28.2% in hospitals). In addition, RNs working in long-term care with administrative responsibilities were more than five times as likely to report being in a primary administrative position than those working in hospitals (61.4% in long-term care compared to 11.9% in hospitals). Of the RNs working in community-based settings, 37.2% reported having administrative responsibilities. Of those respondents, 25.0% 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/registered RNs. Cronbach's alpha coefficients were calculated for frequency and importance ratings of the survey. The survey had an average reliability index of 0.95 for frequency and 0.95 for importance 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 (SME) panel for the 2017 RN Practice Analysis was asked to provide independent ratings of the 142 activity statements. In general, the importance ratings of SMEs and survey respondents were somewhat similar; however, SMEs

regarded most of the activity statements slightly more important than the respondents.

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 (78.7%) 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 their work setting. The activities ranged from 26.6% applicability (26.6% of RNs reported that the activity was performed within their work setting) to 100% (100% of RNs 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 and total group. Average setting-specific frequencies ranged from 0.70 to 4.90. Average total group frequencies ranged from 0.20 to 4.88.

Importance of Activity Performance

Respondents were asked to rate the importance of performing each nursing activity with 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 3.06 to 4.83. Average total group importance ratings ranged from 2.89 to 4.83.

Summary

Respondents to the 2017 Canadian 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 newly licensed RNs were somewhat 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 2017 Canadian 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. There was evidence to support the validity of the activity statement ratings.

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/registration examination. Furthermore, practice analysis studies have long been recognized by measurement and testing professions as important sources of validity evidence for licensure examinations (APA, AERA, and NCME, 2014; Raymond, 2001). Because the health care industry is rapidly changing, practice analysis studies are traditionally conducted by NCSBN on a three-year cycle. The previous Canadian RN Practice Analysis was conducted in 2014.

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 13 RNs was assembled to assist with the practice analysis. Two of the 13 panelists were RNs licensed/registered in Canada. See the section on panel of subject matter experts in Part I for more details.

Survey Development

A total of 142 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 the questions from the U.S. survey were slightly modified to accommodate for different terminology used in Canada. Three forms of the survey were created to reduce the number of activity statements on each survey and sent via Web to a sample of newly licensed/registered RNs. Except for slight differences in terminology, the surveys were identical to the U.S. Web survey. Two of the survey forms contained 47 activity statements each and one survey form contained 48 activity statements, without shared activity statements. Except for the activity statements unique to each survey form, the surveys were identical. The forms were also translated to French. See the section on survey development in Part I for more details.

Survey Process

Sample Selection and Representativeness

Two samples were randomly selected from the candidates who successfully passed the NCLEX-RN within 10 regulatory bodies in Canada from April 15, 2016 to March 15, 2017. One sample was selected for the English survey and another sample for the French survey. First, a sample of 3,000 newly licensed/registered RNs who passed the English version of the exam in Canada during that time was randomly selected for the English survey. Due to the very limited number of candidates who took and passed the French version of the exam during that time, it was necessary to use the entire population (48) for the French survey.

Both the English and French surveys were divided equally into three forms and sent via Web to newly licensed/registered RNs. A total of 3,000 newly licensed/registered RNs each received one of the three English forms and a total of 48 newly licensed/registered RNs each received one of the three French forms. Table 1 presents the correspondence of sample and respondents by regulatory body for the English survey.

Mailing Procedure

The survey was sent to 3,048 newly licensed/registered RNs in 10 regulatory bodies in Canada

via Web (3,000 received the English survey and 48 received the French survey). A five-stage mailing process was used to engage participants in the study. A pre-survey email was sent to each individual in the sample. One week later, recipients were sent an email invitation with a log-in address and a unique access code. Two weeks later, an 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 remaining nonrespondents. The survey was conducted from April through June 2017.

Confidentiality

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

Return Rates

Out of the 3,000 English surveys sent, a total of 1,114 surveys were returned (382 for Form 1; 361 for Form 2; and 371 for Form 3). The raw response rate was 37.1%. There were 255 individuals that did not qualify for survey ratings based on one of the following reasons. Either: (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 for the English survey was 28.6%.

Out of the 48 French surveys, 19 surveys were returned (5 for Form 1 and Form 2 each and 9 for Form 3). The raw response rate was 39.6%. There were two individuals that did not qualify for survey ratings due to previously mentioned reasons. After adjusting for removals, the analyzable response rate for the French survey was 35.4%.

RN Practice Analysis Survey Nonrespondent 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 were no systematic differences in respondents versus nonrespondents, there would be further evidence signifying that the survey results are unbiased, which supports the validity of the 2017 RN Practice Analysis results. The nonrespondents rated the activity statements similar to the respondents, lending support for

Table 1. Correspondence of Sample and Responders for the 2017 Canadian RN Practice Analysis

Licensure/Registration Province	Population	2017 CAN Sample		2017 CAN Responders		Response Rate
		N	%	N	%	
Alberta	16.1	484	16.1	203	18.2	41.9
British Columbia	18.4	553	18.4	206	18.5	37.3
Manitoba	5.7	171	5.7	67	6.0	39.2
New Brunswick	2.5	74	2.5	27	2.4	36.5
Newfoundland and Labrador	2.6	77	2.6	23	2.1	29.9
Northwest Territories and Nunavut	0.2	5	0.2	4	0.4	80.0
Nova Scotia	4.2	126	4.2	45	4.0	35.7
Ontario	44.2	1326	44.2	487	43.7	36.7
Prince Edward Island	0.6	19	0.6	6	0.5	31.6
Saskatchewan	5.5	165	5.5	46	4.1	27.9
Total	100%	3000	100%	1114	100%	37.1

the validity of the results. See Appendix B for a full report of the nonrespondent study.

Summary

A panel of 13 RNs, subject matter experts in the practice of newly licensed/registered RNs, met and created a comprehensive list of RN activity statements. A survey was developed and revised before being sent to 3,048 RNs who passed the NCLEX-RN for Canadian licensure/registration between April 15, 2016 and March 15, 2017. The analyzable survey response rate was 28.6% for the English survey and 35.4% for the French survey. This practice analysis contains the responses of 876 newly licensed/registered RNs (including both the English and French versions of the survey).

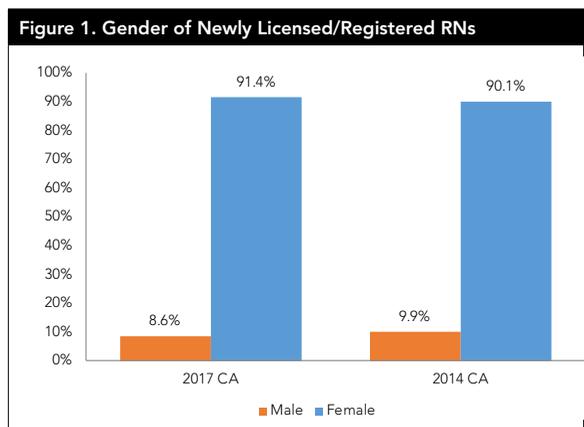
DEMOGRAPHICS, EXPERIENCES AND PRACTICE ENVIRONMENTS OF PARTICIPANTS

Demographics/Past Experiences

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

Age and Gender

The majority of survey respondents (91.4%) reported their gender as female, which was a slight increase from the percentage identified in the 2014 Canadian RN Practice Analysis. See Figure 1 for gender. The age of respondent nurses averaged 27.3 years (SD 6.4 years), which is lower than the average of 30.0 years (SD 7.1 years) from the 2014 Canadian RN Practice Analysis.



Race/Ethnicity of Newly Licensed/Registered RNs

Survey respondents reported their race/ethnicity as follows: 72.7% White, 6.0% South Asian, 6.0% Filipino, 3.6% Chinese, and 2.9% Black. There was an increase in the percentage of respondents who reported their race/ethnicity as White compared to 2014. See Figure 2 for race/ethnicity.

Of the respondents, 77.1% indicated English as their primary language and 12.8% indicated both English and another language as their primary languages. The remaining 10.1% indicated another language (6.5%), French (3.1%) and both French and another language (0.5%).

Educational Background

Newly licensed/registered RNs listed obtaining a baccalaureate degree most frequently (92.8%) as the educational preparation for initial RN licensure/registration.

Previous Licensed Practical/Vocational Nurse (LPN/VN) or Unlicensed Assistive Personnel (UAP) Experience

Respondents reported working an average of 7.5 months as an RN in Canada and reported being an average of 14.3 months post-graduation (see Figure 3). The NCSBN Board of Directors approved an updated definition of the newly licensed nurse based on findings of a study conducted in 2014. A newly licensed nurse is defined as no more than 12 months of experience (previously no more than 6 months). Approximately 11.1% reported previous experience as a registered practical nurse (RPN) and 37.7% reported previous experience as an unlicensed assistive personnel (UAP). The average experience in those positions was 4.8 years as a RPN and 2.2 years as an UAP. The data is presented in Table 2.

	2017 CA		2014 CA	
	Yrs. Exp	%*	Yrs. Exp	%*
RPN/LPN/VN	4.8	11.1	6.3	9.3
UAP	2.2	37.7	2.7	24.9

**Indicates the percentage of newly licensed/registered RNs with previous RPN/LPN/VN or UAP experience*

Orientation

The majority of newly licensed/registered RNs (97.3%) received some form of formal orientation. No formal orientation was reported by 2.7% and 4.0% reported having only a formal internship with or without additional classroom or skills lab work for their orientation. Newly licensed/registered RNs reported working with an assigned preceptor (65.2%) for an average of 5.7 weeks, and 21.7% reported having a classroom and/or skills lab plus supervised work with clients for an average of 3.7 weeks. See Table 3 for orientation type and length.

Figure 2. Race/Ethnicity of Newly Licensed/Registered RNs

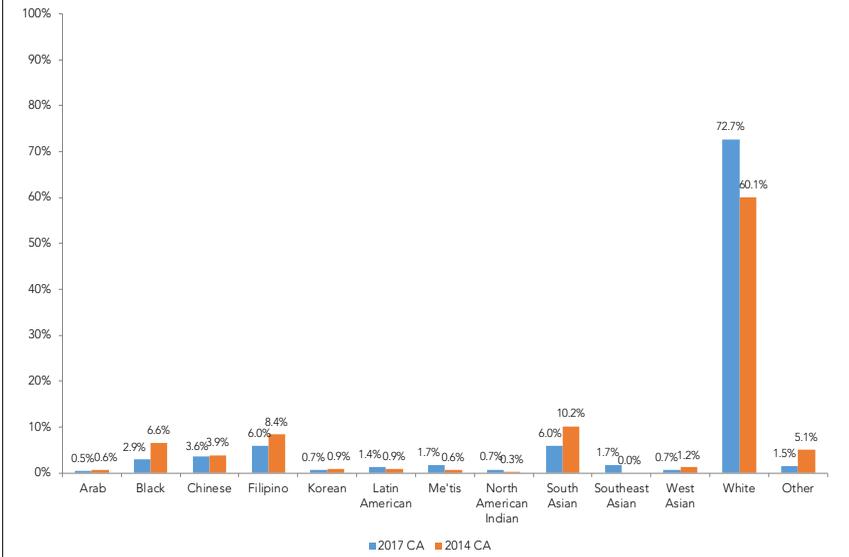


Figure 3. Average Months Since Graduation and Months Employed

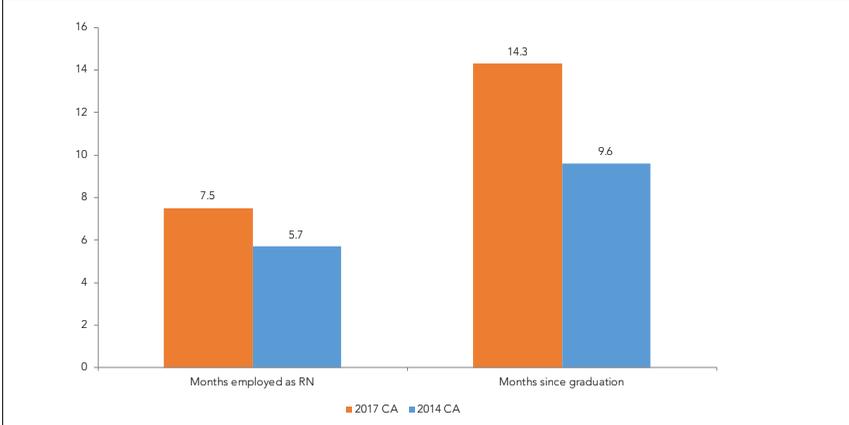


Figure 4. Client Health Conditions

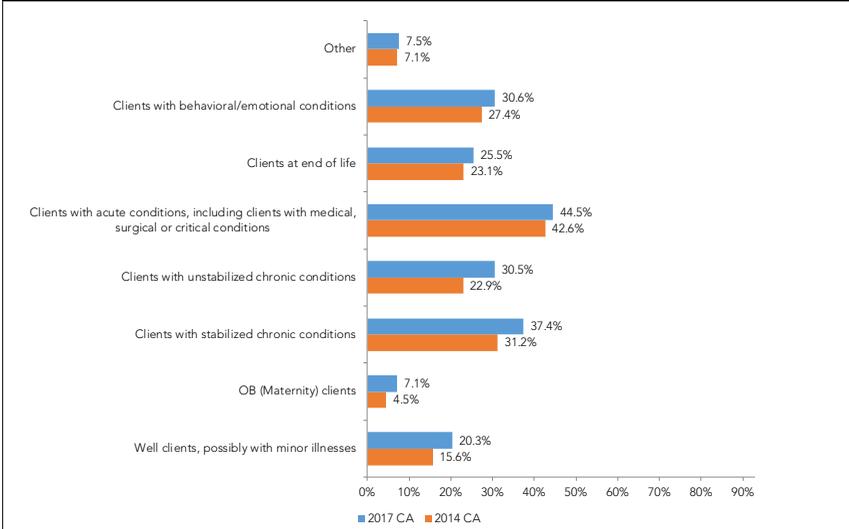


Table 3. Type and Length of Orientation

	2017 CA		2014 CA	
	%	Avg Weeks	%	Avg Weeks
No formal orientation	2.7	NA	2.7	NA
Classroom instruction/skills lab work only	1.5	1.1	2.1	2.0
Classroom and/or skills lab plus supervised work with clients	21.7	3.7	19.4	4.1
Work with an assigned preceptor(s) or mentor(s) with or without additional classroom or skills lab work	65.2	5.7	67.4	5.9
A formal internship with or without additional classroom or skills lab work	4.0	7.5	2.7	10.7
Other	5.0	7.4	5.9	3.1

Table 4. Additional Coursework/Certification*

Type of Additional Coursework/Certification	2017 CA	2014 CA
	% (n=876)	% (n=493)
Advanced Cardiac Life Support	14.4	13.2
Basic Life Support	47.6	47.9
Behavioral Management	7.1	6.7
Chemotherapy	1.3	2.6
Conscious/Moderate Sedation	3.2	2.8
Coronary Care	4.6	4.1
Critical Care	3.5	3.4
Intravenous Therapy	30.6	30.6
Neonatal Advanced Life Support	1.7	1.2
Neonatal Resuscitation	8.6	6.9
Pediatric Advanced Life Support	2.9	3.0
Phlebotomy	9.5	10.8
Peritoneal Dialysis	3.1	2.4
Rehabilitation	1.5	0.8
None	7.8	8.5
Other	20.0	18.1

*Respondents were able to select more than one option

Table 5. Employment Facilities

Type of Facility/Organization	2017 CA	2014 CA
	% (n=876)	% (n=493)
Hospital	80.7	76.9
Long-term care facility	10.2	11.5
Community-based or ambulatory care facility/organization	7.3	9.5
Other	1.9	2.1

Table 6. Employment Setting Characteristics

Type of Facility/Organization	2017 CA	2014 CA
	% (n=876)	% (n=493)
Number of Hospital or Nursing Home Beds		
Less than 50 beds	16.4	12.3
50 – 99 beds	9.3	9.6
100 – 299 beds	19.5	18
300 – 499 beds	13.7	15.6
500 or more beds	21.7	21
Don't know	12.2	14.1
Other work setting	7.3	9.3
Location of Employment Setting		
Urban/Metropolitan area	61.8	63.3
Suburban	15.5	18.1
Rural	22.7	18.6

Certifications Earned

In the current study, 92.2% of respondents reported earning additional certification or completing additional coursework. Basic Life Support (47.6%), Intravenous Therapy (30.6%), and Advanced Cardiac Life Support (14.4%) were the most frequently reported certifications. See Table 4 for a complete listing of additional coursework and/or certifications completed. Survey respondents could select more than one certification, resulting in a sum greater than 100%.

Work Settings

Facilities

The majority of newly licensed/registered RNs (80.7%) reported working in hospitals. Only 10.2% reported working in long-term care and 7.3% reported working in community-based or ambulatory care facilities/organizations. The data is presented in Table 5.

Related to the size of the facilities in which respondents work, the bulk of newly licensed/registered RNs indicated working in hospitals with at least 100 beds. Overall, the number of beds reported in hospitals or nursing homes was most commonly distributed among 500 or more beds (21.7%), 100-299 beds (19.5%), and 300-499 beds (13.7%). Approximately 25.7% of respondents indicated working in facilities containing less than 100 beds (16.4% reported less than 50 beds and 9.3% reported 50-99 beds).

The majority of newly licensed/registered RNs (61.8%) reported working in urban or metropolitan areas, 22.7% in rural areas, and 15.5% in suburban areas. Data for the size and location of the facilities where respondents reported working is presented in Table 6.

Practice Settings

Newly licensed/registered RNs reported working in the medical/surgical (33.1%) and critical care (12.9%) settings most frequently, which increased in percentage compared to 2014. Some other commonly reported settings include nursing home, skilled or immediate care (5.7%), pediatrics (4.1%), and psychiatry or any of its subspecialties (e.g., detox) (3.3%), labor and delivery (3.2%), and postpartum unit (3.2%). The data is presented in Table 7.

Client Health Conditions

Newly licensed/registered RNs reported caring for acutely ill clients (44.5%), clients with stable chronic conditions (37.4%), clients with behavioral/emotional conditions (30.6%), and clients with unstabilized chronic conditions (30.5%). There was an increase in the percentage of nurses that reported providing care for clients within each type of health condition included in the survey. Survey respondents could select more than one option, resulting in a sum greater than 100%. See Figure 4 for data on client health conditions.

Table 7. Practice Settings*

Type of Facility/Organization	2017 CA	2014 CA
	% (n=493)	% (n=797)
Critical care (e.g., ICU, CCU, step-down units, pediatric/neonatal intensive care, emergency department, postanesthesia recovery unit)	12.9	10.1
Medical-surgical unit or any of its subspecialties (e.g., oncology, orthopedics, neurology)	33.1	32.0
Pediatrics	4.1	3.7
Nursery	0.5	1.0
Labor and delivery	3.2	1.4
Postpartum unit	3.2	1.8
Psychiatry or any of its subspecialties (e.g., detox)	3.3	3.0
Assisted Living	0.5	0.4
Operating room, including outpatient surgery and surgicenters	1.7	2.4
Nursing home, skilled or intermediate care	5.7	6.3
Other longterm care (e.g., residential care, developmental disability)	3.2	4.7
Rehabilitation	3.0	2.6
Subacute unit	2.2	2.6
Transitional care unit	0.9	0.6
Physician/APRN/Dentist office	0.5	0.6
Occupational health	0.1	0.0
Outpatient clinic	1.4	1.0
Home health, including visiting nurses associations	2.3	4.9
Public health	1.4	1.0
Student/school health	0.2	0.6
Hospice care	1.6	1.2
Prison/Correctional Facility/Jail	0.1	0.2
Short Stay/Observational	0.2	0.2
Step-down/Progressive Care	0.6	0.2
Other	5.0	6.1

*Note: Respondents were able to select more than one option

Figure 5. Client Ages

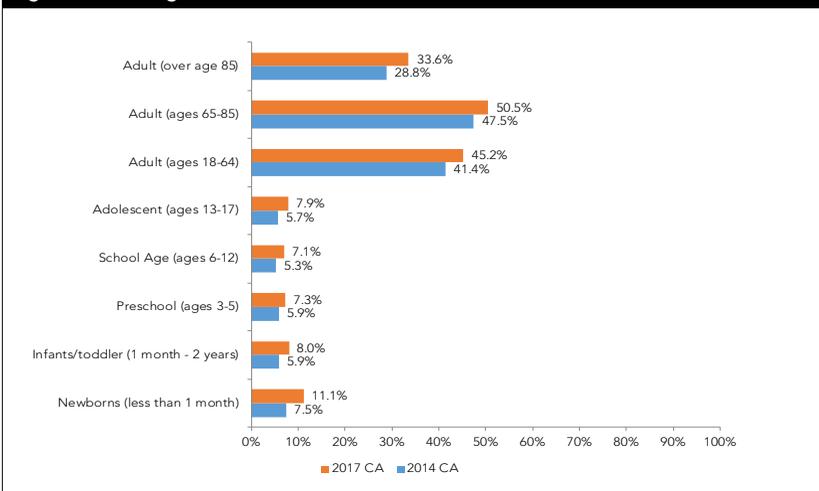
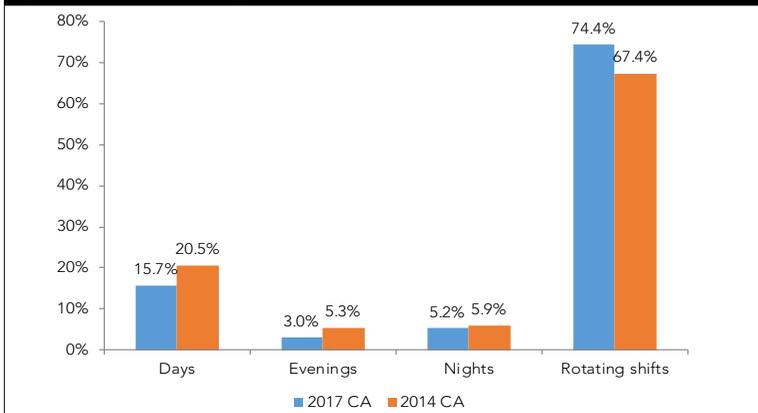


Figure 6. Shifts Worked by Newly Licensed RNs

Client Ages

The majority of newly licensed/registered RNs reported caring for older adult clients aged 65 to 85 (50.5%), adult clients aged 18 to 64 (45.2%), older adult clients over age 85 (33.6%) and newborns (less than 1 month) (11.1%). See Figure 5 for data on client ages. Survey respondents could select more than one age range, resulting in a sum greater than 100%.

On average, the respondents were responsible for 11.7 clients on their last workday with a standard deviation of 19.7.

Shifts Worked

The shifts most commonly worked by newly licensed/registered RNs were rotating shifts (74.4%) and days (15.7%). Only 5.2% reported working nights and only 3.0% reported evenings. See Figure 6 for shifts reported. Note that a very small number of respondents selected "other" for shifts worked and these responses are not reflected in Figure 6.

On a typical workday, the majority of the respondents (61.8%) worked a 12-hour shift while 26.1% worked an 8-hour shift and 11.1% worked a varied shift of 8 and 12 hours.

Time Spent in Different Categories of Nursing Activities

Respondents to the current study 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 spent on each activity by the number of hours spent working. Because nurses often perform multiple activities simultaneously, such as teaching while giving medications or providing emotional support while giving routine care, the sum of proportions was greater than one. 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 spent in all the activities. These standardized proportions have the advantage of adding up to one. Newly licensed/registered RNs reported spending the greatest amount of time in management of care (19%), physiological adaption (14%), basic care and comfort (13%), and pharmacological and parenteral therapies (12%). The relatively least amount of time was reportedly spent on health promotion and maintenance (11%), psychosocial integrity (11%), safety and infection control (10%), and reduction of risk potential (10%). Compared to the 2014 survey, there were only very slight variations in time spent for 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 RNs reported having such responsibilities, they were asked if they had a primary administrative position. Of the respondents, 33.8% reported having administrative responsibilities and of those, 24.5% reported having a primary administrative position. RNs working in long-term care facilities were far more likely to report having administrative responsibilities than RNs working in hospitals (73.3% in long-term care compared to 28.2% in hospitals). In addition, RNs working in long-term care with administrative responsibilities were more than five times as likely to report being in a primary administrative position than those working in hospitals (61.4% in long-term care compared to 11.9% in hospitals). Of the RNs working in community-based settings, 37.2% reported having administrative responsibilities. Of those respondents, 25.0% reported holding a primary administrative position. The data is presented in Table 9.

Summary

The newly licensed/registered RNs responding to the 2017 Canadian RN Practice Analysis survey were primarily female with an average age of 27.3 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 5.7 weeks. The respondents cared mostly for clients with acute or chronic conditions who were 18-64 years of age or 65-85 years of age.

Table 8. Average Time Spent in Different Categories of Nursing Activities

Categories of Activities		2017 CA Average Hours	2017 CA Proportion of Work Hours	2017 CA Standardized Proportion	2014 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).	5.17	0.48	0.19	0.20
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).	3.31	0.31	0.10	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).	3.34	0.32	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).	3.24	0.31	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).	3.85	0.36	0.13	0.13

Table 8. Average Time Spent in Different Categories of Nursing Activities

Categories of Activities		2017 CA Average Hours	2017 CA Proportion of Work Hours	2017 CA Standardized Proportion	2014 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 devices, dosage calculation, expected effects/outcomes, medication administration, parenteral/intravenous therapy, pharmacological agents/actions, pharmacological interactions, pharmacological pain management, and total parenteral nutrition).	3.42	0.31	0.12	0.12
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).	3.05	0.29	0.10	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).	4.26	0.40	0.14	0.14

Table 9. Administrative Responsibilities

Facilities	2017 CA		2014 CA	
	Administrative Responsibility	Primary Administrative Position*	Administrative Responsibility	Primary Administrative Position*
	%	%	%	%
All	33.8	24.5	34.8	30.2
Hospital	28.2	11.9	25.4	14.3
Long-term care	73.3	61.4	86.8	56.3
Community-based care	37.2	25.0	43.8	42.9
Other	54.6	50.0	42.9	33.3

*Percent of all relevant responders

ACTIVITY STATEMENT PERFORMANCE FINDINGS

Findings relative to the activities performed by newly licensed/registered RNs in Canada 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 are discussed. A validation of survey findings with estimates provided by the subject matter expert panel is also 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. Cronbach's alpha coefficients were calculated for frequency and importance ratings for the survey. The survey had an average reliability index of 0.95 for frequency and 0.95 for importance ratings. These high reliability indices indicate the survey is reliably measuring the nursing activities necessary for competent RN practice. See *Table 10*.

SME Panel Validation of Survey Findings

The subject matter expert (SME) panel for the 2017 RN Practice Analysis was asked to provide independent ratings of the 142 activity statements. SMEs 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 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 survey. There were no differences greater than 0.92 with respect to importance between the SME ratings and the newly licensed/registered RNs in Canada. In general, the SMEs rated most of the activity statements slightly more important than respondents.

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 (78.7%) indicated that the survey covered the important nursing activities "well" or "very well."

Table 10. Reliability Estimates

	Frequency			Importance		
	N Items	N Cases	Scale Reliability	N Items	N Cases	Scale Reliability
Web Form 1	48	312	0.96	48	312	0.96
Web Form 2	47	273	0.94	47	273	0.95
Web Form 3	47	291	0.95	47	291	0.94

Applicability of Activities to Practice Setting

The percentages of newly licensed/registered RNs indicating that the activities were applicable are included in Table 11. The activities ranged from 26.6% applicability (26.6% of the respondents reported that the activity was performed within their work settings) to 100% (100% 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 an antepartum client or a client in labor" (26.6%), "Implement and monitor phototherapy" (29.2%), and "Provide postpartum care and education" (31.4%). There were seven activities with the highest percentage of applicability (100%). Some of those activities were "Maintain client confidentiality and privacy", "Protect client from injury (e.g., falls, electrical hazards)", and "Practice in a manner consistent with a code of ethics for nurses."

Frequency of Activity Performance

Respondents were asked to rate the frequency of performance of all activities that were applicable to their work settings. Newly licensed/registered RNs 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: setting-specific and total group. 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 perform this calculation, 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 setting-specific and total group frequency.

Setting-Specific

Average setting-specific frequencies ranged from 0.70 to 4.90. The activities performed with the

lowest frequencies were "Implement and monitor phototherapy" (0.70), "Participate in emergency response plans (e.g., internal/external disaster, bomb threat, community planning)" (0.73), and "Perform and manage care of client receiving peritoneal dialysis" (0.73). The activities with the highest setting-specific average frequencies of performance were "Apply principles of infection control (e.g., hand hygiene, aseptic technique, isolation, sterile technique, universal/standard precautions)" (4.90), "Provide care within the legal scope of practice" (4.83), and "Ensure proper identification of client when providing care" (4.63).

Total Group

Average total group frequencies ranged from 0.20 to 4.88. The activities performed with the lowest total group frequency were "Implement and monitor phototherapy" (0.20), "Perform and manage care of client receiving peritoneal dialysis" (0.30), and "Provide care and education to an antepartum client or a client in labor" (0.36). The 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)" (4.88), "Provide care within the legal scope of practice" (4.81), and "Ensure proper identification of client when providing care" (4.63).

Importance of Activity Performance

Respondents were asked to rate the importance of performing each nursing activity with 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 and total group. Setting-specific importance was calculated by averaging only the ratings of respondents providing frequency ratings for the activity statement (RNs 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 142 activities is included in Table 12.

Setting-Specific

Average setting-specific importance ratings ranged from 3.06 to 4.83. The activities with the lowest importance ratings were “Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)” (3.06), “Practice and advocate for cost effective care” (3.07), and “Participate in performance improvement projects and quality improvement processes” (3.44). The activities with the highest importance ratings were “Prepare and administer medications using rights of medication administration” (4.83), “Perform calculations needed for medication administration” (4.78), “Apply principles of infection control (e.g., hand hygiene, aseptic technique, isolation, sterile technique, universal/standard precautions)” (4.76), and “Assess and respond to changes and/or trends in client vital signs” (4.76).

Total Group

Average total group importance ratings ranged from 2.89 to 4.83. The activities with the lowest importance ratings were “Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)” (2.89), “Practice and advocate for cost effective care” (3.07), and “Plan and/or participate in community health education” (3.29). The activities with the highest importance ratings were “Prepare and administer medications using rights of medication administration” (4.83), “Assess and respond to changes and/or trends in client vital signs” (4.76), and “Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions)” (4.74).

SUMMARY

Respondents to the 2017 Canadian 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 2017 Canadian 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. There was evidence to support the validity of the activity statement ratings.

Table 11. Activity Applicability to Setting and Average Frequency of Performance

Activity Number	Activity	Apply to Setting (%)	Average Frequency (Setting-Specific)			Average Frequency (Total Group)		
			N	Avg	Std. Err	N	Avg	Std. Err
1	Perform procedures necessary to safely admit, transfer, and/or discharge a client	98.8	254	2.98	0.12	257	2.94	0.12
2	Provide and receive hand-off of care (report) on assigned clients	99.6	222	3.66	0.10	223	3.64	0.10
3	Assign and supervise care of client provided by others (e.g., LPN/VN, assistive personnel, other RNs)	85.5	195	2.78	0.13	228	2.38	0.13
4	Advocate for client rights and needs	99.6	256	3.47	0.10	257	3.46	0.10
5	Prioritize the delivery of client care	100	223	4.47	0.07	223	4.47	0.07
6	Participate in performance improvement projects and quality improvement processes	78.1	178	1.10	0.10	228	0.86	0.08
7	Collaborate with interprofessional team members when providing client care	99.6	256	4.23	0.08	257	4.22	0.08
8	Receive and transcribe health care provider orders	96.8	213	3.25	0.12	220	3.15	0.12
9	Integrate advanced directives into client plan of care	84.6	193	2.33	0.15	228	1.97	0.14
10	Verify the client receives appropriate education and consents for care and procedures	98.8	254	3.22	0.11	257	3.18	0.11
11	Provide education to clients and staff about client rights and responsibilities	96.0	214	2.45	0.12	223	2.35	0.12
12	Assess the need for referrals and obtain necessary orders	97.8	223	3.43	0.11	228	3.35	0.12
13	Initiate, evaluate and update client plan of care	97.2	247	3.43	0.10	254	3.33	0.11
14	Maintain client confidentiality and privacy	100	220	4.55	0.07	220	4.55	0.07
15	Recognize limitations of self and others and utilize resources	99.1	225	3.56	0.10	227	3.52	0.10
16	Report client conditions as required by law (e.g., abuse/neglect and communicable disease)	81.3	208	0.93	0.10	256	0.76	0.09
17	Manage conflict among clients and health care staff	93.2	205	1.62	0.11	220	1.51	0.11
18	Utilize resources to enhance client care (e.g., evidenced-based research, information technology, policies and procedures)	99.1	226	3.21	0.12	228	3.18	0.12
19	Recognize ethical dilemmas and take appropriate action	95.3	245	1.46	0.11	257	1.39	0.10
20	Use approved abbreviations and standard terminology when documenting care	99.5	221	4.36	0.08	222	4.34	0.09
21	Organize workload to manage time effectively	99.1	225	4.50	0.07	227	4.46	0.08
22	Practice in a manner consistent with a code of ethics for nurses	100	254	4.57	0.07	254	4.57	0.07
23	Provide care within the legal scope of practice	99.5	221	4.83	0.04	222	4.81	0.05
24	Practice and advocate for cost effective care	91.5	204	1.92	0.12	223	1.76	0.12
25	Apply principles of infection control (e.g., hand hygiene, aseptic technique, isolation, sterile technique, universal/standard precautions)	99.6	255	4.90	0.03	256	4.88	0.04

Table 11. Activity Applicability to Setting and Average Frequency of Performance

Activity Number	Activity	Apply to Setting (%)	Average Frequency (Setting-Specific)			Average Frequency (Total Group)		
			N	Avg	Std. Err	N	Avg	Std. Err
26	Protect client from injury (e.g., falls, electrical hazards)	100	220	3.93	0.10	220	3.93	0.10
27	Verify appropriateness and accuracy of a treatment order	98.6	219	3.57	0.11	222	3.52	0.11
28	Follow procedures for handling biohazardous and hazardous materials	96.9	247	3.24	0.12	255	3.14	0.12
29	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	92.8	206	2.53	0.14	222	2.35	0.14
30	Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	98.2	219	4.13	0.10	223	4.05	0.10
31	Acknowledge and document practice errors and near misses (e.g., incident report for medication error)	95.7	243	0.95	0.10	254	0.91	0.10
32	Ensure proper identification of client when providing care	100	219	4.63	0.06	219	4.63	0.06
33	Facilitate appropriate and safe use of equipment	99.1	219	3.89	0.11	221	3.86	0.11
34	Educate client on safety issues	98.4	251	2.92	0.11	255	2.87	0.11
35	Participate in emergency response plans (e.g., internal/external disaster, bomb threat, community planning)	73.0	162	0.73	0.11	222	0.54	0.08
36	Follow requirements for use of restraints	79.1	170	1.94	0.16	215	1.53	0.13
37	Educate client and staff regarding infection control measures	98.8	249	2.21	0.12	252	2.18	0.12
38	Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	98.2	218	3.10	0.13	222	3.05	0.13
39	Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)	81.6	182	0.92	0.11	223	0.75	0.09
40	Provide prenatal care and education	36.2	92	1.16	0.20	254	0.42	0.08
41	Plan and/or participate in community health education	67.4	149	1.60	0.15	221	1.08	0.11
42	Perform targeted screening assessments (e.g., vision, nutrition)	92.0	206	2.35	0.14	224	2.16	0.13
43	Educate client about prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	88.6	226	1.63	0.13	255	1.45	0.12
44	Educate client about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	95.9	213	2.38	0.13	222	2.29	0.12
45	Provide postpartum care and education	31.4	69	2.10	0.27	220	0.66	0.11
46	Perform comprehensive health assessments	97.6	249	3.95	0.10	255	3.85	0.11
47	Assess client's readiness to learn, learning preferences, and barriers to learning	98.2	217	2.63	0.12	221	2.58	0.12

Table 11. Activity Applicability to Setting and Average Frequency of Performance

Activity Number	Activity	Apply to Setting (%)	Average Frequency (Setting-Specific)			Average Frequency (Total Group)		
			N	Avg	Std. Err	N	Avg	Std. Err
48	Provide care and education for the newborn, infant, and toddler client from birth through 2 years	33.2	74	2.70	0.27	223	0.90	0.12
49	Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	38.6	98	1.63	0.22	254	0.63	0.10
50	Provide care and education for the adult client ages 18 through 64 years	95.0	209	4.18	0.10	220	3.97	0.11
51	Provide care and education for the adult client ages 65 years and over	88.7	197	4.09	0.11	222	3.63	0.13
52	Assess client ability to manage care in home environment and plan care accordingly	83.9	214	2.41	0.13	255	2.02	0.13
53	Assess and educate clients about health risks based on family, population, and community characteristics	92.8	205	1.93	0.13	221	1.79	0.13
54	Provide care and education to an antepartum client or a client in labor	26.6	59	1.34	0.26	222	0.36	0.08
55	Assess psychosocial, spiritual, and/or occupational factors affecting care and plan interventions	97.6	249	2.43	0.12	255	2.37	0.12
56	Assess client for abuse or neglect and intervene as appropriate	91.0	201	1.58	0.13	221	1.43	0.12
57	Assess client for substance abuse, dependency, withdrawal, or toxicities and intervene as appropriate	83.3	185	2.10	0.14	222	1.75	0.12
58	Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	89.0	227	2.35	0.13	255	2.09	0.13
59	Promote a therapeutic environment	99.5	218	4.28	0.09	219	4.26	0.09
60	Incorporate client cultural practices and beliefs when planning and providing care	97.7	217	2.46	0.13	222	2.40	0.13
61	Provide end-of-life care and education to clients	89.8	229	1.38	0.11	255	1.24	0.11
62	Assess the potential for violence and use safety precautions	96.8	212	2.57	0.13	219	2.48	0.13
63	Assess family dynamics to determine plan of care	96.4	214	2.83	0.12	222	2.73	0.12
64	Assess client's ability to cope with life changes and provide support	97.6	249	2.45	0.12	255	2.39	0.12
65	Provide care for a client experiencing grief or loss	96.4	212	1.49	0.12	220	1.44	0.12
66	Use therapeutic communication techniques	100	219	4.60	0.07	219	4.60	0.07
67	Incorporate behavioral management techniques when caring for a client	95.3	242	2.36	0.12	254	2.24	0.12
68	Recognize nonverbal cues to physical and/or psychological stressors	99.5	220	3.45	0.11	221	3.43	0.11
69	Provide care for a client experiencing visual, auditory, and/or cognitive distortions	92.8	207	3.05	0.13	223	2.83	0.14
70	Assess and/or intervene in client performance of activities of daily living	94.5	240	3.34	0.12	254	3.15	0.12
71	Provide client nutrition through tube feedings	84.3	183	1.72	0.15	217	1.45	0.13

Table 11. Activity Applicability to Setting and Average Frequency of Performance

Activity Number	Activity	Apply to Setting (%)	Average Frequency (Setting-Specific)			Average Frequency (Total Group)		
			N	Avg	Std. Err	N	Avg	Std. Err
72	Perform postmortem care	69.6	156	0.94	0.12	224	0.66	0.09
73	Perform irrigations (e.g., of bladder, ear, eye)	85.2	218	1.13	0.11	256	0.96	0.09
74	Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	95.0	209	3.28	0.13	220	3.12	0.13
75	Perform skin assessment and/or implement measures to maintain skin integrity and prevent skin breakdown	97.8	218	3.91	0.11	223	3.82	0.11
76	Assess and manage client with an alteration in elimination	95.8	207	3.03	0.12	216	2.90	0.12
77	Apply, maintain, or remove orthopedic devices	77.5	148	1.38	0.15	191	1.07	0.12
78	Provide non-pharmacological comfort measures	99.5	185	3.62	0.12	186	3.60	0.12
79	Monitor the client's nutritional status	98.6	213	3.35	0.12	216	3.31	0.12
80	Assess client sleep/rest pattern and intervene as needed	91.0	172	2.66	0.14	189	2.42	0.14
81	Evaluate client intake and output and intervene as needed	97.3	181	3.50	0.13	186	3.41	0.13
82	Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	96.8	209	3.19	0.12	216	3.09	0.12
83	Assess client for pain and intervene as appropriate	100	190	4.36	0.09	190	4.36	0.09
84	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)	77.0	144	0.93	0.12	187	0.72	0.10
85	Evaluate appropriateness and accuracy of medication order for client	99.1	214	4.07	0.11	216	4.03	0.11
86	Prepare and administer medications using rights of medication administration	98.4	187	4.60	0.08	190	4.53	0.09
87	Perform calculations needed for medication administration	96.3	180	3.43	0.14	187	3.30	0.14
88	Monitor intravenous infusion and maintain site	91.2	197	3.71	0.13	216	3.38	0.14
89	Handle and/or administer controlled substances within regulatory guidelines	95.3	181	3.76	0.13	190	3.58	0.14
90	Handle and/or administer high-risk medications	96.3	180	3.42	0.14	187	3.29	0.14
91	Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)	98.6	212	3.85	0.11	215	3.80	0.12
92	Titrate dosage of medication based on assessment and ordered parameters	90.0	171	2.80	0.15	190	2.52	0.15
93	Administer blood products and evaluate client response	80.6	150	1.57	0.16	186	1.27	0.14
94	Access central venous access devices	84.7	183	2.13	0.14	216	1.81	0.13
95	Educate client about medications	98.4	187	3.32	0.12	190	3.26	0.12

Table 11. Activity Applicability to Setting and Average Frequency of Performance

Activity Number	Activity	Apply to Setting (%)	Average Frequency (Setting-Specific)			Average Frequency (Total Group)		
			N	Avg	Std. Err	N	Avg	Std. Err
96	Evaluate client response to medication	99.5	186	4.28	0.09	187	4.26	0.10
97	Administer parenteral nutrition and evaluate client response	78.0	167	1.41	0.14	214	1.10	0.12
98	Administer medications for pain management	95.8	182	3.86	0.12	190	3.69	0.13
99	Participate in medication reconciliation process	92.0	172	2.19	0.16	187	2.01	0.15
100	Handle and maintain medication in a safe and controlled environment	99.5	215	4.49	0.08	216	4.47	0.08
101	Assess and respond to changes and/or trends in client vital signs	98.9	186	3.68	0.13	188	3.64	0.13
102	Perform focused assessments	99.5	186	4.24	0.11	187	4.21	0.11
103	Monitor the results of diagnostic testing and intervene as needed	97.7	211	2.63	0.13	216	2.57	0.13
104	Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)	97.9	186	3.96	0.11	190	3.87	0.12
105	Evaluate responses to procedures and treatments	98.9	182	3.90	0.11	184	3.85	0.12
106	Provide preoperative or postoperative education	75.3	162	1.85	0.16	215	1.39	0.13
107	Provide preoperative care	78.2	147	1.30	0.15	188	1.02	0.13
108	Manage client during a procedure with moderate sedation	57.2	107	1.51	0.18	187	0.87	0.12
109	Manage client following a procedure with moderate sedation	75.0	162	1.56	0.15	216	1.17	0.12
110	Obtain blood specimens (e.g. venipuncture, venous access device, central line)	83.7	159	1.75	0.16	190	1.46	0.14
111	Use precautions to prevent injury and/or complications associated with a procedure or diagnosis	94.1	177	3.23	0.14	188	3.04	0.14
112	Educate client about treatments and procedures	96.7	206	2.92	0.13	213	2.82	0.13
113	Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)	96.3	183	2.02	0.15	190	1.95	0.14
114	Insert, maintain, or remove a nasal/oral gastrointestinal tube	72.3	136	1.46	0.16	188	1.06	0.12
115	Maintain percutaneous feeding tube	75.3	162	1.42	0.15	215	1.07	0.12
116	Insert, maintain, or remove a urinary catheter	95.7	179	1.99	0.14	187	1.90	0.14
117	Insert, maintain, or remove a peripheral intravenous line	88.2	165	3.16	0.16	187	2.79	0.16
118	Recognize trends and changes in client condition and intervene as needed	99.1	214	3.50	0.11	216	3.46	0.11
119	Apply and/or maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	88.4	168	1.55	0.14	190	1.37	0.13
120	Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	82.4	155	2.00	0.16	188	1.65	0.14

Table 11. Activity Applicability to Setting and Average Frequency of Performance

Activity Number	Activity	Apply to Setting (%)	Average Frequency (Setting-Specific)			Average Frequency (Total Group)		
			N	Avg	Std. Err	N	Avg	Std. Err
121	Perform emergency care procedures	88.4	191	1.17	0.12	216	1.04	0.11
122	Monitor and care for clients on a ventilator	45.3	86	1.14	0.21	190	0.52	0.10
123	Perform wound care and/or dressing change	96.8	181	2.62	0.15	187	2.54	0.15
124	Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	59.7	129	0.83	0.13	216	0.50	0.08
125	Provide ostomy care and/or education (e.g., tracheal, enteral)	80.0	152	1.20	0.13	190	0.96	0.11
126	Provide postoperative care	70.2	125	2.18	0.19	178	1.53	0.15
127	Perform and manage care of client receiving peritoneal dialysis	41.2	89	0.73	0.15	216	0.30	0.07
128	Perform suctioning	82.5	156	1.63	0.16	189	1.34	0.14
129	Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	76.5	143	1.92	0.16	187	1.47	0.14
130	Manage the care of a client on telemetry	54.6	118	2.31	0.19	216	1.26	0.13
131	Manage the care of a client with impaired ventilation/oxygenation	86.8	165	2.28	0.15	190	1.98	0.14
132	Maintain optimal temperature of client	89.8	167	2.92	0.16	186	2.62	0.16
133	Implement and monitor phototherapy	29.2	63	0.70	0.17	216	0.20	0.05
134	Manage the care of a client with a pacing device	75.3	143	1.03	0.14	190	0.78	0.11
135	Monitor and maintain arterial lines	48.6	89	1.40	0.20	183	0.68	0.11
136	Manage the care of the client with a fluid and electrolyte imbalance	91.7	198	2.49	0.13	216	2.29	0.13
137	Manage the care of a client with alteration in hemodynamics, tissue perfusion, and/or hemostasis	89.5	170	1.92	0.15	190	1.72	0.14
138	Evaluate the effectiveness of the treatment plan for a client with an acute or chronic diagnosis	94.1	176	3.46	0.14	187	3.26	0.15
139	Identify pathophysiology related to an acute or chronic condition	94.4	203	2.93	0.13	215	2.76	0.14
140	Manage the care of a client receiving hemodialysis or continuous renal replacement therapy	59.5	113	0.88	0.15	190	0.53	0.09
141	Recognize signs and symptoms of client complications and intervene	98.4	184	3.04	0.14	187	2.99	0.14
142	Educate client regarding an acute or chronic condition	97.7	211	2.57	0.13	216	2.51	0.13

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
1	Perform procedures necessary to safely admit, transfer, and/or discharge a client	186	4.28	0.05	187	4.27	0.05
2	Provide and receive hand-off of care (report) on assigned clients	153	4.54	0.05	154	4.52	0.05
3	Assign and supervise care of client provided by others (e.g., LPN/VN, assistive personnel, other RNs)	132	3.80	0.09	155	3.66	0.09
4	Advocate for client rights and needs	187	4.59	0.04	188	4.57	0.05
5	Prioritize the delivery of client care	154	4.65	0.04	154	4.65	0.04
6	Participate in performance improvement projects and quality improvement processes	122	3.44	0.09	151	3.43	0.08
7	Collaborate with interprofessional team members when providing client care	187	4.59	0.04	188	4.57	0.05
8	Receive and transcribe health care provider orders	149	4.36	0.06	154	4.35	0.06
9	Integrate advanced directives into client plan of care	128	4.14	0.09	153	3.89	0.10
10	Verify the client receives appropriate education and consents for care and procedures	185	4.34	0.05	188	4.29	0.06
11	Provide education to clients and staff about client rights and responsibilities	146	3.82	0.07	152	3.80	0.07
12	Assess the need for referrals and obtain necessary orders	150	4.26	0.07	153	4.22	0.07
13	Initiate, evaluate and update client plan of care	181	4.03	0.06	185	3.98	0.07
14	Maintain client confidentiality and privacy	153	4.59	0.05	153	4.59	0.05
15	Recognize limitations of self and others and utilize resources	154	4.30	0.07	155	4.30	0.07
16	Report client conditions as required by law (e.g., abuse/neglect and communicable disease)	146	4.22	0.08	181	4.23	0.07
17	Manage conflict among clients and health care staff	139	3.67	0.07	150	3.66	0.07
18	Utilize resources to enhance client care (e.g., evidenced-based research, information technology, policies and procedures)	155	4.17	0.07	155	4.17	0.07
19	Recognize ethical dilemmas and take appropriate action	172	4.12	0.07	184	4.12	0.06
20	Use approved abbreviations and standard terminology when documenting care	152	3.70	0.08	153	3.71	0.08
21	Organize workload to manage time effectively	152	4.57	0.05	152	4.57	0.05
22	Practice in a manner consistent with a code of ethics for nurses	187	4.58	0.04	187	4.58	0.04
23	Provide care within the legal scope of practice	152	4.68	0.05	153	4.67	0.05
24	Practice and advocate for cost effective care	137	3.07	0.08	148	3.07	0.08
25	Apply principles of infection control (e.g., hand hygiene, aseptic technique, isolation, sterile technique, universal/standard precautions)	187	4.76	0.04	188	4.74	0.04

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
26	Protect client from injury (e.g., falls, electrical hazards)	153	4.54	0.05	153	4.54	0.05
27	Verify appropriateness and accuracy of a treatment order	149	4.53	0.06	151	4.48	0.07
28	Follow procedures for handling biohazardous and hazardous materials	178	4.29	0.05	183	4.25	0.06
29	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	138	4.02	0.07	153	3.99	0.07
30	Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	147	4.42	0.05	149	4.41	0.05
31	Acknowledge and document practice errors and near misses (e.g., incident report for medication error)	175	4.26	0.05	183	4.28	0.05
32	Ensure proper identification of client when providing care	153	4.69	0.05	153	4.69	0.05
33	Facilitate appropriate and safe use of equipment	147	4.31	0.06	148	4.30	0.06
34	Educate client on safety issues	183	4.23	0.05	187	4.21	0.06
35	Participate in emergency response plans (e.g., internal/external disaster, bomb threat, community planning)	104	3.84	0.09	147	3.76	0.09
36	Follow requirements for use of restraints	117	4.12	0.08	148	3.90	0.10
37	Educate client and staff regarding infection control measures	181	4.15	0.06	184	4.13	0.06
38	Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	150	4.42	0.06	153	4.42	0.06
39	Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)	121	4.36	0.08	147	4.25	0.07
40	Provide prenatal care and education	61	3.75	0.15	167	3.43	0.11
41	Plan and/or participate in community health education	95	3.53	0.10	144	3.29	0.09
42	Perform targeted screening assessments (e.g., vision, nutrition)	139	3.66	0.08	150	3.62	0.08
43	Educate client about prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	162	3.90	0.07	184	3.76	0.08
44	Educate client about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	146	3.72	0.07	151	3.70	0.07
45	Provide postpartum care and education	40	3.83	0.19	134	3.38	0.13
46	Perform comprehensive health assessments	182	4.51	0.05	186	4.45	0.06
47	Assess client's readiness to learn, learning preferences, and barriers to learning	149	3.64	0.07	153	3.61	0.07
48	Provide care and education for the newborn, infant, and toddler client from birth through 2 years	44	4.11	0.13	132	3.55	0.12
49	Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	69	3.71	0.14	170	3.45	0.10
50	Provide care and education for the adult client ages 18 through 64 years	144	4.06	0.07	148	4.03	0.07
51	Provide care and education for the adult client ages 65 years and over	136	4.09	0.06	150	3.99	0.07

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	Assess client ability to manage care in home environment and plan care accordingly	149	4.15	0.07	182	3.96	0.08
53	Assess and educate clients about health risks based on family, population, and community characteristics	136	3.57	0.08	147	3.52	0.08
54	Provide care and education to an antepartum client or a client in labor	35	3.80	0.18	131	3.39	0.12
55	Assess psychosocial, spiritual, and/or occupational factors affecting care and plan interventions	182	3.88	0.06	186	3.82	0.07
56	Assess client for abuse or neglect and intervene as appropriate	130	4.10	0.07	148	4.03	0.07
57	Assess client for substance abuse, dependency, withdrawal, or toxicities and intervene as appropriate	121	4.12	0.07	146	4.01	0.08
58	Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	162	3.98	0.07	186	3.77	0.08
59	Promote a therapeutic environment	151	4.13	0.06	152	4.11	0.07
60	Incorporate client cultural practices and beliefs when planning and providing care	146	3.89	0.07	150	3.86	0.07
61	Provide end-of-life care and education to clients	164	4.16	0.06	181	4.07	0.07
62	Assess the potential for violence and use safety precautions	143	4.14	0.06	150	4.10	0.07
63	Assess family dynamics to determine plan of care	144	3.97	0.07	150	3.90	0.07
64	Assess client's ability to cope with life changes and provide support	179	3.98	0.05	183	3.91	0.06
65	Provide care for a client experiencing grief or loss	143	3.96	0.06	149	3.95	0.06
66	Use therapeutic communication techniques	152	4.30	0.06	152	4.30	0.06
67	Incorporate behavioral management techniques when caring for a client	173	3.76	0.06	184	3.70	0.07
68	Recognize nonverbal cues to physical and/or psychological stressors	151	4.04	0.06	152	4.02	0.06
69	Provide care for a client experiencing visual, auditory, and/or cognitive distortions	140	4.01	0.07	151	3.91	0.07
70	Assess and/or intervene in client performance of activities of daily living	175	3.91	0.06	185	3.81	0.07
71	Provide client nutrition through tube feedings	127	4.06	0.07	144	3.98	0.08
72	Perform postmortem care	102	3.66	0.10	142	3.44	0.09
73	Perform irrigations (e.g., of bladder, ear, eye)	152	3.70	0.07	179	3.52	0.08
74	Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	142	4.10	0.07	148	4.05	0.07
75	Perform skin assessment and/or implement measures to maintain skin integrity and prevent skin breakdown	146	4.34	0.06	149	4.34	0.06
76	Assess and manage client with an alteration in elimination	155	4.10	0.06	163	4.02	0.07
77	Apply, maintain, or remove orthopedic devices	103	3.50	0.09	131	3.42	0.09

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
78	Provide non-pharmacological comfort measures	127	3.87	0.07	128	3.88	0.07
79	Monitor the client's nutritional status	161	3.95	0.07	164	3.91	0.07
80	Assess client sleep/rest pattern and intervene as needed	126	3.45	0.08	137	3.44	0.08
81	Evaluate client intake and output and intervene as needed	121	4.12	0.07	124	4.10	0.07
82	Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	158	4.11	0.06	163	4.07	0.07
83	Assess client for pain and intervene as appropriate	139	4.35	0.06	139	4.35	0.06
84	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupuncture, supplements)	95	3.06	0.10	122	2.89	0.09
85	Evaluate appropriateness and accuracy of medication order for client	161	4.73	0.04	163	4.69	0.05
86	Prepare and administer medications using rights of medication administration	138	4.83	0.03	139	4.83	0.03
87	Perform calculations needed for medication administration	120	4.78	0.05	125	4.71	0.06
88	Monitor intravenous infusion and maintain site	146	4.44	0.05	161	4.30	0.07
89	Handle and/or administer controlled substances within regulatory guidelines	133	4.63	0.05	139	4.57	0.06
90	Handle and/or administer high-risk medications	120	4.68	0.06	127	4.65	0.06
91	Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)	158	4.71	0.04	161	4.68	0.05
92	Titrate dosage of medication based on assessment and ordered parameters	123	4.44	0.06	137	4.44	0.05
93	Administer blood products and evaluate client response	98	4.67	0.06	123	4.42	0.09
94	Access central venous access devices	135	4.23	0.07	157	4.06	0.08
95	Educate client about medications	137	4.09	0.06	140	4.09	0.06
96	Evaluate client response to medication	127	4.50	0.05	128	4.47	0.06
97	Administer parenteral nutrition and evaluate client response	122	4.21	0.06	156	3.97	0.08
98	Administer medications for pain management	134	4.31	0.06	139	4.29	0.06
99	Participate in medication reconciliation process	117	4.02	0.08	123	3.90	0.09
100	Handle and maintain medication in a safe and controlled environment	163	4.55	0.05	164	4.52	0.05
101	Assess and respond to changes and/or trends in client vital signs	139	4.76	0.04	140	4.76	0.04
102	Perform focused assessments	126	4.43	0.06	127	4.40	0.07
103	Monitor the results of diagnostic testing and intervene as needed	159	4.18	0.06	162	4.14	0.06

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
104	Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)	136	4.46	0.05	139	4.43	0.06
105	Evaluate responses to procedures and treatments	124	4.30	0.06	126	4.27	0.06
106	Provide preoperative or postoperative education	116	4.13	0.07	156	3.93	0.08
107	Provide preoperative care	100	3.85	0.08	132	3.71	0.09
108	Manage client during a procedure with moderate sedation	66	4.27	0.09	115	3.91	0.11
109	Manage client following a procedure with moderate sedation	116	4.33	0.06	155	4.10	0.08
110	Obtain blood specimens (e.g. venipuncture, venous access device, central line)	113	3.97	0.07	132	3.89	0.08
111	Use precautions to prevent injury and/or complications associated with a procedure or diagnosis	120	4.34	0.06	127	4.28	0.07
112	Educate client about treatments and procedures	159	4.00	0.06	163	3.98	0.06
113	Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)	133	3.80	0.07	136	3.79	0.07
114	Insert, maintain, or remove a nasal/oral gastrointestinal tube	87	3.86	0.09	121	3.59	0.10
115	Maintain percutaneous feeding tube	120	3.83	0.07	153	3.63	0.09
116	Insert, maintain, or remove a urinary catheter	126	3.83	0.06	131	3.78	0.07
117	Insert, maintain, or remove a peripheral intravenous line	108	4.02	0.09	123	3.87	0.09
118	Recognize trends and changes in client condition and intervene as needed	162	4.63	0.05	164	4.59	0.05
119	Apply and/or maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	121	3.55	0.08	134	3.46	0.09
120	Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	102	4.12	0.08	124	3.92	0.09
121	Perform emergency care procedures	141	4.72	0.05	158	4.63	0.06
122	Monitor and care for clients on a ventilator	54	4.57	0.09	125	4.23	0.10
123	Perform wound care and/or dressing change	120	3.99	0.08	126	3.94	0.08
124	Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	92	3.95	0.10	152	3.74	0.09
125	Provide ostomy care and/or education (e.g., tracheal, enteral)	108	3.73	0.09	131	3.71	0.08
126	Provide postoperative care	81	4.17	0.09	117	3.94	0.10
127	Perform and manage care of client receiving peritoneal dialysis	61	3.87	0.11	145	3.66	0.10
128	Perform suctioning	111	4.23	0.07	130	4.13	0.08
129	Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	92	3.84	0.08	124	3.54	0.10

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
130	Manage the care of a client on telemetry	89	4.34	0.08	154	4.03	0.09
131	Manage the care of a client with impaired ventilation/oxygenation	117	4.56	0.06	130	4.48	0.08
132	Maintain optimal temperature of client	113	3.95	0.09	124	3.85	0.10
133	Implement and monitor phototherapy	40	3.90	0.15	142	3.44	0.10
134	Manage the care of a client with a pacing device	98	4.04	0.08	131	4.02	0.08
135	Monitor and maintain arterial lines	51	4.16	0.13	115	3.83	0.13
136	Manage the care of the client with a fluid and electrolyte imbalance	150	4.45	0.05	160	4.35	0.06
137	Manage the care of a client with alteration in hemodynamics, tissue perfusion, and/or hemostasis	122	4.30	0.06	135	4.29	0.07
138	Evaluate the effectiveness of the treatment plan for a client with an acute or chronic diagnosis	119	4.24	0.07	126	4.07	0.09
139	Identify pathophysiology related to an acute or chronic condition	152	4.17	0.06	161	4.09	0.07
140	Manage the care of a client receiving hemodialysis or continuous renal replacement therapy	73	3.85	0.11	126	3.80	0.10
141	Recognize signs and symptoms of client complications and intervene	127	4.69	0.06	128	4.69	0.06
142	Educate client regarding an acute or chronic condition	157	4.04	0.05	162	3.99	0.06

REFERENCES

- American Educational Research Association, American Psychological Association, and National Council on Measurement in Education. (2014). *Standards for Educational and Psychological Testing*. Washington, D.C.: AERA.
- Cronbach, L. J. (1951). Coefficient Alpha and the Internal Structure of Tests. *Psychometrika*, 16, 297-334.
- Raymond, M.R. (2001). Job Analysis and the specifications of content for licensure and certification Examinations. *Applied Measurement in Education*, 14(4), 369-415.

APPENDIX A: 2017 CANADIAN RN PRACTICE ANALYSIS SURVEY

Web English Form 1



RN 2017-1-CDN

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. 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 selecting the option that most closely represents your answer. Choose the answer that **best** 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 **last day of work**. 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.

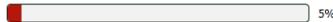
Survey Progression:

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.



Continue to the Next Page

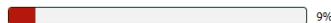


RN 2017-1-CDN

INTRODUCTION

1. What type(s) of nursing license do you hold? (**Select ALL that apply**)

- RN
 LPN/VN



Previous Page

Continue to the Next Page



RN 2017-1-CDN

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

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

- Yes
- No



Previous Page

Continue to the Next Page



RN 2017-1-CDN

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

18%

Previous Page

Continue to the Next Page



RN 2017-1-CDN

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.

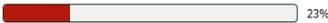
NOTE: Inclusion of an activity on this practice analysis survey does not imply that the activity is or would be included in the RN scope of practice defined by any specific jurisdiction. You must refer to your local board of nursing/regulatory body for information about your scope of practice.

Question A – FREQUENCY - If an activity does not apply to your work setting, choose "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 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 Perform procedures necessary to safely admit, transfer, and/or discharge a client	<input type="text"/>	<input type="text"/>
2 Advocate for client rights and needs	<input type="text"/>	<input type="text"/>
3 Collaborate with interprofessional team members when providing client care	<input type="text"/>	<input type="text"/>
4 Verify the client receives appropriate education and consents for care and procedures	<input type="text"/>	<input type="text"/>
5 Initiate, evaluate and update client plan of care	<input type="text"/>	<input type="text"/>
6 Report client conditions as required by law (e.g., abuse/neglect and communicable disease)	<input type="text"/>	<input type="text"/>
7 Recognize ethical dilemmas and take appropriate action	<input type="text"/>	<input type="text"/>
8 Practice in a manner consistent with a code of ethics for nurses	<input type="text"/>	<input type="text"/>
9 Apply principles of infection control (e.g., hand hygiene, aseptic technique, isolation, sterile technique, universal/standard precautions)	<input type="text"/>	<input type="text"/>

10 Follow procedures for handling biohazardous and hazardous materials	<input type="text"/>	<input type="text"/>
11 Acknowledge and document practice errors and near misses (e.g., incident report for medication error)	<input type="text"/>	<input type="text"/>
12 Educate client on safety issues	<input type="text"/>	<input type="text"/>
13 Educate client and staff regarding infection control measures	<input type="text"/>	<input type="text"/>
14 Provide prenatal care and education	<input type="text"/>	<input type="text"/>
15 Educate client about prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practice, needle exchange)	<input type="text"/>	<input type="text"/>
16 Perform comprehensive health assessments	<input type="text"/>	<input type="text"/>
17 Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years	<input type="text"/>	<input type="text"/>
18 Assess client ability to manage care in home environment and plan care accordingly	<input type="text"/>	<input type="text"/>
19 Assess psychosocial, spiritual, and/or occupational factors affecting care and plan interventions	<input type="text"/>	<input type="text"/>
20 Provide care and education for acute and chronic psychosocial health issues (e.g., addictions/dependencies, depression, dementia, eating disorders)	<input type="text"/>	<input type="text"/>
21 Provide end-of-life care and education to clients	<input type="text"/>	<input type="text"/>
22 Assess client's ability to cope with life changes and provide support	<input type="text"/>	<input type="text"/>
23 Incorporate behavioral management techniques when caring for a client	<input type="text"/>	<input type="text"/>
24 Assess and/or intervene in client performance of activities of daily living	<input type="text"/>	<input type="text"/>
25 Perform irrigations (e.g., of bladder, ear, eye)	<input type="text"/>	<input type="text"/>



Previous Page Continue to the Next Page


RN 2017-1-CDN
SECTION 1: NURSING ACTIVITIES

Question A – FREQUENCY - If an activity does not apply to your work setting, choose "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 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
26 Assess and manage client with an alteration in elimination	<input type="text"/>	<input type="text"/>
27 Monitor the client's nutritional status	<input type="text"/>	<input type="text"/>
28 Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization)	<input type="text"/>	<input type="text"/>
29 Evaluate appropriateness and accuracy of medication order for client	<input type="text"/>	<input type="text"/>
30 Monitor intravenous infusion and maintain site	<input type="text"/>	<input type="text"/>
31 Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)	<input type="text"/>	<input type="text"/>
32 Access central venous access devices	<input type="text"/>	<input type="text"/>
33 Administer parenteral nutrition and evaluate client response	<input type="text"/>	<input type="text"/>
34 Handle and maintain medication in a safe and controlled environment	<input type="text"/>	<input type="text"/>
35 Monitor the results of diagnostic testing and intervene as needed	<input type="text"/>	<input type="text"/>
36 Provide preoperative or postoperative education	<input type="text"/>	<input type="text"/>
37 Manage client following a procedure with moderate sedation	<input type="text"/>	<input type="text"/>
38 Educate client about treatments and procedures	<input type="text"/>	<input type="text"/>
39 Maintain percutaneous feeding tube	<input type="text"/>	<input type="text"/>
40 Recognize trends and changes in client condition and intervene as needed	<input type="text"/>	<input type="text"/>
41 Perform emergency care procedures	<input type="text"/>	<input type="text"/>
42 Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)	<input type="text"/>	<input type="text"/>
43 Perform and manage care of client receiving peritoneal dialysis	<input type="text"/>	<input type="text"/>
44 Manage the care of a client on telemetry	<input type="text"/>	<input type="text"/>
45 Implement and monitor phototherapy	<input type="text"/>	<input type="text"/>
46 Manage the care of the client with a fluid and electrolyte imbalance	<input type="text"/>	<input type="text"/>
47 Identify pathophysiology related to an acute or chronic condition	<input type="text"/>	<input type="text"/>
48 Educate client regarding an acute or chronic condition	<input type="text"/>	<input type="text"/>

49. 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

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



Previous Page

Continue to the Next Page



RN 2017-1-CDN

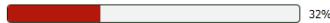
SECTION 2: EXPERIENCE AND ORIENTATION

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 of Canada as an RN?

- Yes
- No



Previous Page

Continue to the Next Page



RN 2017-1-CDN

SECTION 2: EXPERIENCE AND ORIENTATION

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

Months:



Previous Page

Continue to the Next Page

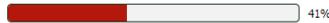


RN 2017-1-CDN

SECTION 2: EXPERIENCE AND ORIENTATION

3. Which of the following **best** 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):



Previous Page

Continue to the Next Page



RN 2017-1-CDN

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:



[Previous Page](#) [Continue to the Next Page](#)



RN 2017-1-CDN

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)



[Previous Page](#) [Continue to the Next Page](#)

**RN 2017-1-CDN****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

[Previous Page](#)[Continue to the Next Page](#)**RN 2017-1-CDN****SECTION 2: EXPERIENCE AND ORIENTATION**

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

- Yes
 No

[Previous Page](#)[Continue to the Next Page](#)


RN 2017-1-CDN
SECTION 3: WORK ENVIRONMENT

1. Which of the following **best** describes **most** 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 **best** describes the ages of **most** 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)

3. Which of the following choices **best** describes your employment setting/specialty area **on the last day you worked**? 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**)

- | | |
|--|--|
| <input type="checkbox"/> Critical care (e.g., ICU, CCU, step-down units, pediatric/neonatal intensive care, emergency department, post-anesthesia recovery unit) | <input type="checkbox"/> Subacute unit |
| <input type="checkbox"/> Medical-surgical unit or any of its sub-specialties (e.g., oncology, orthopedics, neurology) | <input type="checkbox"/> Transitional care unit |
| <input type="checkbox"/> Pediatrics | <input type="checkbox"/> Physician/Advanced Practice RN/Nurse Practitioner (NP)/Dentist office |
| <input type="checkbox"/> Nursery | <input type="checkbox"/> Occupational health |
| <input type="checkbox"/> Labor and delivery | <input type="checkbox"/> Outpatient clinic |
| <input type="checkbox"/> Postpartum unit | <input type="checkbox"/> Home health, including visiting nurses associations |
| <input type="checkbox"/> Psychiatry or any of its sub-specialties (e.g., detox) | <input type="checkbox"/> Public health |
| <input type="checkbox"/> Assisted Living | <input type="checkbox"/> Student/school health |
| <input type="checkbox"/> Operating room, including outpatient surgery and surgicenters | <input type="checkbox"/> Hospice care |
| <input type="checkbox"/> Nursing home, skilled or intermediate care | <input type="checkbox"/> Prison/Correctional Facility/Jail |
| <input type="checkbox"/> Other long-term care (e.g., residential care, developmental disability) | <input type="checkbox"/> Short Stay/Observational |
| <input type="checkbox"/> Rehabilitation | <input type="checkbox"/> Step-down/Progressive Care |
| <input type="checkbox"/> Other (please specify) | |

4. Which of the following **best** describes the type of facility/organization where your employment setting/specialty area is located? (**Select only ONE**)

- 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)/dentist office, clinic, school, prison, etc.)
- Other (please specify)

5. If you work in a hospital 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 nursing home

6. Which of the following **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 your shift **on a typical work day**? (**Select only ONE**)

- 8 hours
- 10 hours
- 12 hours
- Varied 8 hours and 12 hours
- Other (please specify)

8. Which **best** describes the location of your employment setting?

- Urban/Metropolitan area
- Suburban
- Rural



Previous Page

Continue to the Next Page



RN 2017-1-CDN

SECTION 4: DESCRIPTION OF YOUR LAST DAY OF WORK

1. How many hours did you work on the **last shift you worked**? Please enter a positive, whole number only and round up (e.g., 20).
Hours:

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 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:

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 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

	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.	<input type="radio"/>									
2. Safety and Infection Control: Protect clients and health care personnel from health and environmental hazards.	<input type="radio"/>									
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.	<input type="radio"/>									
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.	<input type="radio"/>									
5. Basic Care and Comfort: Provide comfort and assistance in the performance of activities of daily living.	<input type="radio"/>									
6. Pharmacological and Parenteral Therapies: Provide care related to the administration of medications and parenteral therapies.	<input type="radio"/>									
7. Reduction of Risk Potential: Reduce the likelihood that clients will develop complications or health problems related to existing conditions, treatments or procedures.	<input type="radio"/>									
8. Physiological Adaptation: Manage and provide care for clients with acute, chronic or life threatening physical health conditions.	<input type="radio"/>									



Previous Page [Continue to the Next Page](#)



RN 2017-1-CDN

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?

- Yes
 No



Previous Page

Continue to the Next Page



RN 2017-1-CDN

SECTION 5: DEMOGRAPHIC INFORMATION

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

Years:

Months:



Previous Page

Continue to the Next Page



RN 2017-1-CDN

SECTION 5: DEMOGRAPHIC INFORMATION

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

- Yes
- No



Previous Page Continue to the Next Page



RN 2017-1-CDN

SECTION 5: DEMOGRAPHIC INFORMATION

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

Years:

Months:



Previous Page Continue to the Next Page



RN 2017-1-CDN

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).

Age:

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

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

6. What is your primary language?

- English
- 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 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)

Months:

 91%

Previous Page

Continue to the Next Page



RN 2017-1-CDN

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.



[Previous Page](#)
[Continue to the Next Page](#)



RN 2017-1-CDN

Thank you!

Thank you for your participation in this important study.

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



[Previous Page](#)
[Submit Survey](#)

Web English Form 2



RN 2017-2-CDN

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. 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 selecting the option that most closely represents your answer. Choose the answer that **best** 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 **last day of work**. 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.

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.

 5%

Continue to the Next Page



RN 2017-2-CDN

INTRODUCTION

1. What type(s) of nursing license do you hold? (**Select ALL that apply**)

- RN
- LPN/VN

 9%

Previous Page

Continue to the Next Page



RN 2017-2-CDN

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

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

- Yes
- No



Previous Page

Continue to the Next Page



RN 2017-2-CDN

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



Previous Page

Continue to the Next Page



RN 2017-2-CDN

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.

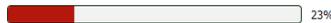
NOTE: Inclusion of an activity on this practice analysis survey does not imply that the activity is or would be included in the RN scope of practice defined by any specific jurisdiction. You must refer to your local board of nursing/regulatory body for information about your scope of practice.

Question A – FREQUENCY - If an activity does not apply to your work setting, choose "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 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	<input type="text"/>	<input type="text"/>
2 Prioritize the delivery of client care	<input type="text"/>	<input type="text"/>
3 Receive and transcribe health care provider orders	<input type="text"/>	<input type="text"/>
4 Provide education to clients and staff about client rights and responsibilities	<input type="text"/>	<input type="text"/>
5 Maintain client confidentiality and privacy	<input type="text"/>	<input type="text"/>
6 Manage conflict among clients and health care staff	<input type="text"/>	<input type="text"/>
7 Use approved abbreviations and standard terminology when documenting care	<input type="text"/>	<input type="text"/>
8 Provide care within the legal scope of practice	<input type="text"/>	<input type="text"/>
9 Protect client from injury (e.g., falls, electrical hazards)	<input type="text"/>	<input type="text"/>
10 Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access)	<input type="text"/>	<input type="text"/>
11 Ensure proper identification of client when providing care	<input type="text"/>	<input type="text"/>
12 Participate in emergency response plans (e.g., internal/external disaster, bomb threat, community planning)	<input type="text"/>	<input type="text"/>
13 Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies)	<input type="text"/>	<input type="text"/>
14 Plan and/or participate in community health education	<input type="text"/>	<input type="text"/>

15 Educate client about health promotion and maintenance recommendations (e.g., physician visits, immunizations)	<input type="text"/>	<input type="text"/>
16 Assess client's readiness to learn, learning preferences, and barriers to learning	<input type="text"/>	<input type="text"/>
17 Provide care and education for the adult client ages 18 through 64 years	<input type="text"/>	<input type="text"/>
18 Assess and educate clients about health risks based on family, population, and community characteristics	<input type="text"/>	<input type="text"/>
19 Assess client for abuse or neglect and intervene as appropriate	<input type="text"/>	<input type="text"/>
20 Promote a therapeutic environment	<input type="text"/>	<input type="text"/>
21 Assess the potential for violence and use safety precautions	<input type="text"/>	<input type="text"/>
22 Provide care for a client experiencing grief or loss	<input type="text"/>	<input type="text"/>
23 Recognize nonverbal cues to physical and/or psychological stressors	<input type="text"/>	<input type="text"/>
24 Provide client nutrition through tube feedings	<input type="text"/>	<input type="text"/>
25 Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)	<input type="text"/>	<input type="text"/>



RN 2017-2-CDN

SECTION 1: NURSING ACTIVITIES

Question A – FREQUENCY - If an activity does not apply to your work setting, choose "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 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
26 Apply, maintain, or remove orthopedic devices	<input type="text"/>	<input type="text"/>
27 Assess client sleep/rest pattern and intervene as needed	<input type="text"/>	<input type="text"/>
28 Assess client for pain and intervene as appropriate	<input type="text"/>	<input type="text"/>
29 Prepare and administer medications using rights of medication administration	<input type="text"/>	<input type="text"/>
30 Handle and/or administer controlled substances within regulatory guidelines	<input type="text"/>	<input type="text"/>
31 Titrate dosage of medication based on assessment and ordered parameters	<input type="text"/>	<input type="text"/>
32 Educate client about medications	<input type="text"/>	<input type="text"/>
33 Administer medications for pain management	<input type="text"/>	<input type="text"/>

34 Assess and respond to changes and/or trends in client vital signs	<input type="text"/>	<input type="text"/>
35 Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)	<input type="text"/>	<input type="text"/>
36 Provide preoperative care	<input type="text"/>	<input type="text"/>
37 Obtain blood specimens (e.g., venipuncture, venous access device, central line)	<input type="text"/>	<input type="text"/>
38 Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)	<input type="text"/>	<input type="text"/>
39 Insert, maintain, or remove a urinary catheter	<input type="text"/>	<input type="text"/>
40 Apply and/or maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices)	<input type="text"/>	<input type="text"/>
41 Monitor and care for clients on a ventilator	<input type="text"/>	<input type="text"/>
42 Provide ostomy care and/or education (e.g., tracheal, enteral)	<input type="text"/>	<input type="text"/>
43 Perform suctioning	<input type="text"/>	<input type="text"/>
44 Manage the care of a client with impaired ventilation/oxygenation	<input type="text"/>	<input type="text"/>
45 Manage the care of a client with a pacing device	<input type="text"/>	<input type="text"/>
46 Manage the care of a client with alteration in hemodynamics, tissue perfusion, and/or hemostasis	<input type="text"/>	<input type="text"/>
47 Manage the care of a client receiving hemodialysis or continuous renal replacement therapy	<input type="text"/>	<input type="text"/>

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



**RN 2017-2-CDN****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 of Canada as an RN?

Yes

No



Previous Page

Continue to the Next Page

**RN 2017-2-CDN****SECTION 2: EXPERIENCE AND ORIENTATION**

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

Months:



Previous Page

Continue to the Next Page

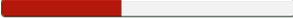


RN 2017-2-CDN

SECTION 2: EXPERIENCE AND ORIENTATION

3. Which of the following **best** 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):

 41%

Previous Page

Continue to the Next Page



RN 2017-2-CDN

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:

 45%

Previous Page

Continue to the Next Page



RN 2017-2-CDN

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)



Previous Page

Continue to the Next Page

**RN 2017-2-CDN****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

[Previous Page](#)[Continue to the Next Page](#)**RN 2017-2-CDN****SECTION 2: EXPERIENCE AND ORIENTATION**

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

- Yes
 No

[Previous Page](#)[Continue to the Next Page](#)


RN 2017-2-CDN
SECTION 3: WORK ENVIRONMENT

1. Which of the following **best** describes **most** 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 **best** describes the ages of **most** 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)

3. Which of the following choices **best** describes your employment setting/specialty area **on the last day you worked**? 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**)

- | | |
|--|--|
| <input type="checkbox"/> Critical care (e.g., ICU, CCU, step-down units, pediatric/neonatal intensive care, emergency department, post-anesthesia recovery unit) | <input type="checkbox"/> Subacute unit |
| <input type="checkbox"/> Medical-surgical unit or any of its sub-specialties (e.g., oncology, orthopedics, neurology) | <input type="checkbox"/> Transitional care unit |
| <input type="checkbox"/> Pediatrics | <input type="checkbox"/> Physician/Advanced Practice RN/Nurse Practitioner (NP)/Dentist office |
| <input type="checkbox"/> Nursery | <input type="checkbox"/> Occupational health |
| <input type="checkbox"/> Labor and delivery | <input type="checkbox"/> Outpatient clinic |
| <input type="checkbox"/> Postpartum unit | <input type="checkbox"/> Home health, including visiting nurses associations |
| <input type="checkbox"/> Psychiatry or any of its sub-specialties (e.g., detox) | <input type="checkbox"/> Public health |
| <input type="checkbox"/> Assisted Living | <input type="checkbox"/> Student/school health |
| <input type="checkbox"/> Operating room, including outpatient surgery and surgicenters | <input type="checkbox"/> Hospice care |
| <input type="checkbox"/> Nursing home, skilled or intermediate care | <input type="checkbox"/> Prison/Correctional Facility/Jail |
| <input type="checkbox"/> Other long-term care (e.g., residential care, developmental disability) | <input type="checkbox"/> Short Stay/Observational |
| <input type="checkbox"/> Rehabilitation | <input type="checkbox"/> Step-down/Progressive Care |
| <input type="checkbox"/> Other (please specify) | |

4. Which of the following **best** describes the type of facility/organization where your employment setting/specialty area is located? **(Select only ONE)**

- 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)/dentist office, clinic, school, prison, etc.)
- Other (please specify)

5. If you work in a hospital 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 nursing home

6. Which of the following **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 your shift **on a typical work day**? **(Select only ONE)**

- 8 hours
- 10 hours
- 12 hours
- Varied 8 hours and 12 hours
- Other (please specify)

8. Which **best** describes the location of your employment setting?

- Urban/Metropolitan area
- Suburban
- Rural



Previous Page

Continue to the Next Page



RN 2017-2-CDN

SECTION 4: DESCRIPTION OF YOUR LAST DAY OF WORK

1. How many hours did you work on the **last shift you worked**? Please enter a positive, whole number only and round up (e.g., 20).
 Hours:

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 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:

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 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									
	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.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Safety and Infection Control: Protect clients and health care personnel from health and environmental hazards.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Basic Care and Comfort: Provide comfort and assistance in the performance of activities of daily living.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Pharmacological and Parenteral Therapies: Provide care related to the administration of medications and parenteral therapies.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Reduction of Risk Potential: Reduce the likelihood that clients will develop complications or health problems related to existing conditions, treatments or procedures.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Physiological Adaptation: Manage and provide care for clients with acute, chronic or life threatening physical health conditions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



Previous Page [Continue to the Next Page](#)



RN 2017-2-CDN

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?

- Yes
 No



Previous Page

Continue to the Next Page



RN 2017-2-CDN

SECTION 5: DEMOGRAPHIC INFORMATION

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

Years:
Months:



Previous Page

Continue to the Next Page



RN 2017-2-CDN

SECTION 5: DEMOGRAPHIC INFORMATION

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

- Yes
 No



Previous Page

Continue to the Next Page

**RN 2017-2-CDN****SECTION 5: DEMOGRAPHIC INFORMATION**

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

Years:

Months:

[Previous Page](#)[Continue to the Next Page](#)**RN 2017-2-CDN****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).

Age:

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

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

6. What is your primary language?

- English
- 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 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)

Months:

 91%

Previous Page

Continue to the Next Page

**RN 2017-2-CDN****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.

95%

[Previous Page](#)[Continue to the Next Page](#)**RN 2017-2-CDN****Thank you!**

Thank you for your participation in this important study.

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

100%

[Previous Page](#)[Submit Survey](#)

Web English Form 3



RN 2017-3-CDN

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. 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 selecting the option that most closely represents your answer. Choose the answer that **best** 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 **last day of work**. 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.

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.

[Continue to the Next Page](#)

RN 2017-3-CDN

INTRODUCTION

1. What type(s) of nursing license do you hold? (**Select ALL that apply**)

- RN
 LPN/VN

[Previous Page](#)[Continue to the Next Page](#)



RN 2017-3-CDN

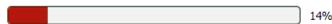
INTRODUCTION

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

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

- Yes
- No



Previous Page

Continue to the Next Page



RN 2017-3-CDN

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



Previous Page

Continue to the Next Page



RN 2017-3-CDN

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 - If an activity does not apply to your work setting, choose "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 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 Assign and supervise care of client provided by others (e.g., LPN/VN, assistive personnel, other RNs)	<input type="text"/>	<input type="text"/>
2 Participate in performance improvement projects and quality improvement processes	<input type="text"/>	<input type="text"/>
3 Integrate advanced directives into client plan of care	<input type="text"/>	<input type="text"/>
4 Assess the need for referrals and obtain necessary orders	<input type="text"/>	<input type="text"/>
5 Recognize limitations of self and others and utilize resources	<input type="text"/>	<input type="text"/>
6 Utilize resources to enhance client care (e.g., evidenced-based research, information technology, policies and procedures)	<input type="text"/>	<input type="text"/>
7 Organize workload to manage time effectively	<input type="text"/>	<input type="text"/>
8 Practice and advocate for cost effective care	<input type="text"/>	<input type="text"/>
9 Verify appropriateness and accuracy of a treatment order	<input type="text"/>	<input type="text"/>
10 Use ergonomic principles when providing care (e.g., safe patient handling, proper lifting)	<input type="text"/>	<input type="text"/>
11 Facilitate appropriate and safe use of equipment	<input type="text"/>	<input type="text"/>
12 Follow requirements for use of restraints	<input type="text"/>	<input type="text"/>
13 Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices)	<input type="text"/>	<input type="text"/>
14 Perform targeted screening assessments (e.g., vision, nutrition)	<input type="text"/>	<input type="text"/>
15 Provide postpartum care and education	<input type="text"/>	<input type="text"/>
16 Provide care and education for the newborn, infant, and toddler client from birth through 2 years	<input type="text"/>	<input type="text"/>
17 Provide care and education for the adult client ages 65 years and over	<input type="text"/>	<input type="text"/>
18 Provide care and education to an antepartum client or a client in labor	<input type="text"/>	<input type="text"/>
19 Assess client for substance abuse, dependency, withdrawal, or toxicities and intervene as appropriate	<input type="text"/>	<input type="text"/>
20 Incorporate client cultural practices and beliefs when planning and providing care	<input type="text"/>	<input type="text"/>
21 Assess family dynamics to determine plan of care	<input type="text"/>	<input type="text"/>
22 Use therapeutic communication techniques	<input type="text"/>	<input type="text"/>
23 Provide care for a client experiencing visual, auditory, and/or cognitive distortions	<input type="text"/>	<input type="text"/>
24 Perform postmortem care	<input type="text"/>	<input type="text"/>
25 Perform skin assessment and/or implement measures to maintain skin integrity and prevent skin breakdown	<input type="text"/>	<input type="text"/>





RN 2017-3-CDN

SECTION 1: NURSING ACTIVITIES

Question A – FREQUENCY - If an activity does not apply to your work setting, choose "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 select 0-5+ reflecting the frequency of performing the activity on your **last day of work**, then complete Question B.

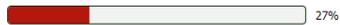
Question B – IMPORTANCE - Rate the overall importance of this activity considering client safety, and/or threat of complications or distress with 1 = Not Important, 2 = Minimally Important, 3 = Moderately Important, 4 = Important, 5 = Critically Important.

	A - Frequency	B - Importance
26 Provide non-pharmacological comfort measures	<input type="text"/>	<input type="text"/>
27 Evaluate client intake and output and intervene as needed	<input type="text"/>	<input type="text"/>
28 Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)	<input type="text"/>	<input type="text"/>
29 Perform calculations needed for medication administration	<input type="text"/>	<input type="text"/>
30 Handle and/or administer high-risk medications	<input type="text"/>	<input type="text"/>
31 Administer blood products and evaluate client response	<input type="text"/>	<input type="text"/>
32 Evaluate client response to medication	<input type="text"/>	<input type="text"/>
33 Participate in medication reconciliation process	<input type="text"/>	<input type="text"/>
34 Perform focused assessments	<input type="text"/>	<input type="text"/>
35 Evaluate responses to procedures and treatments	<input type="text"/>	<input type="text"/>
36 Manage client during a procedure with moderate sedation	<input type="text"/>	<input type="text"/>
37 Use precautions to prevent injury and/or complications associated with a procedure or diagnosis	<input type="text"/>	<input type="text"/>
38 Insert, maintain, or remove a nasal/oral gastrointestinal tube	<input type="text"/>	<input type="text"/>
39 Insert, maintain, or remove a peripheral intravenous line	<input type="text"/>	<input type="text"/>
40 Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)	<input type="text"/>	<input type="text"/>
41 Perform wound care and/or dressing change	<input type="text"/>	<input type="text"/>
42 Provide postoperative care	<input type="text"/>	<input type="text"/>
43 Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry)	<input type="text"/>	<input type="text"/>
44 Maintain optimal temperature of client	<input type="text"/>	<input type="text"/>
45 Monitor and maintain arterial lines	<input type="text"/>	<input type="text"/>
46 Evaluate the effectiveness of the treatment plan for a client with an acute or chronic diagnosis	<input type="text"/>	<input type="text"/>
47 Recognize signs and symptoms of client complications and intervene	<input type="text"/>	<input type="text"/>

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



Previous Page

Continue to the Next Page



RN 2017-3-CDN

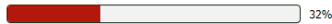
SECTION 2: EXPERIENCE AND ORIENTATION

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 of Canada as an RN?

- Yes
 No



Previous Page

Continue to the Next Page



RN 2017-3-CDN

SECTION 2: EXPERIENCE AND ORIENTATION

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

Months:



Previous Page

Continue to the Next Page

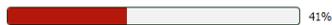


RN 2017-3-CDN

SECTION 2: EXPERIENCE AND ORIENTATION

3. Which of the following **best** 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):



Previous Page

Continue to the Next Page



RN 2017-3-CDN

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:



[Previous Page](#) [Continue to the Next Page](#)

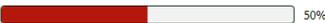


RN 2017-3-CDN

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)



[Previous Page](#) [Continue to the Next Page](#)

**RN 2017-3-CDN****SECTION 2: EXPERIENCE AND ORIENTATION**

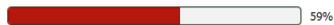
6a. Do you routinely have administrative responsibilities within your nursing position (e.g., Unit Manager, Team Leader, Charge Nurse, Coordinator)?

- Yes
 No

[Previous Page](#)[Continue to the Next Page](#)**RN 2017-3-CDN****SECTION 2: EXPERIENCE AND ORIENTATION**

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

- Yes
 No

[Previous Page](#)[Continue to the Next Page](#)



RN 2017-3-CDN

SECTION 3: WORK ENVIRONMENT

1. Which of the following **best** describes **most** 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 **best** describes the ages of **most** 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)

3. Which of the following choices **best** describes your employment setting/specialty area **on the last day you worked?** 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)**

- | | |
|--|--|
| <input type="checkbox"/> Critical care (e.g., ICU, CCU, step-down units, pediatric/neonatal intensive care, emergency department, post-anesthesia recovery unit) | <input type="checkbox"/> Subacute unit |
| <input type="checkbox"/> Medical-surgical unit or any of its sub-specialties (e.g., oncology, orthopedics, neurology) | <input type="checkbox"/> Transitional care unit |
| <input type="checkbox"/> Pediatrics | <input type="checkbox"/> Physician/Advanced Practice RN/Nurse Practitioner (NP)/Dentist office |
| <input type="checkbox"/> Nursery | <input type="checkbox"/> Occupational health |
| <input type="checkbox"/> Labor and delivery | <input type="checkbox"/> Outpatient clinic |
| <input type="checkbox"/> Postpartum unit | <input type="checkbox"/> Home health, including visiting nurses associations |
| <input type="checkbox"/> Psychiatry or any of its sub-specialties (e.g., detox) | <input type="checkbox"/> Public health |
| <input type="checkbox"/> Assisted Living | <input type="checkbox"/> Student/school health |
| <input type="checkbox"/> Operating room, including outpatient surgery and surgicenters | <input type="checkbox"/> Hospice care |
| <input type="checkbox"/> Nursing home, skilled or intermediate care | <input type="checkbox"/> Prison/Correctional Facility/Jail |
| <input type="checkbox"/> Other long-term care (e.g., residential care, developmental disability) | <input type="checkbox"/> Short Stay/Observational |
| <input type="checkbox"/> Rehabilitation | <input type="checkbox"/> Step-down/Progressive Care |
| <input type="checkbox"/> Other (please specify) | |

4. Which of the following **best** describes the type of facility/organization where your employment setting/specialty area is located? **(Select only ONE)**

- 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)/dentist office, clinic, school, prison, etc.)
- Other (please specify)

5. If you work in a hospital 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 nursing home

6. Which of the following **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 your shift **on a typical work day**? **(Select only ONE)**

- 8 hours
- 10 hours
- 12 hours
- Varied 8 hours and 12 hours
- Other (please specify)

8. Which **best** describes the location of your employment setting?

- Urban/Metropolitan area
- Suburban
- Rural



Previous Page

Continue to the Next Page



RN 2017-3-CDN

SECTION 4: DESCRIPTION OF YOUR LAST DAY OF WORK

1. How many hours did you work on the **last shift you worked**? Please enter a positive, whole number only and round up (e.g., 20).

Hours:

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 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:

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 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

	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.	<input type="radio"/>									
2. Safety and Infection Control: Protect clients and health care personnel from health and environmental hazards.	<input type="radio"/>									
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.	<input type="radio"/>									
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.	<input type="radio"/>									
5. Basic Care and Comfort: Provide comfort and assistance in the performance of activities of daily living.	<input type="radio"/>									
6. Pharmacological and Parenteral Therapies: Provide care related to the administration of medications and parenteral therapies.	<input type="radio"/>									
7. Reduction of Risk Potential: Reduce the likelihood that clients will develop complications or health problems related to existing conditions, treatments or procedures.	<input type="radio"/>									
8. Physiological Adaptation: Manage and provide care for clients with acute, chronic or life threatening physical health conditions.	<input type="radio"/>									



**RN 2017-3-CDN****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?

Yes

No



Previous Page

Continue to the Next Page

**RN 2017-3-CDN****SECTION 5: DEMOGRAPHIC INFORMATION**

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

Years:

Months:



Previous Page

Continue to the Next Page



RN 2017-3-CDN

SECTION 5: DEMOGRAPHIC INFORMATION

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

- Yes
 No



Previous Page

Continue to the Next Page



RN 2017-3-CDN

SECTION 5: DEMOGRAPHIC INFORMATION

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

Years:

Months:



Previous Page

Continue to the Next Page



RN 2017-3-CDN

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).

Age:

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

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

6. What is your primary language?

- English
- 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 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)

Months:

 91%

Previous Page

Continue to the Next Page



RN 2017-3-CDN

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.



RN 2017-3-CDN

Thank you!

Thank you for your participation in this important study.
To finalize your survey, please click the **Submit Survey** button below.



Web French Form 1



RN 2017-1 FR

INSTRUCTIONS

Ce sondage est mené par le National Council of State Boards of Nursing (NCSBN) au nom de votre organisme de réglementation. Il fait partie d'une étude approfondie sur les activités professionnelles des infirmières/infirmiers nouvellement immatriculés/autorisés dans les régions canadiennes utilisant l'examen NCLEX® pour prendre les décisions sur l'attribution de l'autorisation d'exercer depuis 2017. Veuillez remplir et retourner le présent formulaire dès que possible. C'est l'occasion pour vous de contribuer au développement de l'examen NCLEX-RN® auquel les futur(e)s candidat(e)s se présenteront.

Instructions :

Veillez lire attentivement chaque question et répondre en remplissant l'ovale de l'option qui se rapproche le plus de votre réponse. Choisissez la réponse qui correspond le **mieux** à l'exercice de votre profession et remplissez l'ovale ou les ovales approprié(s). Quelques questions vous demandent d'écrire l'information. Veuillez écrire lisiblement votre réponse dans l'espace prévu.

Vous remarquerez que de nombreuses questions vous demandent d'indiquer ce que vous avez fait lors de votre **dernière journée de travail**. Il est important que nous obtenions l'information du personnel infirmier dont certaines journées de travail sont typiques et d'autres inhabituelles; veuillez donc répondre aux questions en fonction de ce que vous avez fait lors de votre **dernière** journée de travail, même s'il ne s'agissait pas d'une journée typique.

Au sens de ce sondage, le « **client** » peut être une personne, un membre de la famille ou un groupe qui comprend les partenaires et des membres de la population. Le terme « client » a le même sens que « résident » ou « patient ». Vos réponses seront traitées de façon confidentielle et aucune de vos réponses individuelles aux questions ne sera divulguée.

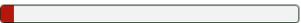
Progression du sondage :

Pour progresser tout au long du sondage, veuillez utiliser les boutons de navigation situés au bas de chaque page :

Continuez à la page suivante du sondage en cliquant sur le lien Continuer à la page suivante.

Revenez à la page précédente du sondage en cliquant sur le lien Page précédente. Cela vous permettra de revenir en arrière dans le sondage pour revoir les réponses précédentes.

Finissez le sondage en cliquant sur le lien Soumettre le sondage sur la page Merci.

 5%

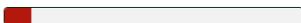
Continuer à la page suivante

RN 2017-1 FR

INTRODUCTION

1. Quel(s) type(s) de permis d'exercer la profession infirmière détenez-vous? (**Sélectionnez TOUTES les réponses qui s'appliquent**)

- Infirmière/infirmier immatriculé(e)/autorisé(e) (II/IA)
 Infirmière/infirmier auxiliaire immatriculé(e)/autorisé(e) (RPN/LPN)

 9%

Page précédente

Continuer à la page suivante



RN 2017-1 FR

INTRODUCTION

2. Quel(le) est votre province/territoire d'immatriculation/autorisation?

- Alberta
- Colombie-Britannique
- Île du Prince Édouard
- Manitoba
- Nouveau-Brunswick
- Nouvelle-Écosse
- Ontario
- Québec
- Saskatchewan
- Terre-Neuve-et-Labrador
- Territoires du Nord-Ouest et Nuvaunut
- Yukon

3. Travaillez-vous actuellement comme II/IA au Canada?

- Oui
- Non



Page précédente

Continuer à la page suivante



RN 2017-1 FR

INTRODUCTION

4. Dans le cadre de vos fonctions actuelles, fournissez-vous des soins directs aux clients? Remarque : Les activités cliniques d'un(e) étudiant(e) supervisées par un membre du corps professoral ne sont pas considérées comme des « soins directs ».

- Oui, 20 heures ou plus par semaine, en moyenne
- Oui, moins de 20 heures par semaine, en moyenne
- Non



Page précédente

Continuer à la page suivante



RN 2017-1 FR

SECTION 1 : ACTIVITÉS DE SOINS INFIRMIERS

Cette section comprend une liste des activités décrivant la pratique des soins infirmiers dans différents environnements. Veuillez noter que certaines activités pourraient ne pas s'appliquer à votre milieu de travail.

Pour chaque activité, deux questions sont posées. Veuillez répondre aux deux questions.

QUESTION A - FRÉQUENCE : Si l'activité est exécutée dans votre milieu de travail, à quelle fréquence (0 fois, 1 fois, 2 fois, 3 fois, 4 fois ou 5 fois+) avez-vous exécuté personnellement cette activité au cours de votre dernière journée de travail? Si elle n'est jamais exécutée dans votre milieu de travail ou n'est pas applicable, sélectionnez « JAMAIS exécutée dans le milieu de travail », puis répondez à la Question B - Importance.

QUESTION B - IMPORTANCE : Dans quelle mesure est-il important d'exécuter cette activité de soins infirmiers du point de vue de la sécurité du client? Évaluez l'importance du point de vue du risque de complications inutiles, d'invalidité fonctionnelle, ou d'une grande détresse pour les clients. Notez toutes les activités.

REMARQUE : L'inclusion d'une activité dans ce sondage d'analyse de la pratique ne signifie pas que cette activité est ou serait incluse dans le champ de pratique des II/IA défini par une province ou un territoire spécifique. Pour obtenir de l'information sur votre champ de pratique, veuillez vous adresser à votre organisme de réglementation local.

Question A – FRÉQUENCE – Si une activité ne s'applique pas à votre milieu de travail, indiquez « Jamais exécutée dans le milieu de travail », sélectionnez quand même la note de l'importance, tel qu'indiqué dans la Question B, puis passez à l'activité suivante. Si l'activité est exécutée dans votre milieu de travail, donnez une note de 0 à 5+ reflétant la fréquence à laquelle vous l'avez exécutée lors de votre dernier jour de travail, puis répondez à la Question B.

Question B – IMPORTANCE – Notez l'importance globale de cette activité du point de vue de la sécurité et/ou du risque de complications inutiles ou de détresse pour le client, comme suit : 1 = Non important, 2 = Légèrement important, 3 = Modérément important, 4 = Important, 5 = Très important.

	A - FRÉQUENCE	B - IMPORTANCE
1 Exécuter les procédures nécessaires pour admettre, transférer un client et/ou lui donner son congé en toute sécurité	<input type="text"/>	<input type="text"/>
2 Défendre les droits et répondre aux besoins des clients	<input type="text"/>	<input type="text"/>
3 Collaborer avec les membres des équipes interprofessionnelles lors de la fourniture de soins aux clients	<input type="text"/>	<input type="text"/>
4 Vérifier si le client reçoit l'enseignement approprié et consent aux soins et aux procédures	<input type="text"/>	<input type="text"/>
5 Établir, évaluer et mettre à jour le plan de soins du client	<input type="text"/>	<input type="text"/>
6 Signaler les conditions relatives au client conformément à la loi (p. ex., abus/négligence et maladies transmissibles)	<input type="text"/>	<input type="text"/>
7 Reconnaître les dilemmes éthiques et prendre la mesure appropriée	<input type="text"/>	<input type="text"/>
8 Exercer conformément au code de déontologie de la profession infirmière	<input type="text"/>	<input type="text"/>
9 Appliquer les principes de prévention des infections (p. ex., hygiène des mains, technique aseptique, isolement, technique stérile, précautions universelles et standard)	<input type="text"/>	<input type="text"/>
10 Suivre les procédures de manipulation du matériel biologiquement dangereux ou dangereux	<input type="text"/>	<input type="text"/>
11 Reconnaître et documenter les erreurs de pratique et les accidents évités de justesse (p. ex., rapport d'incident pour erreur de médication)	<input type="text"/>	<input type="text"/>

12 Sensibiliser le client aux problèmes de sécurité	<input type="text"/>	<input type="text"/>
13 Enseigner au client et au personnel les mesures de prévention des infections	<input type="text"/>	<input type="text"/>
14 Fournir les soins prénatals et l'enseignement	<input type="text"/>	<input type="text"/>
15 Sensibiliser le client à la prévention et au traitement des comportements à haut risque pour la santé (p. ex., arrêt du tabagisme, pratiques sexuelles sécuritaires, échange d'aiguilles)	<input type="text"/>	<input type="text"/>
16 Exécuter des évaluations approfondies de la santé	<input type="text"/>	<input type="text"/>
17 Prodiquer des soins et de l'enseignement pour les clients d'âge préscolaire, scolaire et adolescents de 3 à 17 ans	<input type="text"/>	<input type="text"/>
18 Évaluer la capacité du client à gérer ses soins chez lui et planifier les soins en conséquence	<input type="text"/>	<input type="text"/>
19 Évaluer les facteurs psychologiques, spirituels et/ou professionnels qui influent sur les soins et planifier les interventions	<input type="text"/>	<input type="text"/>
20 Prodiquer les soins et l'enseignement requis dans les cas de problèmes aigus et chroniques de santé psychosociale (p. ex., accoutumances/dépendances, dépression, démence, troubles alimentaires)	<input type="text"/>	<input type="text"/>
21 Prodiquer les soins de fin de vie aux clients et les sensibiliser à cet égard	<input type="text"/>	<input type="text"/>
22 Évaluer la capacité du client à faire face aux changements qui se produisent dans la vie et fournir du soutien	<input type="text"/>	<input type="text"/>
23 Incorporer des techniques de gestion du comportement lors de la fourniture des soins à un client	<input type="text"/>	<input type="text"/>
24 Évaluer la capacité du client à exécuter les activités de la vie quotidienne et/ou intervenir	<input type="text"/>	<input type="text"/>
25 Effectuer les irrigations (p. ex., de la vessie, de l'oreille, de l'œil)	<input type="text"/>	<input type="text"/>

 23%

[Page précédente](#)

[Continuer à la page suivante](#)



RN 2017-1 FR

SECTION 1 : ACTIVITÉS DE SOINS INFIRMIERS

Question A – FRÉQUENCE – Si une activité ne s'applique pas à votre milieu de travail, indiquez « Jamais exécutée dans le milieu de travail », sélectionnez quand même la note de l'importance, tel qu'indiqué dans la Question B, puis passez à l'activité suivante. Si l'activité est exécutée dans votre milieu de travail, donnez une note de 0 à 5+ reflétant la fréquence à laquelle vous l'avez exécutée lors de votre dernier jour de travail, puis répondez à la Question B.

Question B – IMPORTANCE – Notez l'importance globale de cette activité du point de vue de la sécurité et/ou du risque de complications inutiles ou de détresse pour le client, comme suit : 1 = Non important, 2 = Légèrement important, 3 = Modérément important, 4 = Important, 5 = Très important.

	A - FRÉQUENCE	B - IMPORTANCE
26 Évaluer et gérer le client en modifiant l'élimination	<input type="text"/>	<input type="text"/>
27 Surveiller l'état nutritionnel du client	<input type="text"/>	<input type="text"/>
28 Mettre en œuvre des mesures pour promouvoir la circulation (p. ex., amplitude de mouvement active ou passive, positionnement et mobilisation)	<input type="text"/>	<input type="text"/>
29 Évaluer la pertinence et l'exactitude de la prescription pour le client	<input type="text"/>	<input type="text"/>
30 Surveiller l'infusion intraveineuse et prendre soin du site	<input type="text"/>	<input type="text"/>
31 Examiner les données pertinentes avant l'administration des médicaments (p. ex., contre-indications, résultats de laboratoire, allergies, interactions potentielles)	<input type="text"/>	<input type="text"/>
32 Accéder aux dispositifs d'accès veineux central	<input type="text"/>	<input type="text"/>
33 Administrer la nutrition parentérale et évaluer la réponse du client	<input type="text"/>	<input type="text"/>
34 Manipuler et maintenir les médicaments dans un endroit sûr et contrôlé	<input type="text"/>	<input type="text"/>
35 Surveiller les résultats des tests de diagnostic et intervenir selon les besoins	<input type="text"/>	<input type="text"/>
36 Prodiguer l'enseignement préopératoire ou postopératoire	<input type="text"/>	<input type="text"/>
37 Prendre en charge le client après une procédure effectuée sous sédation modérée	<input type="text"/>	<input type="text"/>
38 Expliquer les traitements et les procédures au client	<input type="text"/>	<input type="text"/>
39 Maintenir la sonde d'alimentation percutanée	<input type="text"/>	<input type="text"/>
40 Reconnaître les tendances et les changements dans l'état du client et intervenir selon les besoins	<input type="text"/>	<input type="text"/>
41 Exécuter les procédures de soins d'urgence	<input type="text"/>	<input type="text"/>
42 Aider aux procédures invasives (p. ex., lignes centrales, thoracentèse, bronchoscopie)	<input type="text"/>	<input type="text"/>
43 Effectuer et gérer les soins des clients qui reçoivent une dialyse péritonéale	<input type="text"/>	<input type="text"/>
44 Gérer les soins d'un client sous télésurveillance	<input type="text"/>	<input type="text"/>
45 Mettre en place et surveiller la photothérapie	<input type="text"/>	<input type="text"/>
46 Gérer les soins du client qui a un déséquilibre hydro-électrolytique	<input type="text"/>	<input type="text"/>

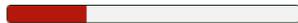
47 Reconnaître la pathophysiologie liée à une affection aiguë ou chronique

48 Donner des explications à un client sur une affection aiguë ou chronique

49. Dans quelle mesure le sondage couvre-t-il les activités importantes qu'une infirmière ou un infirmier nouvellement immatriculé(e)/autorisé(e) devrait connaître, indépendamment de son champ de pratique?

- Très bien
- Bien
- Suffisamment
- Insuffisamment

50. Veuillez citer les activités importantes qui, à votre avis, sont manquantes dans le sondage

 27%

Page précédente

Continuer à la page suivante



RN 2017-1 FR

SECTION 2 : EXPÉRIENCE ET ORIENTATION

1. Depuis combien de mois travaillez-vous comme II/IA au Canada? Veuillez entrer un nombre entier positif (p. ex., 20).

Mois :

2a. Avez-vous déjà travaillé comme II/IA hors du Canada?

- Oui
- Non

 32%

Page précédente

Continuer à la page suivante

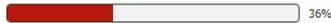


RN 2017-1 FR

SECTION 2 : EXPÉRIENCE ET ORIENTATION

2b. Si oui, combien de mois au total avez-vous travaillé comme II/IA hors du Canada? Veuillez entrer un nombre entier positif (p. ex., 7).

Mois :



Page précédente

Continuer à la page suivante



RN 2017-1 FR

SECTION 2 : EXPÉRIENCE ET ORIENTATION

3. Lequel des énoncés suivants décrit le **mieux** l'orientation que vous avez reçue dans vos fonctions actuelles? (**Sélectionnez un SEUL énoncé**)

- Aucune orientation officielle
- Enseignement en classe/laboratoire sur les compétences uniquement
- Enseignement en classe/laboratoire sur les compétences, plus du travail supervisé auprès des clients
- Travail auprès d'un ou de plusieurs précepteurs ou mentors désignés, avec ou sans travail en classe ou laboratoire sur les compétences en plus
- Stage formel/résidence, avec ou sans travail en classe ou laboratoire sur les compétences en plus
- Autre, veuillez préciser:



Page précédente

Continuer à la page suivante



RN 2017-1 FR

SECTION 2 : EXPÉRIENCE ET ORIENTATION

4. Si vous avez eu une période d'orientation, combien de semaines a-t-elle duré? Veuillez entrer un nombre entier positif (p. ex., 10).

Semaines :


[Page précédente](#)
[Continuer à la page suivante](#)


RN 2017-1 FR

SECTION 2 : EXPÉRIENCE ET ORIENTATION

5. Parmi les cours suivants, quels sont ceux pour lesquels vous avez obtenu un certificat ou que vous avez terminés depuis que vous avez fini vos cours en sciences infirmières? (**Sélectionnez TOUTES les réponses qui s'appliquent**)

- Aucun
- Chimiothérapie
- Dialyse péritonéale
- Gestion du comportement
- Intraveino-thérapie
- Phlébotomie
- Réadaptation
- Réanimation néonatale
- Sédation consciente/modérée
- Soins coronariens
- Soins de base
- Soins intensifs
- Soins néonataux avancés
- Soins pédiatriques avancés
- Technique spécialisée de réanimation cardiorespiratoire
- Autre, veuillez préciser :


[Page précédente](#)
[Continuer à la page suivante](#)

**RN 2017-1 FR****SECTION 2 : EXPÉRIENCE ET ORIENTATION**

6a. Assumez-vous régulièrement des responsabilités administratives dans vos fonctions d'infirmière/infirmier (p. ex., gestionnaire d'unité, chef d'équipe, infirmière/infirmier responsable, coordonnatrice/coordonnateur)?

- Oui
 Non

[Page précédente](#)[Continuer à la page suivante](#)**RN 2017-1 FR****SECTION 2 : EXPÉRIENCE ET ORIENTATION**

6b. Si oui, s'agit-il de votre fonction principale?

- Oui
 Non

[Page précédente](#)[Continuer à la page suivante](#)



RN 2017-1 FR

SECTION 3 : MILIEU DE TRAVAIL

1. Lesquels des choix suivants décrivent le **mieux** la **plupart** de vos clients lors de votre dernière journée de travail? (**Sélectionnez TOUTES les réponses qui s'appliquent**)

- Clients en bonne santé, possiblement atteints d'affections mineures
- Clientes nécessitant des soins obstétricaux (maternité)
- Clients atteints d'affections chroniques stabilisées
- Clients atteints d'affections chroniques non stabilisées
- Clients atteints d'affections aiguës, y compris les clients atteints de troubles médicaux, chirurgicaux ou critiques
- Clients en fin de vie
- Clients qui ont des troubles du comportement/émotionnels
- Autre, veuillez préciser :

2. Lesquels des choix suivants décrivent le **mieux** les âges de la **plupart** de vos clients lors de votre dernière journée de travail? (**Sélectionnez TOUTES les réponses qui s'appliquent**)

- Nouveaux-nés (moins de 1 mois)
- Nourrissons/trottineurs (1 mois à 2 ans)
- Âge préscolaire (3 à 5 ans)
- Âge scolaire (6 à 12 ans)
- Adolescents (13 à 17 ans)
- Adultes (18 à 64 ans)
- Adultes (65 à 85 ans)
- Adultes (plus de 85 ans)

3. Lesquels des choix suivants décrivent le **mieux** votre milieu de travail/domaine de spécialité **lors de votre dernière journée de travail**? Si vous avez travaillé essentiellement dans un milieu de travail, remplissez l'ovale approprié correspondant à ce milieu de travail. Si vous avez travaillé dans plus d'un milieu de travail, remplissez l'ovale approprié correspondant à tous ces milieux de travail dans lesquels vous avez passé au moins la moitié de votre temps. (**Ne sélectionnez pas plus de DEUX réponses**)

- | | |
|--|---|
| <input type="checkbox"/> Soins intensifs (p. ex., unité de soins intensifs, CCU, unités de soins courants, soins intensifs pédiatriques/néonataux, service des urgences, salle de réveil après anesthésia) | <input type="checkbox"/> Unité de soins pour affections subaiguës |
| <input type="checkbox"/> Services médicaux-chirurgicaux ou n'importe laquelle de leurs sous-spécialités (p. ex., oncologie, orthopédie, neurologie) | <input type="checkbox"/> Unité de soins transitoires |
| <input type="checkbox"/> Pédiatrie | <input type="checkbox"/> II/IA ou infirmière/infirmier praticien(ne) (IP) dans un cabinet médical, un service de soins avancés ou un cabinet dentaire |
| <input type="checkbox"/> Pouponnière | <input type="checkbox"/> Santé au travail |
| <input type="checkbox"/> Maternité | <input type="checkbox"/> Clinique de patients externes |
| <input type="checkbox"/> Services de soins postpartum | <input type="checkbox"/> Soins à domicile, y compris les associations d'infirmières/infirmiers visiteuses/visiteurs |
| <input type="checkbox"/> Psychiatrie ou n'importe laquelle de ses sous-spécialités (p. ex. désintoxication) | <input type="checkbox"/> Santé publique |
| <input type="checkbox"/> Soins dans un établissement de logements avec assistance | <input type="checkbox"/> Service de santé des étudiants/écoles |
| <input type="checkbox"/> Salle d'opération, y compris opérations de patients externes et centres de services chirurgicaux | <input type="checkbox"/> Soins de fin de vie |
| <input type="checkbox"/> Maison de soins infirmiers, soins de qualité ou soins intermédiaires | <input type="checkbox"/> Prison/établissement correctionnel |
| <input type="checkbox"/> Autres soins de longue durée (p. ex., soins en établissement, en déficience développementale) | <input type="checkbox"/> Courts séjours/observation |
| <input type="checkbox"/> Réadaptation | <input type="checkbox"/> Soins intermédiaires/progressifs |
| <input type="checkbox"/> Autre, veuillez préciser : | |

4. Lequel des types d'établissement/organisation suivants décrit le **mieux** celui dans lequel se situe votre milieu de travail/domaine de spécialité? (**Sélectionnez une SEULE réponse**)

- Hôpital
- Établissement de soins de longue durée
- Établissement/organisation de soins communautaires/ambulatoires (y compris service de santé publique, association d'infirmières/infirmiers visiteuses/visiteurs, soins à domicile, médecin/II/IA dans un service de soins avancés/infirmière/infirmier praticien(ne) (IP)//cabinet dentaire, clinique, école, prison, etc.)
- Autre, veuillez préciser :

5. Si vous travaillez dans un hôpital ou une maison de soins infirmiers, quelle est sa capacité? (**Sélectionnez une SEULE réponse**)

- Moins de 50 lits
- 50 à 99 lits
- 100 à 299 lits
- 300 à 499 lits
- 500 lits ou plus
- Je ne sais pas
- Je ne travaille ni dans un hôpital ni dans une maison de soins infirmiers

6. Lequel choix suivants décrit le **mieux** votre quart de travail **au cours d'une journée de travail typique**? (**Sélectionnez une SEULE réponse**)

- Journée
- Soirée
- Nuit
- Quart rotatif
- Autre, veuillez préciser :

7. Quelle est la durée de votre quart de travail **au cours d'une journée de travail typique**?

- 8 heures
- 10 heures
- 12 heures
- Horaires variables 8 et 12 heures
- Autre, veuillez préciser :

8. Lequel des choix suivants décrit le **mieux** le lieu de votre emploi?

- Zone urbaine/métropolitaine
- Banlieue
- Zone rurale

 64%

Page précédente

Continuer à la page suivante

RN 2017-1 FR

SECTION 4: DESCRIPTION DE VOTRE DERNIÈRE JOURNÉE DE TRAVAIL

1. Pendant combien d'heures avez-vous travaillé lors de votre dernier quart de travail? Veuillez entrer uniquement un nombre entier positif, arrondi (p. ex., 20).

Heures :

2. De combien de clients étiez-vous responsable lors de votre dernière journée de travail? Cela comprend les clients auxquels vous étiez affecté(e) pour fournir des soins directs, indirects (par l'intermédiaire d'autres personnes telles que les infirmières ou infirmiers auxiliaires immatriculé(e)s/autorisé(e)s [RPN/LPN] ou le personnel suppléant non immatriculé) ou pour assumer toute tâche ou autre responsabilité en matière de soins pendant toute votre journée de travail ou une partie de la journée dans votre milieu de travail. Veuillez entrer uniquement un nombre entier positif, arrondi (p. ex., 5).

Nombre de clients :

3. Combien de temps avez-vous passé à exécuter chacun des types suivants d'activités lors de votre dernière journée de travail? Pour chacun des ensembles d'activités, veuillez noter le temps approximatif que vous avez passé à exécuter ce type d'activité lors de votre dernière journée de travail en arrondissant à l'heure la plus proche. Par exemple, si vous avez passé 2 heures ¼ à exécuter un ensemble d'activités, sélectionnez l'option « 2 ». Si vous avez passé 3 heures ¾ à exécuter un ensemble d'activités, sélectionnez l'option « 4 ». De nombreuses catégories peuvent être exécutées simultanément; par conséquent, le nombre total des heures passées pourrait être supérieur au nombre total des heures de votre quart de travail.

Ensembles d'activités

Temps total approximatif (en heures) passé à l'exécution de l'ensemble d'activités

0 1 2 3 4 5 6 7 8 >8

1. Gestion des soins : Fournir et diriger des soins infirmiers qui rehaussent le milieu de prestation de soins afin de protéger les clients et le personnel soignant.

2. Sécurité et prévention des infections : Protéger les clients et le personnel soignant contre les dangers pour la santé et l'environnement.

3. Promotion et maintien de la santé : Fournir et diriger des soins infirmiers directs au client en incorporant les connaissances des principes de croissance et de développement attendus, la prévention et/ou la détection précoce des problèmes de santé ainsi que des stratégies pour obtenir une santé optimale.

4. Intégrité psychologique : Fournir et diriger des soins infirmiers qui encouragent et appuient le bien-être émotionnel, mental et social du client qui vit des événements stressants et des clients atteints d'une maladie mentale aiguë ou chronique.

5. Soins fondamentaux et confort : Assurer le confort et fournir de l'aide dans le cadre de l'exécution des activités de la vie quotidienne.

6. Thérapies pharmacologiques et parentérales : Fournir des soins liés à l'administration de thérapies médicamenteuses et parentérales.

7. Réduction du risque potentiel : Réduire la probabilité que les clients développent des complications ou des problèmes de santé liés aux affections, aux traitements et aux procédures existants.

8. Adaptation physiologique : Gérer et fournir des soins aux clients atteints d'affections aiguës, chroniques ou qui mettent leur vie en danger.

 68%

Page précédente

Continuer à la page suivante

**RN 2017-1 FR****SECTION 5 : DONNÉES DÉMOGRAPHIQUES**

Dans cette section, on vous demande de fournir des renseignements généraux qui seront résumés pour décrire le groupe qui a répondu au sondage. Aucune réponse individuelle ne sera communiquée.

1a. Avez-vous travaillé comme employé suppléant non immatriculé/autorisé avant de devenir II/IA?

Oui

Non



Page précédente

Continuer à la page suivante

**RN 2017-1 FR****SECTION 5 : DONNÉES DÉMOGRAPHIQUES**

1b. Si oui, pendant combien d'années et de mois? Veuillez entrer des nombres entiers positifs (p. ex., 10).

Années :

Mois :



Page précédente

Continuer à la page suivante



RN 2017-1 FR

SECTION 5 : DONNÉES DÉMOGRAPHIQUES

2a. Avez-vous travaillé comme infirmier/Infirmière auxiliaire immatriculé(e)/autorisé(e) (RPN/LPN) avant de devenir II/IA?

- Oui
 Non



Page précédente

Continuer à la page suivante



RN 2017-1 FR

SECTION 5 : DONNÉES DÉMOGRAPHIQUES

2b. Si oui, pendant combien d'années et de mois? Veuillez entrer des nombres entiers positifs (p. ex., 10).

Années :

Mois :



Page précédente

Continuer à la page suivante



RN 2017-1 FR

SECTION 5 : DONNÉES DÉMOGRAPHIQUES

3. De quel sexe êtes-vous?

- Masculin
 Féminin

4. Quel âge avez-vous? Veuillez répondre en donnant un nombre entier positif (p. ex., 35).

Age :

5. Lequel des choix suivants **décrit le mieux** votre origine raciale/ethnique? (**Sélectionnez une SEULE réponse**)

- Indien de l'Amérique du Nord
- Métis
- Inuit
- Blanc
- Chinois
- Sud-asiatique (p. ex., des Indes orientales, du Pakistan, du Sri Lanka, etc.)
- Noir
- Philippin
- Latino-Américain
- Asiatique du Sud-Est (p. ex., Vietnamien, Cambodgien, Malaisien, Laotien, etc.)
- Arabe
- Asiatique de l'Ouest (p. ex., Iranien, Afghan, etc.)
- Coréen
- Japonais
- Autre

6. Quelle est votre langue maternelle?

- Anglais
- Français
- Anglais et une autre langue
- Français et une autre langue
- Une autre langue

7. Quel type de programme de sciences infirmières de **base** vous a qualifié(e) pour vous présenter à l'examen NCLEX-RN? (**Sélectionnez une SEULE réponse**)

- II/IA - Baccalauréat au Canada
- II/IA - Maîtrise de base au Canada
- II/IA - Doctorat de base au Canada (p. ex., en naturopathie)
- N'importe quel programme de sciences infirmières NON canadien
- Maîtrise de base en cours
- Autre programme (veuillez préciser) :

8. Depuis combien de mois avez-vous terminé les études en sciences infirmières ci-dessus? Veuillez entrer un nombre entier positif (p. ex., 15).

Mois :

 91%

Page précédente

Continuer à la page suivante



RN 2017-1 FR

SECTIONS 6 : COMMENTAIRES

Nous pourrions communiquer avec certains participants par téléphone ou par courriel si nous avons besoin de renseignements supplémentaires pour clarifier les résultats de cette étude. Si vous souhaitez répondre à quelques questions supplémentaires par téléphone ou par courriel, veuillez fournir l'adresse de courriel et le numéro de téléphone auquel nous pouvons vous joindre pendant la journée ou en début de soirée.

Nom :

Numéro de téléphone avec l'indicatif régional pour vous joindre pendant la journée ou en début de soirée :

Adresse de courriel :

Vous pouvez inscrire les commentaires ou suggestions que vous souhaitez faire dans l'espace ci-dessous.

95%

Page précédente

Continuer à la page suivante



RN 2017-1 FR

Merci!

Merci de votre participation à cette importante étude.

Pour finaliser votre sondage, cliquant sur le lien [Soumettre le sondage](#) ci-dessous.

100%

Page précédente

Soumettre le sondage

Web French Form 2



RN 2017-2 FR

INSTRUCTIONS

Ce sondage est mené par le National Council of State Boards of Nursing (NCSBN) au nom de votre organisme de réglementation. Il fait partie d'une étude approfondie sur les activités professionnelles des infirmières/infirmiers nouvellement immatriculés/autorisés dans les régions canadiennes utilisant l'examen NCLEX® pour prendre les décisions sur l'attribution de l'autorisation d'exercer depuis 2017. Veuillez remplir et retourner le présent formulaire dès que possible. C'est l'occasion pour vous de contribuer au développement de l'examen NCLEX-RN® auquel les futur(e)s candidat(e)s se présenteront.

Instructions :

Veuillez lire attentivement chaque question et répondre en remplissant l'ovale de l'option qui se rapproche le plus de votre réponse. Choisissez la réponse qui correspond le mieux à l'exercice de votre profession et remplissez l'ovale ou les ovales approprié(s). Quelques questions vous demandent d'écrire l'information. Veuillez écrire lisiblement votre réponse dans l'espace prévu.

Vous remarquerez que de nombreuses questions vous demandent d'indiquer ce que vous avez fait lors de votre dernière journée de travail. Il est important que nous obtenions l'information du personnel infirmier dont certaines journées de travail sont typiques et d'autres inhabituelles; veuillez donc répondre aux questions en fonction de ce que vous avez fait lors de votre dernière journée de travail, même s'il ne s'agissait pas d'une journée typique.

Au sens de ce sondage, le « **client** » peut être une personne, un membre de la famille ou un groupe qui comprend les partenaires et des membres de la population. Le terme « client » a le même sens que « résident » ou « patient ». Vos réponses seront traitées de façon confidentielle et aucune de vos réponses individuelles aux questions ne sera divulguée.

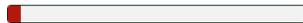
Progression du sondage :

Pour progresser tout au long du sondage, veuillez utiliser les boutons de navigation situés au bas de chaque page :

Continuez à la page suivante du sondage en cliquant sur le lien Continuer à la page suivante.

Revenez à la page précédente du sondage en cliquant sur le lien Page précédente. Cela vous permettra de revenir en arrière dans le sondage pour revoir les réponses précédentes.

Finissez le sondage en cliquant sur le lien Soumettre le sondage sur la page Merci.

 5%

Continuer à la page suivante



RN 2017-2 FR

INTRODUCTION

1. Quel(s) type(s) de permis d'exercer la profession infirmière détenez-vous? (**Sélectionnez TOUTES les réponses qui s'appliquent**)

- Infirmière/infirmier immatriculé(e)/autorisé(e) (II/IA)
 Infirmière/infirmier auxiliaire immatriculé(e)/autorisé(e) (RPN/LPN)

 9%

Page précédente

Continuer à la page suivante



RN 2017-2 FR

INTRODUCTION

2. Quel(le) est votre province/territoire d'immatriculation/autorisation?

- Alberta
- Colombie-Britannique
- Île du Prince Édouard
- Manitoba
- Nouveau-Brunswick
- Nouvelle-Écosse
- Ontario
- Québec
- Saskatchewan
- Terre-Neuve-et-Labrador
- Territoires du Nord-Ouest et Nuvaunut
- Yukon

3. Travaillez-vous actuellement comme II/IA au Canada?

- Oui
- Non



Page précédente

Continuer à la page suivante



RN 2017-2 FR

INTRODUCTION

4. Dans le cadre de vos fonctions actuelles, fournissez-vous des soins directs aux clients? Remarque : Les activités cliniques d'un(e) étudiant(e) supervisées par un membre du corps professoral ne sont pas considérées comme des « soins directs ».

- Oui, 20 heures ou plus par semaine, en moyenne
- Oui, moins de 20 heures par semaine, en moyenne
- Non



Page précédente

Continuer à la page suivante



RN 2017-2 FR

SECTION 1 : ACTIVITÉS DE SOINS INFIRMIERS

Cette section comprend une liste des activités décrivant la pratique des soins infirmiers dans différents environnements. Veuillez noter que certaines activités pourraient ne pas s'appliquer à votre milieu de travail.

Pour chaque activité, deux questions sont posées. Veuillez répondre aux deux questions.

QUESTION A – FRÉQUENCE : Si l'activité est exécutée dans votre milieu de travail, à quelle fréquence (0 fois, 1 fois, 2 fois, 3 fois, 4 fois ou 5 fois+) avez-vous exécuté personnellement cette activité au cours de votre dernière journée de travail? Si elle n'est jamais exécutée dans votre milieu de travail ou n'est pas applicable, sélectionnez « JAMAIS exécutée dans le milieu de travail », puis répondez à la Question B - Importance.

QUESTION B – IMPORTANCE : Dans quelle mesure est-il important d'exécuter cette activité de soins infirmiers du point de vue de la sécurité du client? Évaluez l'importance du point de vue du risque de complications inutiles, d'invalidité fonctionnelle, ou d'une grande détresse pour les clients. Notez toutes les activités.

REMARQUE : L'inclusion d'une activité dans ce sondage d'analyse de la pratique ne signifie pas que cette activité est ou serait incluse dans le champ de pratique des II/IA défini par une province ou un territoire spécifique. Pour obtenir de l'information sur votre champ de pratique, veuillez vous adresser à votre organisme de réglementation local.

Question A – FRÉQUENCE – Si une activité ne s'applique pas à votre milieu de travail, indiquez « Jamais exécutée dans le milieu de travail », sélectionnez quand même la note de l'importance, tel qu'indiqué dans la Question B, puis passez à l'activité suivante. Si l'activité est exécutée dans votre milieu de travail, donnez une note de 0 à 5+ reflétant la fréquence à laquelle vous l'avez exécutée lors de votre dernier jour de travail, puis répondez à la Question B.

Question B – IMPORTANCE – Notez l'importance globale de cette activité du point de vue de la sécurité et/ou du risque de complications inutiles ou de détresse pour le client, comme suit : 1 = Non important, 2 = Légèrement important, 3 = Modérément important, 4 = Important, 5 = Très important.

	A - FRÉQUENCE	B - IMPORTANCE
1 Assurer et recevoir le transfert des soins (rapport) concernant les clients attribués	<input type="text"/>	<input type="text"/>
2 Établir les priorités de la fourniture des soins aux clients	<input type="text"/>	<input type="text"/>
3 Recevoir et transcrire les prescriptions des prestataires de soins de santé	<input type="text"/>	<input type="text"/>
4 Faire connaître aux clients et au personnel les droits et les responsabilités du client	<input type="text"/>	<input type="text"/>
5 Maintenir la confidentialité des renseignements sur le client et le respect de sa vie privée	<input type="text"/>	<input type="text"/>
6 Gérer les litiges parmi les clients et le personnel des soins de santé	<input type="text"/>	<input type="text"/>
7 Utiliser les abréviations approuvées et la terminologie courante lors de la documentation des soins	<input type="text"/>	<input type="text"/>
8 Fournir des soins dans le champ d'exercice légal	<input type="text"/>	<input type="text"/>
9 Protéger le client des blessures (p. ex., chutes, dangers électriques)	<input type="text"/>	<input type="text"/>
10 Suivre le plan et les procédures de sécurité (p. ex., sécurité de la pouponnière, violence, accès contrôlé)	<input type="text"/>	<input type="text"/>
11 S'assurer d'identifier correctement le client lors de la fourniture des soins	<input type="text"/>	<input type="text"/>
12 Participer aux plans d'intervention en cas d'urgence (p. ex., catastrophe interne/externe, menace de bombe, planification communautaire)	<input type="text"/>	<input type="text"/>

13 Évaluer le client pour dépister les allergies et agir selon les besoins (p. ex., allergies à certains aliments, au latex, allergies environnementales)	<input type="text"/>	<input type="text"/>
14 Planifier et/ou participer à l'enseignement communautaire sur la santé	<input type="text"/>	<input type="text"/>
15 Sensibiliser le client en matière de promotion de la santé et lui faire des recommandations de maintenance (p. ex., visites médicales, immunisations)	<input type="text"/>	<input type="text"/>
16 Évaluer la faculté du client à apprendre, ses préférences en matière d'apprentissage et les obstacles à l'apprentissage	<input type="text"/>	<input type="text"/>
17 Prodiguer des soins et de l'enseignement pour les clients de 18 à 64 ans	<input type="text"/>	<input type="text"/>
18 Évaluer et développer les connaissances du client sur les risques pour la santé en fonction des caractéristiques familiales, communautaires et de la population	<input type="text"/>	<input type="text"/>
19 Évaluer le client pour détecter les abus ou les négligences éventuels et intervenir selon le cas	<input type="text"/>	<input type="text"/>
20 Promouvoir un environnement thérapeutique	<input type="text"/>	<input type="text"/>
21 Évaluer le potentiel de violence et prendre les mesures de sécurité voulues	<input type="text"/>	<input type="text"/>
22 Prodiguer des soins à un client qui vit un deuil ou une perte	<input type="text"/>	<input type="text"/>
23 Reconnaître les signes non verbaux aux stressseurs physiques et/ou psychologiques	<input type="text"/>	<input type="text"/>
24 Alimenter le client par sonde	<input type="text"/>	<input type="text"/>
25 Aider le client à compenser sa déficience physique ou sensorielle (p. ex., appareils et accessoires fonctionnels, positionnement, techniques compensatrices)	<input type="text"/>	<input type="text"/>

 23%

[Page précédente](#)

[Continuer à la page suivante](#)



RN 2017-2 FR

SECTION 1 : ACTIVITÉS DE SOINS INFIRMIERS

Question A – FRÉQUENCE – Si une activité ne s'applique pas à votre milieu de travail, indiquez « Jamais exécutée dans le milieu de travail », sélectionnez quand même la note de l'importance, tel qu'indiqué dans la Question B, puis passez à l'activité suivante. Si l'activité est exécutée dans votre milieu de travail, donnez une note de 0 à 5+ reflétant la fréquence à laquelle vous l'avez exécutée lors de votre dernier jour de travail, puis répondez à la Question B.

Question B – IMPORTANCE – Notez l'importance globale de cette activité du point de vue de la sécurité et/ou du risque de complications inutiles ou de détresse pour le client, comme suit : 1 = Non important, 2 = Légèrement important, 3 = Modérément important, 4 = Important, 5 = Très important.

	A - FRÉQUENCE	B - IMPORTANCE
26 Appliquer, maintenir ou retirer les appareils orthopédiques	<input type="text"/>	<input type="text"/>
27 Évaluer la structure de sommeil/repos du client et intervenir au besoin	<input type="text"/>	<input type="text"/>
28 Évaluer le client pour détecter les douleurs et intervenir selon le cas	<input type="text"/>	<input type="text"/>
29 Préparer et administrer les médicaments conformément aux droits d'administration des médicaments	<input type="text"/>	<input type="text"/>
30 Manipuler et/ou administrer les substances réglementées conformément aux directives de réglementation	<input type="text"/>	<input type="text"/>
31 Doser le médicament en se basant sur l'évaluation et les paramètres prescrits	<input type="text"/>	<input type="text"/>
32 Fournir au client les explications sur ses médicaments	<input type="text"/>	<input type="text"/>
33 Administrer les médicaments pour la gestion de la douleur	<input type="text"/>	<input type="text"/>
34 Évaluer les changements et/ou les tendances du client en matière de signes vitaux et y répondre	<input type="text"/>	<input type="text"/>
35 Exécuter les tests de diagnostic (p. ex., électrocardiogramme, saturation en oxygène, surveillance de la glycémie)	<input type="text"/>	<input type="text"/>
36 Prodiguer les soins préopératoires	<input type="text"/>	<input type="text"/>
37 Obtenir des échantillons sanguins (p. ex., veinopuncture, dispositif d'accès aux voies veineuses centrales, cathéter central)	<input type="text"/>	<input type="text"/>
38 Obtenir des échantillons autres que sanguins pour les tests de diagnostic (p. ex., plaie, selles, urine)	<input type="text"/>	<input type="text"/>
39 Insérer, maintenir ou retirer une sonde urinaire	<input type="text"/>	<input type="text"/>
40 Appliquer et/ou maintenir les dispositifs utilisés pour favoriser le retour veineux (p. ex., bas anti-embolie, dispositifs de compression séquentielle)	<input type="text"/>	<input type="text"/>
41 Assurer la surveillance et les soins des clients ventilo-assistés	<input type="text"/>	<input type="text"/>
42 Fournir les soins de stomie et/ou l'enseignement connexe (p. ex., trachéal, entéral)	<input type="text"/>	<input type="text"/>
43 Exécuter une aspiration	<input type="text"/>	<input type="text"/>
44 Gérer les soins d'un client dont la capacité de ventilation/d'oxygénation est déficiente	<input type="text"/>	<input type="text"/>

45 Gérer les soins d'un client qui a un rythme cardiaque

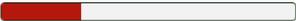
46 Gérer les soins d'un client qui a une altération hémodynamique, de l'irrigation des tissus et/ou de l'hémostase

47 Gérer les soins d'un client qui reçoit une hémodialyse ou une thérapie de substitution rénale continue

48. Dans quelle mesure le sondage couvre-t-il les activités importantes qu'une infirmière ou un infirmier nouvellement immatriculé(e)/autorisé(e) devrait connaître, indépendamment de son champ de pratique?

- Très bien
- Bien
- Suffisamment
- Insuffisamment

49. Veuillez citer les activités importantes qui, à votre avis, sont manquantes dans le sondage

 27%

Page précédente

Continuer à la page suivante



RN 2017-2 FR

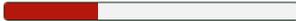
SECTION 2 : EXPÉRIENCE ET ORIENTATION

1. Depuis combien de mois travaillez-vous comme II/IA au Canada? Veuillez entrer un nombre entier positif (p. ex., 20).

Mois :

2a. Avez-vous déjà travaillé comme II/IA hors du Canada?

- Oui
- Non

 32%

Page précédente

Continuer à la page suivante

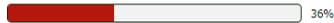


RN 2017-2 FR

SECTION 2 : EXPÉRIENCE ET ORIENTATION

2b. Si oui, combien de mois au total avez-vous travaillé comme II/IA hors du Canada? Veuillez entrer un nombre entier positif (p. ex., 7).

Mois :



Page précédente

Continuer à la page suivante

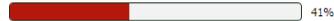


RN 2017-2 FR

SECTION 2 : EXPÉRIENCE ET ORIENTATION

3. Lequel des énoncés suivants décrit le **mieux** l'orientation que vous avez reçue dans vos fonctions actuelles? (**Sélectionnez un SEUL énoncé**)

- Aucune orientation officielle
- Enseignement en classe/laboratoire sur les compétences uniquement
- Enseignement en classe/laboratoire sur les compétences, plus du travail supervisé auprès des clients
- Travail auprès d'un ou de plusieurs précepteurs ou mentors désignés, avec ou sans travail en classe ou laboratoire sur les compétences en plus
- Stage formel/résidence, avec ou sans travail en classe ou laboratoire sur les compétences en plus
- Autre, veuillez préciser :



Page précédente

Continuer à la page suivante

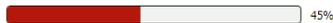


RN 2017-2 FR

SECTION 2 : EXPÉRIENCE ET ORIENTATION

4. Si vous avez eu une période d'orientation, combien de semaines a-t-elle duré? Veuillez entrer un nombre entier positif (p. ex., 10).

Semaines :



Page précédente

Continuer à la page suivante



RN 2017-2 FR

SECTION 2 : EXPÉRIENCE ET ORIENTATION

5. Parmi les cours suivants, quels sont ceux pour lesquels vous avez obtenu un certificat ou que vous avez terminés depuis que vous avez fini vos cours en sciences infirmières? (**Sélectionnez TOUTES les réponses qui s'appliquent**)

- Aucun
- Chimiothérapie
- Dialyse péritonéale
- Gestion du comportement
- Intraveino-thérapie
- Phlébotomie
- Réadaptation
- Réanimation néonatale
- Sédation consciente/modérée
- Soins coronariens
- Soins de base
- Soins intensifs
- Soins néonataux avancés
- Soins pédiatriques avancés
- Technique spécialisée de réanimation cardiorespiratoire
- Autre, veuillez préciser :



Page précédente

Continuer à la page suivante

**RN 2017-2 FR****SECTION 2 : EXPÉRIENCE ET ORIENTATION**

6a. Assumez-vous régulièrement des responsabilités administratives dans vos fonctions d'infirmière/infirmier (p. ex., gestionnaire d'unité, chef d'équipe, infirmière/infirmier responsable, coordonnatrice/coordonnateur)?

- Oui
 Non

[Page précédente](#)[Continuer à la page suivante](#)**RN 2017-2 FR****SECTION 2 : EXPÉRIENCE ET ORIENTATION**

6b. Si oui, s'agit-il de votre fonction principale?

- Oui
 Non

[Page précédente](#)[Continuer à la page suivante](#)

RN 2017-2 FR
SECTION 3 : MILIEU DE TRAVAIL

1. Lesquels des choix suivants décrivent le **mieux** la **plupart** de vos clients lors de votre dernière journée de travail? (**Sélectionnez TOUTES les réponses qui s'appliquent**)

- Clients en bonne santé, possiblement atteints d'affections mineures
- Clientes nécessitant des soins obstétricaux (maternité)
- Clients atteints d'affections chroniques stabilisées
- Clients atteints d'affections chroniques non stabilisées
- Clients atteints d'affections aiguës, y compris les clients atteints de troubles médicaux, chirurgicaux ou critiques
- Clients en fin de vie
- Clients qui ont des troubles du comportement/émotionnels
- Autre, veuillez préciser :

2. Lesquels des choix suivants décrivent le **mieux** les âges de la **plupart** de vos clients lors de votre dernière journée de travail? (**Sélectionnez TOUTES les réponses qui s'appliquent**)

- Nouveaux-nés (moins de 1 mois)
- Nourrissons/trottineurs (1 mois à 2 ans)
- Âge préscolaire (3 à 5 ans)
- Âge scolaire (6 à 12 ans)
- Adolescents (13 à 17 ans)
- Adultes (18 à 64 ans)
- Adultes (65 à 85 ans)
- Adultes (plus de 85 ans)

3. Lesquels des choix suivants décrivent le **mieux** votre milieu de travail/domaine de spécialité **lors de votre dernière journée de travail**? Si vous avez travaillé essentiellement dans un milieu de travail, remplissez l'ovale approprié correspondant à ce milieu de travail. Si vous avez travaillé dans plus d'un milieu de travail, remplissez l'ovale approprié correspondant à tous ces milieux de travail dans lesquels vous avez passé au moins la moitié de votre temps. (**Ne sélectionnez pas plus de DEUX réponses**)

- | | |
|--|---|
| <input type="checkbox"/> Soins intensifs (p. ex., unité de soins intensifs, CCU, unités de soins courants, soins intensifs pédiatriques/néonataux, service des urgences, salle de réveil après anesthesia) | <input type="checkbox"/> Unité de soins pour affections subaiguës |
| <input type="checkbox"/> Services médicaux-chirurgicaux ou n'importe laquelle de leurs sous-spécialités (p. ex., oncologie, orthopédie, neurologie) | <input type="checkbox"/> Unité de soins transitoires |
| <input type="checkbox"/> Pédiatrie | <input type="checkbox"/> II/IA ou infirmière/infirmier praticien(ne) (IP) dans un cabinet médical, un service de soins avancés ou un cabinet dentaire |
| <input type="checkbox"/> Pouponnière | <input type="checkbox"/> Santé au travail |
| <input type="checkbox"/> Maternité | <input type="checkbox"/> Clinique de patients externes |
| <input type="checkbox"/> Services de soins postpartum | <input type="checkbox"/> Soins à domicile, y compris les associations d'infirmières/infirmiers visiteuses/visiteurs |
| <input type="checkbox"/> Psychiatrie ou n'importe laquelle de ses sous-spécialités (p. ex. désintoxication) | <input type="checkbox"/> Santé publique |
| <input type="checkbox"/> Soins dans un établissement de logements avec assistance | <input type="checkbox"/> Service de santé des étudiants/écoles |
| <input type="checkbox"/> Salle d'opération, y compris opérations de patients externes et centres de services chirurgicaux | <input type="checkbox"/> Soins de fin de vie |
| <input type="checkbox"/> Maison de soins infirmiers, soins de qualité ou soins intermédiaires | <input type="checkbox"/> Prison/établissement correctionnel |
| <input type="checkbox"/> Autres soins de longue durée (p. ex., soins en établissement, en déficience développementale) | <input type="checkbox"/> Courts séjours/observation |
| <input type="checkbox"/> Réadaptation | <input type="checkbox"/> Soins intermédiaires/progressifs |
| <input type="checkbox"/> Autre, veuillez préciser : | |

4. Lequel des types d'établissement/organisation suivants décrit le **mieux** celui dans lequel se situe votre milieu de travail/domaine de spécialité? **(Sélectionnez une SEULE réponse)**

- Hôpital
- Établissement de soins de longue durée
- Établissement/organisation de soins communautaires/ambulatoires (y compris service de santé publique, association d'infirmières/infirmiers visiteuses/visiteurs, soins à domicile, médecin/II/IA dans un service de soins avancés/infirmière/infirmier praticien(ne) (IP)//cabinet dentaire, clinique, école, prison, etc.)
- Autre, veuillez préciser :

5. Si vous travaillez dans un hôpital ou une maison de soins infirmiers, quelle est sa capacité? **(Sélectionnez une SEULE réponse)**

- Moins de 50 lits
- 50 à 99 lits
- 100 à 299 lits
- 300 à 499 lits
- 500 lits ou plus
- Je ne sais pas
- Je ne travaille ni dans un hôpital ni dans une maison de soins infirmiers

6. Lequel choix suivants décrit le **mieux** votre quart de travail **au cours d'une journée de travail typique**? **(Sélectionnez une SEULE réponse)**

- Journée
- Soirée
- Nuit
- Quart rotatif
- Autre, veuillez préciser :

7. Quelle est la durée de votre quart de travail **au cours d'une journée de travail typique**?

- 8 heures
- 10 heures
- 12 heures
- Horaires variables 8 et 12 heures
- Autre, veuillez préciser :

8. Lequel des choix suivants décrit le **mieux** le lieu de votre emploi?

- Zone urbaine/métropolitaine
- Banlieue
- Zone rurale

 64%

Page précédente

Continuer à la page suivante

RN 2017-2 FR

SECTION 4 : DESCRIPTION DE VOTRE DERNIÈRE JOURNÉE DE TRAVAIL

1. Pendant combien d'heures avez-vous travaillé lors de votre dernier quart de travail? Veuillez entrer uniquement un nombre entier positif, arrondi (p. ex., 20).

Heures :

2. De combien de clients étiez-vous responsable lors de votre dernière journée de travail? Cela comprend les clients auxquels vous étiez affecté(e) pour fournir des soins directs, indirects (par l'intermédiaire d'autres personnes telles que les infirmières ou infirmiers auxiliaires immatriculé(e)s/autorisé(e)s [RPN/LPN] ou le personnel suppléant non immatriculé) ou pour assumer toute tâche ou autre responsabilité en matière de soins pendant toute votre journée de travail ou une partie de la journée dans votre milieu de travail. Veuillez entrer uniquement un nombre entier positif, arrondi (p. ex., 5).

Nombre de clients :

3. Combien de temps avez-vous passé à exécuter chacun des types suivants d'activités lors de votre dernière journée de travail? Pour chacun des ensembles d'activités, veuillez noter le temps approximatif que vous avez passé à exécuter ce type d'activité lors de votre dernière journée de travail en arrondissant à l'heure la plus proche. Par exemple, si vous avez passé 2 heures ¼ à exécuter un ensemble d'activités, sélectionnez l'option « 2 ». Si vous avez passé 3 heures ¾ à exécuter un ensemble d'activités, sélectionnez l'option « 4 ». De nombreuses catégories peuvent être exécutées simultanément; par conséquent, le nombre total des heures passées pourrait être supérieur au nombre total des heures de votre quart de travail.

Ensembles d'activités

Temps total approximatif (en heures) passé à l'exécution de l'ensemble d'activités

0 1 2 3 4 5 6 7 8 >8

1. Gestion des soins : Fournir et diriger des soins infirmiers qui rehaussent le milieu de prestation de soins afin de protéger les clients et le personnel soignant.

2. Sécurité et prévention des infections : Protéger les clients et le personnel soignant contre les dangers pour la santé et l'environnement.

3. Promotion et maintien de la santé : Fournir et diriger des soins infirmiers directs au client en incorporant les connaissances des principes de croissance et de développement attendus, la prévention et/ou la détection précoce des problèmes de santé ainsi que des stratégies pour obtenir une santé optimale.

4. Intégrité psychologique : Fournir et diriger des soins infirmiers qui encouragent et appuient le bien-être émotionnel, mental et social du client qui vit des événements stressants et des clients atteints d'une maladie mentale aiguë ou chronique.

5. Soins fondamentaux et confort : Assurer le confort et fournir de l'aide dans le cadre de l'exécution des activités de la vie quotidienne.

6. Thérapies pharmacologiques et parentérales : Fournir des soins liés à l'administration de thérapies médicamenteuses et parentérales.

7. Réduction du risque potentiel : Réduire la probabilité que les clients développent des complications ou des problèmes de santé liés aux affections, aux traitements et aux procédures existants.

8. Adaptation physiologique : Gérer et fournir des soins aux clients atteints d'affections aiguës, chroniques ou qui mettent leur vie en danger.

 68%

Page précédente

Continuer à la page suivante

**RN 2017-2 FR****SECTION 5 : DONNÉES DÉMOGRAPHIQUES**

Dans cette section, on vous demande de fournir des renseignements généraux qui seront résumés pour décrire le groupe qui a répondu au sondage. Aucune réponse individuelle ne sera communiquée.

1a. Avez-vous travaillé comme employé suppléant non immatriculé/autorisé avant de devenir II/IA?

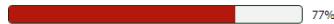
- Oui
 Non

[Page précédente](#)[Continuer à la page suivante](#)**RN 2017-2 FR****SECTION 5 : DONNÉES DÉMOGRAPHIQUES**

1b. Si oui, pendant combien d'années et de mois? Veuillez entrer des nombres entiers positifs (p. ex., 10).

Années :

Mois :

[Page précédente](#)[Continuer à la page suivante](#)



RN 2017-2 FR

SECTION 5 : DONNÉES DÉMOGRAPHIQUES

2a. Avez-vous travaillé comme infirmier/Infirmière auxiliaire immatriculé(e)/autorisé(e) (RPN/LPN) avant de devenir II/IA?

- Oui
 Non



Page précédente

Continuer à la page suivante



RN 2017-2 FR

SECTION 5 : DONNÉES DÉMOGRAPHIQUES

2b. Si oui, pendant combien d'années et de mois? Veuillez entrer des nombres entiers positifs (p. ex., 10).

Années :

Mois :



Page précédente

Continuer à la page suivante



RN 2017-2 FR

SECTION 5 : DONNÉES DÉMOGRAPHIQUES

3. De quel sexe êtes-vous?

- Masculin
 Féminin

4. Quel âge avez-vous? Veuillez répondre en donnant un nombre entier positif (p. ex., 35).

Âge :

5. Lequel des choix suivants **décrit le mieux** votre origine raciale/ethnique? (**Sélectionnez une SEULE réponse**)

- Indien de l'Amérique du Nord
- Métis
- Inuit
- Blanc
- Chinois
- Sud-asiatique (p. ex., des Indes orientales, du Pakistan, du Sri Lanka, etc.)
- Noir
- Philippin
- Latino-Américain
- Asiatique du Sud-Est (p. ex., Vietnamien, Cambodgien, Malaisien, Laotien, etc.)
- Arabe
- Asiatique de l'Ouest (p. ex., Iranien, Afghan, etc.)
- Coréen
- Japonais
- Autre

6. Quelle est votre langue maternelle?

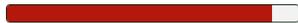
- Anglais
- Français
- Anglais et une autre langue
- Français et une autre langue
- Une autre langue

7. Quel type de programme de sciences infirmières de **base** vous a qualifié(e) pour vous présenter à l'examen NCLEX-RN? (**Sélectionnez une SEULE réponse**)

- II/IA - Baccalauréat au Canada
- II/IA - Maîtrise de base au Canada
- II/IA - Doctorat de base au Canada (p. ex., en naturopathie)
- N'importe quel programme de sciences infirmières NON canadien
- Maîtrise de base en cours
- Autre programme (veuillez préciser) :

8. Depuis combien de mois avez-vous terminé les études en sciences infirmières ci-dessus? Veuillez entrer un nombre entier positif (p. ex., 15).

Mois :

 91%

Page précédente

Continuer à la page suivante

**RN 2017-2 FR****SECTIONS 6 : COMMENTAIRES**

Nous pourrions communiquer avec certains participants par téléphone ou par courriel si nous avons besoin de renseignements supplémentaires pour clarifier les résultats de cette étude. Si vous souhaitez répondre à quelques questions supplémentaires par téléphone ou par courriel, veuillez fournir l'adresse de courriel et le numéro de téléphone auquel nous pouvons vous joindre pendant la journée ou en début de soirée.

Nom :

Numéro de téléphone avec l'indicatif régional pour vous joindre pendant la journée ou en début de soirée :

Adresse de courriel :

Vous pouvez inscrire les commentaires ou suggestions que vous souhaitez faire dans l'espace ci-dessous.

95%

[Page précédente](#)[Continuer à la page suivante](#)**RN 2017-2 FR****Merci!**

Merci de votre participation à cette importante étude.

Pour finaliser votre sondage, cliquant sur le lien [Soumettre le sondage](#) ci-dessous.

100%

[Page précédente](#)[Soumettre le sondage](#)

Web French Form 3



RN 2017-3 FR

INSTRUCTIONS

Ce sondage est mené par le National Council of State Boards of Nursing (NCSBN) au nom de votre organisme de réglementation. Il fait partie d'une étude approfondie sur les activités professionnelles des infirmières/infirmiers nouvellement immatriculés/autorisés dans les régions canadiennes utilisant l'examen NCLEX® pour prendre les décisions sur l'attribution de l'autorisation d'exercer depuis 2017. Veuillez remplir et retourner le présent formulaire dès que possible. C'est l'occasion pour vous de contribuer au développement de l'examen NCLEX-RN® auquel les futur(e)s candidat(e)s se présenteront.

Instructions :

Vous devez lire attentivement chaque question et répondre en remplissant l'ovale de l'option qui se rapproche le plus de votre réponse. Choisissez la réponse qui correspond le **mieux** à l'exercice de votre profession et remplissez l'ovale ou les ovales approprié(s). Quelques questions vous demandent d'écrire l'information. Veuillez écrire lisiblement votre réponse dans l'espace prévu.

Vous remarquerez que de nombreuses questions vous demandent d'indiquer ce que vous avez fait lors de votre **dernière journée de travail**. Il est important que nous obtenions l'information du personnel infirmier dont certaines journées de travail sont typiques et d'autres inhabituelles; veuillez donc répondre aux questions en fonction de ce que vous avez fait lors de votre **dernière** journée de travail, même s'il ne s'agissait pas d'une journée typique.

Au sens de ce sondage, le « **client** » peut être une personne, un membre de la famille ou un groupe qui comprend les partenaires et des membres de la population. Le terme « client » a le même sens que « résident » ou « patient ». Vos réponses seront traitées de façon confidentielle et aucune de vos réponses individuelles aux questions ne sera divulguée.

Progression du sondage :

Pour progresser tout au long du sondage, veuillez utiliser les boutons de navigation situés au bas de chaque page :

Continuez à la page suivante du sondage en cliquant sur le lien Continuer à la page suivante.

Revenez à la page précédente du sondage en cliquant sur le lien Page précédente. Cela vous permettra de revenir en arrière dans le sondage pour revoir les réponses précédentes.

Finissez le sondage en cliquant sur le lien Soumettre le sondage sur la page Merci.



Continuer à la page suivante

RN 2017-3 FR

INTRODUCTION

1. Quel(s) type(s) de permis d'exercer la profession infirmière détenez-vous? (**Sélectionnez TOUTES les réponses qui s'appliquent**)

- Infirmière/infirmier immatriculé(e)/autorisé(e) (II/IA)
- Infirmière/infirmier auxiliaire immatriculé(e)/autorisé(e) (RPN/LPN)



Page précédente

Continuer à la page suivante

**RN 2017-3 FR****INTRODUCTION**

2. Quel(le) est votre province/territoire d'immatriculation/autorisation?

- Alberta
- Colombie-Britannique
- Île du Prince Édouard
- Manitoba
- Nouveau-Brunswick
- Nouvelle-Écosse
- Ontario
- Québec
- Saskatchewan
- Terre-Neuve-et-Labrador
- Territoires du Nord-Ouest et Nuwanut
- Yukon

3. Travaillez-vous actuellement comme II/IA au Canada?

- Oui
- Non

[Page précédente](#)[Continuer à la page suivante](#)**RN 2017-3 FR****INTRODUCTION**

4. Dans le cadre de vos fonctions actuelles, fournissez-vous des soins directs aux clients? Remarque : Les activités cliniques d'un(e) étudiant(e) supervisées par un membre du corps professoral ne sont pas considérées comme des « soins directs ».

- Oui, 20 heures ou plus par semaine, en moyenne
- Oui, moins de 20 heures par semaine, en moyenne
- Non

[Page précédente](#)[Continuer à la page suivante](#)



RN 2017-3 FR

SECTION 1 : ACTIVITÉS DE SOINS INFIRMIERS

Cette section comprend une liste des activités décrivant la pratique des soins infirmiers dans différents environnements. Veuillez noter que certaines activités pourraient ne pas s'appliquer à votre milieu de travail.

Pour chaque activité, deux questions sont posées. Veuillez répondre aux deux questions.

QUESTION A - FRÉQUENCE : Si l'activité est exécutée dans votre milieu de travail, à quelle fréquence (0 fois, 1 fois, 2 fois, 3 fois, 4 fois ou 5 fois+) avez-vous exécuté personnellement cette activité au cours de votre dernière journée de travail? Si elle n'est jamais exécutée dans votre milieu de travail ou n'est pas applicable, sélectionnez « JAMAIS exécutée dans le milieu de travail », puis répondez à la Question B - Importance.

QUESTION B - IMPORTANCE : Dans quelle mesure est-il important d'exécuter cette activité de soins infirmiers du point de vue de la sécurité du client? Évaluez l'importance du point de vue du risque de complications inutiles, d'invalidité fonctionnelle, ou d'une grande détresse pour les clients. Notez toutes les activités.

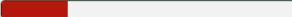
REMARQUE : L'inclusion d'une activité dans ce sondage d'analyse de la pratique ne signifie pas que cette activité est ou serait incluse dans le champ de pratique des II/IA défini par une province ou un territoire spécifique. Pour obtenir de l'information sur votre champ de pratique, veuillez vous adresser à votre organisme de réglementation local.

Question A – FRÉQUENCE – Si une activité ne s'applique pas à votre milieu de travail, indiquez « Jamais exécutée dans le milieu de travail », sélectionnez quand même la note de l'importance, tel qu'indiqué dans la Question B, puis passez à l'activité suivante. Si l'activité est exécutée dans votre milieu de travail, donnez une note de 0 à 5+ reflétant la fréquence à laquelle vous l'avez exécutée lors de votre dernier jour de travail, puis répondez à la Question B.

Question B – IMPORTANCE – Notez l'importance globale de cette activité du point de vue de la sécurité et/ou du risque de complications inutiles ou de détresse pour le client, comme suit : 1 = Non important, 2 = Légèrement important, 3 = Modérément important, 4 = Important, 5 = Très important.

	A - FRÉQUENCE	B - IMPORTANCE
1 Attribuer et superviser les soins de clients fournis par d'autres (p.ex., infirmière auxiliaire autorisée [LPN/VN], personnel suppléant, autres II/IA)	<input type="text"/>	<input type="text"/>
2 Participer aux projets d'amélioration du rendement et aux processus d'amélioration de la qualité	<input type="text"/>	<input type="text"/>
3 Intégrer les directives avancées au plan de soins du client	<input type="text"/>	<input type="text"/>
4 Évaluer le besoin de recommandations et obtenir les prescriptions nécessaires	<input type="text"/>	<input type="text"/>
5 Reconnaître ses propres limites et celles des autres et utiliser les ressources	<input type="text"/>	<input type="text"/>
6 Utiliser les ressources pour améliorer les soins du client (p. ex., recherche basée sur les données probantes, technologie de l'information, politiques et procédures)	<input type="text"/>	<input type="text"/>
7 Organiser la charge de travail de façon à gérer le temps efficacement	<input type="text"/>	<input type="text"/>
8 Pratiquer et préconiser les soins à des coûts efficaces	<input type="text"/>	<input type="text"/>

9 Vérifier la pertinence et l'exactitude du traitement prescrit	<input type="text"/>	<input type="text"/>
10 Appliquer les principes ergonomiques lors de l'administration des soins (p. ex., manipulation sécuritaire du patient, levage approprié)	<input type="text"/>	<input type="text"/>
11 Faciliter l'utilisation appropriée et sûre de l'équipement	<input type="text"/>	<input type="text"/>
12 Se conformer aux exigences lors de l'utilisation de moyens de contention	<input type="text"/>	<input type="text"/>
13 Signaler toute pratique dangereuse du personnel des soins de santé et intervenir selon les besoins (p. ex., abus d'alcool ou de drogues, pratiques de soins ou de dotation en personnel inappropriées)	<input type="text"/>	<input type="text"/>
14 Exécuter des évaluations de dépistage ciblées (p. ex., vision, nutrition)	<input type="text"/>	<input type="text"/>
15 Fournir des soins post-natals et un enseignement	<input type="text"/>	<input type="text"/>
16 Prodiguer des soins et de l'enseignement pour les clients nouveaux-nés, nourrissons et trottineurs de la naissance à 2 ans	<input type="text"/>	<input type="text"/>
17 Prodiguer des soins et de l'enseignement pour les clients de 65 ans et plus	<input type="text"/>	<input type="text"/>
18 Prodiguer des soins et de l'enseignement à une cliente avant l'accouchement ou pendant le travail	<input type="text"/>	<input type="text"/>
19 Évaluer le client pour détecter tout abus, sevrage ou toute dépendance, ou toxicité et intervenir selon le cas	<input type="text"/>	<input type="text"/>
20 Intégrer les pratiques culturelles et les croyances du client lors de la planification et de la prestation des soins	<input type="text"/>	<input type="text"/>
21 Évaluer les dynamiques familiales afin d'établir le plan de soins	<input type="text"/>	<input type="text"/>
22 Utiliser des techniques de communication thérapeutiques	<input type="text"/>	<input type="text"/>
23 Fournir des soins à un client qui a des distorsions visuelles, auditives et/ou cognitives	<input type="text"/>	<input type="text"/>
24 Exécuter les soins post-mortem	<input type="text"/>	<input type="text"/>
25 Exécuter l'évaluation cutanée et/ou mettre en œuvre des mesures pour maintenir l'intégrité et éviter les ruptures de l'épiderme	<input type="text"/>	<input type="text"/>

 23%

[Page précédente](#)

[Continuer à la page suivante](#)



RN 2017-3 FR

SECTION 1 : ACTIVITÉS DE SOINS INFIRMIERS

Question A – FRÉQUENCE – Si une activité ne s'applique pas à votre milieu de travail, indiquez « Jamais exécutée dans le milieu de travail », sélectionnez quand même la note de l'importance, tel qu'indiqué dans la Question B, puis passez à l'activité suivante. Si l'activité est exécutée dans votre milieu de travail, donnez une note de 0 à 5+ reflétant la fréquence à laquelle vous l'avez exécutée lors de votre **dernier jour de travail**, puis répondez à la Question B.

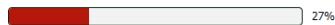
Question B – IMPORTANCE – Notez l'importance globale de cette activité du point de vue de la sécurité et/ou du risque de complications inutiles ou de détresse pour le client, comme suit : 1 = Non important, 2 = Légèrement important, 3 = Modérément important, 4 = Important, 5 = Très important.

	A - FRÉQUENCE	B - IMPORTANCE
26 Offrir des mesures de confort non pharmacologiques	<input type="text"/>	<input type="text"/>
27 Évaluer l'apport liquidien et le débit urinaire et intervenir au besoin	<input type="text"/>	<input type="text"/>
28 Reconnaître les thérapies complémentaires et identifier les contre-indications potentielles (p. ex., aromathérapie, acupression, compléments)	<input type="text"/>	<input type="text"/>
29 Exécuter les calculs requis pour administrer les médicaments	<input type="text"/>	<input type="text"/>
30 Manipuler et/ou administrer les médicaments à haut risque	<input type="text"/>	<input type="text"/>
31 Administrer les produits sanguins et évaluer la réponse du client	<input type="text"/>	<input type="text"/>
32 Évaluer la réponse du client au médicament	<input type="text"/>	<input type="text"/>
33 Participer au processus de rapprochement des médicaments	<input type="text"/>	<input type="text"/>
34 Exécuter des évaluations ciblées	<input type="text"/>	<input type="text"/>
35 Évaluer les réponses aux procédures et aux traitements	<input type="text"/>	<input type="text"/>
36 Prendre en charge le client pendant une procédure effectuée sous sédation modérée	<input type="text"/>	<input type="text"/>
37 Prendre les précautions requises pour empêcher les blessures et/ou les complications associées à une procédure ou un à diagnostic	<input type="text"/>	<input type="text"/>
38 Insérer, maintenir ou retirer une sonde gastro-intestinale nasale/orale	<input type="text"/>	<input type="text"/>
39 Insérer, maintenir ou retirer une ligne intraveineuse périphérique	<input type="text"/>	<input type="text"/>
40 Surveiller et maintenir les dispositifs et l'équipement utilisés pour le drainage (e.g., drains de plaies opératoires, succion de drain thoracique, traitement des plaies par pression négative)	<input type="text"/>	<input type="text"/>
41 Effectuer les soins de plaies et/ou le changement de pansement	<input type="text"/>	<input type="text"/>
42 Fournir les soins postopératoires	<input type="text"/>	<input type="text"/>
43 Assurer l'hygiène pulmonaire (p. ex., kinésithérapie de drainage, spirométrie d'encouragement)	<input type="text"/>	<input type="text"/>
44 Maintenir une température optimale du client	<input type="text"/>	<input type="text"/>
45 Surveiller et maintenir les cathéters artériels	<input type="text"/>	<input type="text"/>
46 Évaluer l'efficacité du plan de traitement pour un client ayant reçu un diagnostic de maladie aiguë ou chronique	<input type="text"/>	<input type="text"/>
47 Reconnaître les signes et les symptômes de complications chez un client et intervenir	<input type="text"/>	<input type="text"/>

48. Dans quelle mesure le sondage couvre-t-il les activités importantes qu'une infirmière ou un infirmier nouvellement immatriculé(e)/autorisé(e) devrait connaître, indépendamment de son champ de pratique?

- Très bien
- Bien
- Suffisamment
- Insuffisamment

49. Veuillez citer les activités importantes qui, à votre avis, sont manquantes dans le sondage



Page précédente

Continuer à la page suivante



RN 2017-3 FR

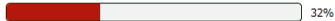
SECTION 2 : EXPÉRIENCE ET ORIENTATION

1. Depuis combien de mois travaillez-vous comme II/IA au Canada? Veuillez entrer un nombre entier positif (p. ex., 20).

Mois :

2a. Avez-vous déjà travaillé comme II/IA hors du Canada?

- Oui
- Non



Page précédente

Continuer à la page suivante



RN 2017-3 FR

SECTION 2 : EXPÉRIENCE ET ORIENTATION

2b. Si oui, combien de mois au total avez-vous travaillé comme II/IA hors du Canada? Veuillez entrer un nombre entier positif (p. ex., 7).

Mois :

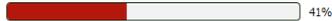
[Page précédente](#)[Continuer à la page suivante](#)

RN 2017-3 FR

SECTION 2 : EXPÉRIENCE ET ORIENTATION

3. Lequel des énoncés suivants décrit le **mieux** l'orientation que vous avez reçue dans vos fonctions actuelles? (**Sélectionnez un SEUL énoncé**)

- Aucune orientation officielle
- Enseignement en classe/laboratoire sur les compétences uniquement
- Enseignement en classe/laboratoire sur les compétences, plus du travail supervisé auprès des clients
- Travail auprès d'un ou de plusieurs précepteurs ou mentors désignés, avec ou sans travail en classe ou laboratoire sur les compétences en plus
- Stage formel/résidence, avec ou sans travail en classe ou laboratoire sur les compétences en plus
- Autre, veuillez préciser :

[Page précédente](#)[Continuer à la page suivante](#)

**RN 2017-3 FR****SECTION 2 : EXPÉRIENCE ET ORIENTATION**

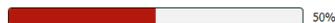
4. Si vous avez eu une période d'orientation, combien de semaines a-t-elle duré? Veuillez entrer un nombre entier positif (p. ex., 10).

Semaines :

[Page précédente](#)[Continuer à la page suivante](#)**RN 2017-3 FR****SECTION 2 : EXPÉRIENCE ET ORIENTATION**

5. Parmi les cours suivants, quels sont ceux pour lesquels vous avez obtenu un certificat ou que vous avez terminés depuis que vous avez fini vos cours en sciences infirmières? (**Sélectionnez TOUTES les réponses qui s'appliquent**)

- Aucun
- Chimiothérapie
- Dialyse péritonéale
- Gestion du comportement
- Intraveino-thérapie
- Phlébotomie
- Réadaptation
- Réanimation néonatale
- Sédation consciente/modérée
- Soins coronariens
- Soins de base
- Soins intensifs
- Soins néonataux avancés
- Soins pédiatriques avancés
- Technique spécialisée de réanimation cardiorespiratoire
- Autre, veuillez préciser :

[Page précédente](#)[Continuer à la page suivante](#)

**RN 2017-3 FR****SECTION 2 : EXPÉRIENCE ET ORIENTATION**

6a. Assumez-vous régulièrement des responsabilités administratives dans vos fonctions d'infirmière/infirmier (p. ex., gestionnaire d'unité, chef d'équipe, infirmière/infirmier responsable, coordonnatrice/coordonnateur)?

- Oui
 Non

[Page précédente](#)[Continuer à la page suivante](#)**RN 2017-3 FR****SECTION 2 : EXPÉRIENCE ET ORIENTATION**

6b. Si oui, s'agit-il de votre fonction principale?

- Oui
 Non

[Page précédente](#)[Continuer à la page suivante](#)

RN 2017-3 FR

SECTION 3 : MILIEU DE TRAVAIL

1. Lesquels des choix suivants décrivent le **mieux** la **plupart** de vos clients lors de votre dernière journée de travail? (**Sélectionnez TOUTES les réponses qui s'appliquent**)

- Clients en bonne santé, possiblement atteints d'affections mineures
- Clientes nécessitant des soins obstétricaux (maternité)
- Clients atteints d'affections chroniques stabilisées
- Clients atteints d'affections chroniques non stabilisées
- Clients atteints d'affections aiguës, y compris les clients atteints de troubles médicaux, chirurgicaux ou critiques
- Clients en fin de vie
- Clients qui ont des troubles du comportement/émotionnels
- Autre, veuillez préciser :

2. Lesquels des choix suivants décrivent le **mieux** les âges de la **plupart** de vos clients lors de votre dernière journée de travail? (**Sélectionnez TOUTES les réponses qui s'appliquent**)

- Nouveaux-nés (moins de 1 mois)
- Nourrissons/trotteurs (1 mois à 2 ans)
- Âge préscolaire (3 à 5 ans)
- Âge scolaire (6 à 12 ans)
- Adolescents (13 à 17 ans)
- Adultes (18 à 64 ans)
- Adultes (65 à 85 ans)
- Adultes (plus de 85 ans)

3. Lesquels des choix suivants décrivent le **mieux** votre milieu de travail/domaine de spécialité **lors de votre dernière journée de travail**? Si vous avez travaillé essentiellement dans un milieu de travail, remplissez l'ovale approprié correspondant à ce milieu de travail. Si vous avez travaillé dans plus d'un milieu de travail, remplissez l'ovale approprié correspondant à tous ces milieux de travail dans lesquels vous avez passé au moins la moitié de votre temps. (**Ne sélectionnez pas plus de DEUX réponses**)

- | | |
|--|---|
| <input type="checkbox"/> Soins intensifs (p. ex., unité de soins intensifs, CCU, unités de soins courants, soins intensifs pédiatriques/néonataux, service des urgences, salle de réveil après anesthésia) | <input type="checkbox"/> Unité de soins pour affections subaiguës |
| <input type="checkbox"/> Services médicaux-chirurgicaux ou n'importe laquelle de leurs sous-spécialités (p. ex., oncologie, orthopédie, neurologie) | <input type="checkbox"/> Unité de soins transitoires |
| <input type="checkbox"/> Pédiatrie | <input type="checkbox"/> II/IA ou infirmière/infirmier praticien(ne) (IP) dans un cabinet médical, un service de soins avancés ou un cabinet dentaire |
| <input type="checkbox"/> Pouponnière | <input type="checkbox"/> Santé au travail |
| <input type="checkbox"/> Maternité | <input type="checkbox"/> Clinique de patients externes |
| <input type="checkbox"/> Services de soins postpartum | <input type="checkbox"/> Soins à domicile, y compris les associations d'infirmières/infirmiers visiteuses/visiteurs |
| <input type="checkbox"/> Psychiatrie ou n'importe laquelle de ses sous-spécialités (p. ex. désintoxication) | <input type="checkbox"/> Santé publique |
| <input type="checkbox"/> Soins dans un établissement de logements avec assistance | <input type="checkbox"/> Service de santé des étudiants/écoles |
| <input type="checkbox"/> Salle d'opération, y compris opérations de patients externes et centres de services chirurgicaux | <input type="checkbox"/> Soins de fin de vie |
| <input type="checkbox"/> Maison de soins infirmiers, soins de qualité ou soins intermédiaires | <input type="checkbox"/> Prison/établissement correctionnel |
| <input type="checkbox"/> Autres soins de longue durée (p. ex., soins en établissement, en déficience développementale) | <input type="checkbox"/> Courts séjours/observation |
| <input type="checkbox"/> Réadaptation | <input type="checkbox"/> Soins intermédiaires/progressifs |
| <input type="checkbox"/> Autre, veuillez préciser : | |

4. Lequel des types d'établissement/organisation suivants décrit le **mieux** celui dans lequel se situe votre milieu de travail/domaine de spécialité? **(Sélectionnez une SEULE réponse)**

- Hôpital
- Établissement de soins de longue durée
- Établissement/organisation de soins communautaires/ambulatoires (y compris service de santé publique, association d'infirmières/infirmiers visiteuses/visiteurs, soins à domicile, médecin/II/IA dans un service de soins avancés/infirmière/infirmier praticien(ne) (IP)//cabinet dentaire, clinique, école, prison, etc.)
- Autre, veuillez préciser :

5. Si vous travaillez dans un hôpital ou une maison de soins infirmiers, quelle est sa capacité? **(Sélectionnez une SEULE réponse)**

- Moins de 50 lits
- 50 à 99 lits
- 100 à 299 lits
- 300 à 499 lits
- 500 lits ou plus
- Je ne sais pas
- Je ne travaille ni dans un hôpital ni dans une maison de soins infirmiers

6. Lequel choix suivants décrit le **mieux** votre quart de travail **au cours d'une journée de travail typique**? **(Sélectionnez une SEULE réponse)**

- Journée
- Soirée
- Nuit
- Quart rotatif
- Autre, veuillez préciser :

7. Quelle est la durée de votre quart de travail **au cours d'une journée de travail typique**?

- 8 heures
- 10 heures
- 12 heures
- Horaires variables 8 et 12 heures
- Autre, veuillez préciser :

8. Lequel des choix suivants décrit le **mieux** le lieu de votre employ?

- Zone urbaine/métropolitaine
- Banlieue
- Zone rurale



64%

Page précédente

Continuer à la page suivante



RN 2017-3 FR

SECTION 4 : DESCRIPTION DE VOTRE DERNIÈRE JOURNÉE DE TRAVAIL

1. Pendant combien d'heures avez-vous travaillé lors de votre dernier quart de travail? Veuillez entrer uniquement un nombre entier positif, arrondi (p. ex., 20).

Heures :

2. De combien de clients étiez-vous responsable lors de votre dernière journée de travail? Cela comprend les clients auxquels vous étiez affecté(e) pour fournir des soins directs, indirects (par l'intermédiaire d'autres personnes telles que les infirmières ou infirmiers auxiliaires immatriculé(e)s/autorisé(e)s [RPN/LPN] ou le personnel suppléant non immatriculé) ou pour assumer toute tâche ou autre responsabilité en matière de soins pendant toute votre journée de travail ou une partie de la journée dans votre milieu de travail. Veuillez entrer uniquement un nombre entier positif, arrondi (p. ex., 5).

Nombre de clients :

3. Combien de temps avez-vous passé à exécuter chacun des types suivants d'activités lors de votre dernière journée de travail? Pour chacun des ensembles d'activités, veuillez noter le temps approximatif que vous avez passé à exécuter ce type d'activité lors de votre dernière journée de travail en arrondissant à l'heure la plus proche. Par exemple, si vous avez passé 2 heures ¼ à exécuter un ensemble d'activités, sélectionnez l'option « 2 ». Si vous avez passé 3 heures ¾ à exécuter un ensemble d'activités, sélectionnez l'option « 4 ». De nombreuses catégories peuvent être exécutées simultanément; par conséquent, le nombre total des heures passées pourrait être supérieur au nombre total des heures de votre quart de travail.

Ensembles d'activités

Temps total approximatif (en heures) passé à l'exécution de l'ensemble d'activités

	0	1	2	3	4	5	6	7	8	>8
1. Gestion des soins : Fournir et diriger des soins infirmiers qui rehaussent le milieu de prestation de soins afin de protéger les clients et le personnel soignant.	<input type="radio"/>									
2. Sécurité et prévention des infections : Protéger les clients et le personnel soignant contre les dangers pour la santé et l'environnement.	<input type="radio"/>									
3. Promotion et maintien de la santé : Fournir et diriger des soins infirmiers directs au client en incorporant les connaissances des principes de croissance et de développement attendus, la prévention et/ou la détection précoce des problèmes de santé ainsi que des stratégies pour obtenir une santé optimale.	<input type="radio"/>									
4. Intégrité psychologique : Fournir et diriger des soins infirmiers qui encouragent et appuient le bien-être émotionnel, mental et social du client qui vit des événements stressants et des clients atteints d'une maladie mentale aiguë ou chronique.	<input type="radio"/>									
5. Soins fondamentaux et confort : Assurer le confort et fournir de l'aide dans le cadre de l'exécution des activités de la vie quotidienne.	<input type="radio"/>									
6. Thérapies pharmacologiques et parentérales : Fournir des soins liés à l'administration de thérapies médicamenteuses et parentérales.	<input type="radio"/>									

7. Réduction du risque potentiel : Réduire la probabilité que les clients développent des complications ou des problèmes de santé liés aux affections, aux traitements et aux procédures existants.



8. Adaptation physiologique : Gérer et fournir des soins aux clients atteints d'affections aiguës, chroniques ou qui mettent leur vie en danger.

[Page précédente](#)[Continuer à la page suivante](#)

RN 2017-3 FR

SECTION 5 : DONNÉES DÉMOGRAPHIQUES

Dans cette section, on vous demande de fournir des renseignements généraux qui seront résumés pour décrire le groupe qui a répondu au sondage. Aucune réponse individuelle ne sera communiquée.

1a. Avez-vous travaillé comme employé suppléant non immatriculé/autorisé avant de devenir II/IA?

- Oui
 Non

[Page précédente](#)[Continuer à la page suivante](#)

**RN 2017-3 FR****SECTION 5 : DONNÉES DÉMOGRAPHIQUES**

1b. Si oui, pendant combien d'années et de mois? Veuillez entrer des nombres entiers positifs (p. ex., 10).

Années :

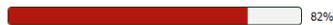
Mois :

[Page précédente](#)[Continuer à la page suivante](#)**RN 2017-3 FR****SECTION 5 : DONNÉES DÉMOGRAPHIQUES**

2a. Avez-vous travaillé comme infirmier/Infirmière auxiliaire immatriculé(e)/autorisé(e) (RPN/LPN) avant de devenir II/IA?

Oui

Non

[Page précédente](#)[Continuer à la page suivante](#)

**RN 2017-3 FR****SECTION 5 : DONNÉES DÉMOGRAPHIQUES**

2b. Si oui, pendant combien d'années et de mois? Veuillez entrer des nombres entiers positifs (p. ex., 10).

Années :

Mois :

[Page précédente](#)[Continuer à la page suivante](#)**RN 2017-3 FR****SECTION 5 : DONNÉES DÉMOGRAPHIQUES**

3. De quel sexe êtes-vous?

Masculin

Féminin

4. Quel âge avez-vous? Veuillez répondre en donnant un nombre entier positif (p. ex., 35).

Âge :

5. Lequel des choix suivants **décrit le mieux** votre origine raciale/ethnique? (**Sélectionnez une SEULE réponse**)

- Indien de l'Amérique du Nord
- Métis
- Inuit
- Blanc
- Chinois
- Sud-asiatique (p. ex., des Indes orientales, du Pakistan, du Sri Lanka, etc.)
- Noir
- Philippin
- Latino-Américain
- Asiatique du Sud-Est (p. ex., Vietnamien, Cambodgien, Malaisien, Laotien, etc.)
- Arabe
- Asiatique de l'Ouest (p. ex., Iranien, Afghan, etc.)
- Coréen
- Japonais
- Autre

6. Quelle est votre langue maternelle?

- Anglais
- Français
- Anglais et une autre langue
- Français et une autre langue
- Une autre langue

7. Quel type de programme de sciences infirmières de **base** vous a qualifié(e) pour vous présenter à l'examen NCLEX-RN? (**Sélectionnez une SEULE réponse**)

- II/IA - Baccalauréat au Canada
- II/IA - Maîtrise de base au Canada
- II/IA - Doctorat de base au Canada (p. ex., en naturopathie)
- N'importe quel programme de sciences infirmières NON canadien
- Maîtrise de base en cours
- Autre programme (veuillez préciser) :

8. Depuis combien de mois avez-vous terminé les études en sciences infirmières ci-dessus? Veuillez entrer un nombre entier positif (p. ex., 15).

Mois :



Page précédente

Continuer à la page suivante

**RN 2017-3 FR****SECTIONS 6 : COMMENTAIRES**

Nous pourrions communiquer avec certains participants par téléphone ou par courriel si nous avons besoin de renseignements supplémentaires pour clarifier les résultats de cette étude. Si vous souhaitez répondre à quelques questions supplémentaires par téléphone ou par courriel, veuillez fournir l'adresse de courriel et le numéro de téléphone auquel nous pouvons vous joindre pendant la journée ou en début de soirée.

Nom :

Numéro de téléphone avec
l'indicatif régional pour vous
joindre pendant la journée
ou en début de soirée :

Adresse de courriel :

Vous pouvez inscrire les commentaires ou suggestions que vous souhaitez faire dans l'espace ci-dessous.

A horizontal progress bar with a dark red fill and a white border. The bar is almost full, with a small white gap at the end. To the right of the bar is the text "95%".

[Page précédente](#)[Continuer à la page suivante](#)**RN 2017-3 FR****Merci!**

Merci de votre participation à cette importante étude.

Pour finaliser votre sondage, cliquant sur le lien **Soumettre le sondage** ci-dessous.

A horizontal progress bar with a dark red fill and a white border. The bar is completely full. To the right of the bar is the text "100%".

[Page précédente](#)[Soumettre le sondage](#)

APPENDIX B: 2017 RN PRACTICE ANALYSIS SURVEY NONRESPONDENT 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 2017 RN Canadian Practice Analysis had an adequate analyzable response rate of approximately 29%, many individuals did not respond to the survey. Out of the 3,048 newly licensed/registered RNs who were invited to take the survey (3,000 received the English version, 48 received the French version), 1,133 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 2017 Canadian RN Practice Analysis survey respondents.

Background of Study

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.

Findings from the 2017 Canadian RN Practice Analysis Nonrespondent Study 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 2017 Canadian RN Practice Analysis survey was contacted via telephone. The sample was derived from the 3,000

newly licensed RNs who were invited to take the English version of the survey. There were 50 RNs from this sample that 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 working as an RN. In addition, nonrespondents were asked to rate the frequency of performance and importance of 10 activities that were listed in the 2017 RN Practice Analysis survey. Nonrespondents were thanked for their time and the data collected was recorded.

Nonrespondent Results

Reasons for Not Responding

Reasons provided by the nonrespondent RNs included “did not receive” (29 responses or 58%), “too busy” (15 responses or 30%) or “other” (6 responses or 12%). None of the nonrespondents indicated “do not like/trust surveys” or “did not care” as a reason for not returning the survey.

Months Employed as an RN

Nonrespondents were asked how many total months they worked as an RN. Nonrespondents indicated that on average they worked 8.3 months as an RN, while respondents averaged 7.5 months. The average number of months worked is greater because nonrespondents were contacted about six weeks after the 2017 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 and are included in Table 1. The largest percentage (40% or 20 nonrespondents) worked in medical-surgical units. Critical care units were also frequently cited (12% or 6 nonrespondents). These results are similar to the 2017 Canadian RN Practice Analysis survey, which identified the largest percentage of respondents worked in medical-surgical (33.1%) and critical care (12.9%).

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

In general, the frequency ratings between nonrespondents and respondents were very similar, with no activity statement frequency rating differing by more than one point. See Table 3.

Summary

The nonrespondent study suggests that the main reasons individuals did not complete the survey was because they were either too busy or did not receive the survey. In summary, most of the activity statement ratings 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 2017 Canadian RN Practice Analysis results.

Table B1. Employment Setting/Specialty*

Job Title	Nonresponders		Responders	
	Frequency	%	Frequency	%
Critical care	6	12.0	113	12.9
Medical-surgical	20	40.0	290	33.1
Pediatrics	3	6.0	36	4.1
Nursery	1	2.0	4	0.5
Labor and delivery	5	10.0	28	3.2
Postpartum unit	1	2.0	28	3.2
Psychiatry or subspecialties	2	4.0	29	3.3
Assisted living	0	0.0	4	0.5
Operating room	0	0.0	15	1.7
Nursing home	2	4.0	50	5.7
Other long term care	0	0.0	28	3.2
Rehabilitation	1	2.0	26	3
Sub-acute unit	2	4.0	19	2.2
Transitional care unit	3	6.0	8	0.9
Physician/APRN/Dentist office	0	0.0	4	0.5
Occupational health	2	4.0	1	0.1
Outpatient clinic	2	4.0	12	1.4
Home health	0	0.0	20	2.3
Public health	0	0.0	12	1.4
Student/school health	0	0.0	2	0.2
Hospice care	0	0.0	14	1.6
Prison	0	0.0	1	0.1
Short Stay	0	0.0	2	0.2
Step-down	0	0.0	5	0.6
Other	0	0.0	44	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 B2. Activity Statement Importance Ratings

Activity #	Activity Statement	Nonresponder Rating	Responder Rating
6	Participate in performance improvement projects and quality improvement processes	3.86 (n=50)	3.43 (n=151)
15	Recognize limitations of self and others and utilize resources	4.36 (n=50)	4.30 (n=155)
29	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access).	4.30 (n=50)	3.99 (n=153)
52	Assess client ability to manage care in home environment and plan care accordingly.	4.04 (n=50)	3.96 (n=182)
67	Incorporate behavioral management techniques when caring for a client	4.10 (n=50)	3.70 (n=184)
84	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupuncture, supplements).	3.26 (n=50)	2.89 (n=122)
99	Participate in medication reconciliation process.	3.14 (n=50)	3.90 (n=123)
108	Manage client during a procedure with moderate sedation.	4.36 (n=50)	3.91 (n=115)
122	Monitor and care for clients on a ventilator	4.34 (n=50)	4.23 (n=125)
132	Maintain optimal temperature of client	4.42 (n=50)	3.85 (n=124)

Table B3. Activity Statement Frequency Ratings

Activity #	Activity Statement	Nonresponder Rating	Responder Rating
6	Participate in performance improvement projects and quality improvement processes	1.10 (n=50)	0.86 (n=228)
15	Recognize limitations of self and others and utilize resources	3.36 (n=50)	3.52 (n=227)
29	Follow security plan and procedures (e.g., newborn nursery security, violence, controlled access).	2.16 (n=50)	2.35 (n=222)
52	Assess client ability to manage care in home environment and plan care accordingly.	1.86 (n=50)	2.02 (n=255)
67	Incorporate behavioral management techniques when caring for a client	2.40 (n=50)	2.24 (n=254)
84	Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupuncture, supplements).	1.10 (n=50)	0.72 (n=187)
99	Participate in medication reconciliation process.	1.78 (n=50)	2.01 (n=187)
108	Manage client during a procedure with moderate sedation.	1.52 (n=50)	0.87 (n=187)
122	Monitor and care for clients on a ventilator	0.54 (n=50)	0.52 (n=190)
132	Maintain optimal temperature of client	2.48 (n=50)	2.62 (n=186)



NCSBN

National Council of State Boards of Nursing

111 E. Wacker Drive, Suite 2900

Chicago, IL 60601-4277

312.525.3600

312.279.1032 fax

www.ncsbn.org

ISBN# 978-0-9903603-7-7