Continuing improvements being made to certification program

The first online writing of CNA's certification exams is completed, with the new process going remarkably well.

Between Sept. 19 and Oct. 7, 2016, more than 1,330 nurses wrote one of CNA's 20 specialty exams in English or French at one of 80 Pearson VUE testing centres across Canada to certify or renew their certification. Pass rates for writers of these computer-based exams were similar to those of the writers of paper exams in previous years. Patricia Elliott-Miller, CNA's executive lead, Certification and Professional Development, says this is a good indication of how well her team implemented the changeover.

CNA will be looking to increase the number of testing locations to ensure better access for nurses in rural and remote areas. "We're working with our testing partners for opportunities for a greater number of writing centres across Canada," Elliott-Miller says.

Number of valid CNA certifications by nursing practice specialty as of Nov. 28, 2016	
Specialty	Certifications
Cardiovascular	751
Community Health	861
Critical Care	1,312
Critical Care Pediatrics	156
Emergency	1,161
Enterostomal Therapy	125
Gastroenterology	263
Gerontology	2,507
Hospice Palliative Care	1,328
Medical-Surgical	469
Nephrology	1,247
Neuroscience	317
Occupational Health	641
Oncology	1,870
Orthopaedics	156
PeriAnesthesia	143
Perinatal	645
Perioperative	1,375
Psychiatric and Mental Health	1,801
Rehabilitation	208
TOTAL	17,336

CNA distributed a post-exam evaluation to writers in early November to see what they thought worked well and what areas need improvement. They were asked about the application process, scheduling an exam within the three-week window and the exam itself, as well as their overall satisfaction with the location, communications with CNA and Pearson VUE, study materials and other supports. While the survey was still open when *Canadian Nurse* went to print, early responses were highly favourable about the ability to schedule online, the amount of time for study and the ease of navigating the online exam. Respondents also appreciated the frequency of e-mailed information from CNA.

Last year's certification offering addressed concerns from previous years about nurses having only one Saturday each year to write the paper exam. After having one three-week window to write the exam in 2016, they will have their choice of two-week windows in the spring and fall of 2017.

"Scheduling went relatively well because nurses could schedule seven days a week at most sites, including evenings, for three weeks," Elliott-Miller says. "It gives the nurses flexibility to schedule for work-life balance and it helps employers to be able to cover in the unit." She says she hopes the spring and fall writings will also make it easier for nurses to plan study groups and prepare for the exam.

Early survey results have pointed to a few areas that are in need of improvement. For example, only 59 per cent of respondents thought CNA's certification website was easy to navigate and find information on. A similar percentage thought that the resources available on the website, including study materials and information about study groups, mentors and financial assistance, were helpful.

Elliott-Miller says work is already underway to improve website navigation, so nurses can more easily find tools and resources to help them prepare for the exam. Study materials will also get a refresh to look more like the computer-based test, allowing nurses to become familiar with the look and feel before writing the exam. CNA will also review the length of time it takes to get results to writers.

These issues and any others that may come up in the survey will be reviewed and addressed by a certification program advisory committee that CNA started in 2015 to help guide improvements for the program. The

committee includes representation from all 20 specialty groups with exams, the Canadian Nurses Foundation, the Canadian Network of Nursing Specialties and CNA staff. The committee's initial work focused on the conversion to an online application and computer-based test.

The next priority will be to review the historical performance of each exam to determine if any should be retired, Elliott-Miller says. The committee will also develop business cases for each of the 15 requests CNA has received for new exams, to possibly replace any that may be retired.

Also new in 2016, nurses who registered to write the exam could defer to the next writing window for personal or professional reasons. Those who defer do not need to pay a withdrawal fee or to reapply. More than 100 took advantage of this option. Before the May 2017 writing, they will receive a notification to simply rebook their exam with Pearson VUE.

For nurses who plan to certify or are due to renew in 2017, applications for the May 1-15 exam window are open until March 1; applications for the Nov. 1-15 exam window will be open June 1-Sept. 1. For those who want to renew by continuous learning, applications are open until Nov. 30.

Lastly, 2016 also saw the start of an employer incentive program, which provides a 10 per cent discount to employers who sponsor 10 or more nurses in becoming certified or renewing. Employers receive a 20 per cent discount for 30 or more nurses.

Each year, CNA gives one health-care facility the Employer Recognition Award for exemplary, sustained support of the certification program and CNA-certified RNs. Types of support include listing CNA-certification credentials in job postings, promoting facility- or company-wide recognition of CNA-certified RNs, offering financial/study assistance or participating on a CNA certification exam committee or other development activities.

A CNA-certified RN/certification candidate or a group of CNA-certified RNs/candidates can nominate an employer to publicly recognize the support they receive. Employers may also nominate themselves. The nomination process has been simplified and moved online (see Employer Zone at getcertified.cna-aiic.ca), making it faster and easier. Deadline for nominations is Jan. 30. ■

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