



CNSA | AEIC

## Canadian Nursing Students' Association Association des étudiant(e)s infirmier(ère)s du Canada

Attn:  
David Benton, NCSBN  
Cynthia Johansen, CCRNR  
Canadian Jurisdictional Nursing Regulators

January 27, 2017

Re: Lack of Canadian content and context in the NCLEX-RN®

I am writing this letter to express my concerns with the lack of Canadian content and context in the NCLEX-RN®.

Canadian competencies mandate provision of safe, competent, compassionate, and ethical nursing care in a variety of practice settings. Nursing in Canada is client-centred, futuristic, and incorporates new developments in society, health care, nursing knowledge, and nursing practice. The competencies aim to ensure that entry-level registered nurses are able to function in today's realities and are well-equipped with the knowledge and skills to adapt to changes in health care and nursing. This is a very generalized statement, but it allows for flexibility for different specific criteria across the provinces. Broad based BSc education is warranted given the increasing complexity in nursing and health care, rapid expansion of our health-related knowledge, increasing use of digital technology, accountability to the public, and diversity and pluralistic contexts across Canadian society.

In terms of aptitudes, Canadian curriculum focuses on social determinants of health, leadership, cultural safety and education more than their US counterparts. While specific skill sets vary across provinces, Canadian RNs are in general equipped to initiate and manage IV therapy, manage wound care (to varying degrees), manage and maintain central lines, and more. American curriculum includes all those skills, but also managing a patient on a ventilator, perform and manage peritoneal dialysis, telemetry and EKG monitoring, and arterial lines; all of which are constituted as advanced care in Canada.

Canadian health care uses auxiliary professionals more than in America. The scope of practice of our respiratory technologists far exceeds that in the US, as do our Licensed Practical Nurses. Studies have shown that interprofessional care improves the effectiveness and sustainability of the health care system. These differences will translate into the delegation questions within the exam. In the US, you may not be able to delegate certain tasks that you may be able to do so in Canada. Our legal system differs in how it treats confidentiality as well: American nurses are prohibited from providing information about a patient's treatment plan, while Canadian nurses are mandated to provide information to a known family member upon permission in a timely manner.

As you can see there are distinct differences that could potentially lead to confusion and uncertainty with some exam questions related to these competencies. Many writers have already reported coming across these differences when it came to delegation, medications, and procedures, as reported in McGillis Hall, Lalonde, & Kashin (2016).

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In conclusion, the National Council of State Boards of Nursing stated that both Canadian and American competencies were nearly identical which has been proven not to be the case. Since that statement, it has been shown that competencies are not as similar as earlier noted. In fact, one third of Canadian Competencies are not even touched on in this exam and another one quarter of them are only briefly discussed which adds up to over one half of our Canadian competencies that this exam fails to acknowledge and test. This raises questions of the exams validity for Canadian entry-to-practice standards. Failing to acknowledge the differences between Canadian competencies and American competencies is failing to provide patient-centred care for Canadian citizens.

Together with the Canadian Nursing Students' Association, I am in support of the urgent constructive dialogue and resolution of the issues and concerns associated with the current licensing exam, specifically to advocate and call for action to the current entry-to-practice exam by collaborating with jurisdictional regulatory bodies and Canadian nursing students until issues are fully resolved.

Sincerely,

(Signature & Name)

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