NCLEX Frequently Asked Questions for Canadian Educators & Students

Jump to the topic you want to read by clicking on the links below.

- Exam Development
- Exam content
- Exam Administration
- Educator and student preparation
- Miscellaneous

Exam Development

Will there be a separate NCLEX-RN for Canadians?
The same NCLEX-RN exam will be used for Canadian and U.S. entry to nursing practice in 2015.

What are the NCLEX test-user areas?
NCLEX test-user areas include all jurisdictions that use the NCLEX examination as part of the licensure/registration process. These areas include the U.S. and four of its territories (American Samoa, Guam, Northern Mariana Islands, U.S. Virgin Islands) and the following Canadian provinces/territories in 2015:

- Alberta
- British Columbia
- Manitoba
- New Brunswick
- Newfoundland & Labrador
- Northwest Territories & Nunavut
- Nova Scotia
- Ontario
- Prince Edward Island
- Saskatchewan

How will the NCLEX address terminology differences between the U.S. and Canada (e.g., color/colour, Native American/First Nation)?
During item development, all items undergo a continuous and multi-layer review process to ensure the exam remains psychometrically sound and content relevant. These review processes include Canadian representatives at each stage to ensure that terminology differences are identified and addressed. Additionally, all newly written items are administered as pretest items to actual NCLEX candidates. Only items that meet statistical and differential item functioning (DIF) criteria become operational. This rigorous process ensures that all NCLEX operational items are free from bias.

How are you dealing with the need for items related to Inuit/First Nation/Northern population?
Identifying cultural factors that impact client population is part of the nursing process, which includes assessment/data collection, analysis, planning, implementation, and evaluation. The nursing process is part of the content foundation assessed on the NCLEX exam. During care, the nurse gathers data/collcts information which includes the client’s individual cultural factors. Using this information,
the nurse plans care based on the individual client’s needs, considering if these factors negatively impact safety as well as potential complications. The delivery of safe, effective entry-level nursing care requires the ability to incorporate culturally competent care.

**Can you explain more about the panel processes including Canadian representation, qualification requirements and the recruitment process for entry-level nurses?**

Over the course of a year, Canadian nurses will represent 20% of the volunteers invited to participate on NCLEX Item Development Panels (Practice Analysis and Knowledge, Skills and Abilities [KSA] expert panels, item writing, item review and Panel of Judges [POJ]). In addition to these item development opportunities, Canadian nurses will also have the opportunity to review NCLEX items during the Regulatory Body Review and the Translation Review.

All qualified Canadian nurses who are registered with the provinces and territories that will utilize the NCLEX-RN as entry-to-practice examination in 2015 are eligible to participate in the examination development process, and volunteers will be selected from across Canada to ensure diversity of practice setting, clinical specialty, experience and geographic representation. Canadian nurses began participating on the RN Item Review and RN Item Writing panels in February 2013.

To construct meaningful examination items, NCLEX item writers must be familiar with entry-level nursing knowledge, test construction process and item development theories. These necessary qualifications are in-line with those of nursing educators. Educators with a master’s level or higher degree who are teaching undergraduate nursing students in the clinical areas are invited to participate in the NCLEX-RN item writing process. Nurses who hold a PhD and teach solely in the classroom may participate on other item panel types such as the Practice Analysis and KSA expert panels.

Input from entry-level nurses is sought out in many areas of the item development process such as Practice Analysis and KSA expert panels and the POJ. NCSBN will contact the Canadian regulatory bodies when recruiting new graduates for an item development panel. These governing bodies will recommend names of entry-level nurses for participation.

Additional information about volunteering for the item development program can be found on the Exam Development Opportunities page of the NCSBN website.

**How do you determine that the practice assessment of entry-level nurses coincides with standards of practice and expert opinion of the expected practices? How do you determine what questions are on the practice analysis surveys?**

NCSBN conducts practice analyses to determine the level of competency that entry-level nurses must possess in order to provide safe and effective care. Results obtained from the practice analysis studies are used to construct the NCLEX-RN Test Plan. The current NCLEX-RN Test Plan can be downloaded for free on the NCLEX Test Plans page of the NCSBN website. The Test Plan then guides subject matter experts serving as item writers and reviewers in the development and review of NCLEX items. All NCLEX items undergo rigorous reviews prior to being used in actual examinations. Item content is scrutinized for currency, accuracy and adherence to entry-level nursing scope of practice.

Scope of entry-level nursing practice provides the foundation for the NCLEX item development process. The practice analysis process starts with a comprehensive literature review of those resources
that students preparing for a career in nursing are expected to study and understand. A subject matter expert panel is then convened to discuss activities that entry-level nurses perform on the job. This expert panel is made up of representatives from various NCLEX test-user areas, major nursing specialties and nursing practice settings. In addition to 10-12 experienced nurses, the expert panel also includes 2 entry-level nurses. These entry-level panelists provide the incumbent perspective. After extensive discussion and review of related documents, the expert panel constructs a comprehensive list of job activity statements that are relevant to entry-level nursing practice. This list of entry-level activities will be used in the subsequent practice analysis surveys. The results from the current practice analysis can be downloaded from the Practice Analyses page of the NCSBN website.

The selection and input of subject matter experts provides assurance that the practice analysis assesses the current expected practices of entry-level nursing.

Will practice analysis be done with Canadian nurses?
Yes, Canadian nurse representatives will be involved in the Subject Matter Expert Panel for RN practice analyses along with nurses from other NCLEX-RN test-user areas. NCSBN conducts practice analysis studies every three years to survey the nursing profession regarding entry-level practice. Results of these practice analyses will form the basis of NCLEX-RN Test Plan. The next RN practice analysis cycle, which will include Canadian representatives on the Subject Matter Expert Panel and Canadian nurses in the practice analysis survey, is scheduled to begin in November 2013.

How do you ensure that the practice analysis is representative of all settings (i.e., not just acute care)?
When assembling the practice analysis subject matter expert panel, NCSBN ensures that a wide variety of practice settings are represented. A representative panel composition ensures that the list of entry-level nursing activities developed by the panel is inclusive and accurately reflects entry-level nursing practice. Examples of different practice settings that have been represented on recent NCSBN practice analyses include acute care, critical care, community health, mental health, paediatrics, woman’s health, obstetric, surgery and home health.

How will item development panels be selected?
Panel dates and the number of panels are determined according to item inventory needs. Item development panels take place throughout the year in Chicago, IL and typically last three to five days. For each panel, NCSBN staff select qualified volunteer applicants from an item development database depending on the type of panel and specific item pool needs. Volunteers are then approved by their provincial/territorial regulatory body. Additional information about volunteering may be found on the Exam Development Opportunities page of the NCSBN website.

How will you ensure diverse practice settings are represented on review panels?
To ensure each item development panel consists of a diverse group of nursing experts, NCSBN staff selects volunteers representing a variety of practice settings and nursing specialties. Additional panel selection criteria include a variety of geographic representations and years of nursing experience. NCSBN continuously solicits qualified nursing experts to participate in the NCLEX development process.

Will reviewers come from all Canadian provinces?
All qualified Canadian nurses who are registered with the provinces and territories that will utilize the NCLEX-RN as entry-to-practice examination in 2015 are eligible to participate in the examination development process, and volunteers will be selected from across Canada to ensure diversity of practice setting, clinical specialty, experience and geographic representation.
How will you ensure review panels are current with standards being taught?
To ensure item review panelists are familiar with current nursing practice, only clinicians who work directly with entry-level nurses are eligible to volunteer for the item review process.

Can you further explain the rationale behind the criteria for item writers and reviewers?
NCSBN recruits nursing instructors in clinical areas as item writers and nurses who are employed in clinical settings as item reviewers.

To construct meaningful examination items, NCLEX item writers must be familiar with entry-level nursing knowledge, test construction process and item development theories. These necessary qualifications are in-line with those of nursing educators. Educators with a master’s level or higher degree are invited to participate in the NCLEX-RN item writing process. In terms of reviewing NCLEX items, nurse clinicians, who work with entry-level nurses by providing preceptorship, mentorship and supervision, see entry-level practice first-hand. These expert nurses are able to bring their knowledge of the clinical settings to the item review process and ensure that NCLEX items are reflective of current entry-level nursing practice. Clinicians who spend at least eight hours per week working with entry-level RNs are invited to serve on NCLEX-RN item review panels. Together, the participation of both educators and nurse clinicians ensures that the exam meets the requirements of a regulatory, entry-to-practice requirement focusing on public safety.

Why can’t educators who have previous experience in nursing licensure exams item writing participate in NCLEX development?
We ask that subject matter experts with nursing licensure examination item development experience or who have been involved in the development of prep guides or courses in the previous two years to not volunteer for the NCLEX to minimize potential biases that these previous experiences may bring to the NCLEX development process.

How do review panels decide if an item is removed/sent back for further work?
Clinicians who work directly with entry-level nurses are recruited to participate in the test development process as item reviewers. Their charge is to review items based on currency and accuracy of entry-level practice as they see in various clinical settings. If items are deemed not reflective of current nursing practice, they are sent back for rework.

Will travel costs for item writers and reviewers be covered? Where will they need to travel to?
NCSBN will cover all expenses for volunteers participating in item development panels including food, lodging and travel. All item development panels are held in Chicago, Illinois.

How will the exam be translated?
In order to meet the needs of French-speaking, Canadian NCLEX-RN candidates, NCSBN will offer the NCLEX-RN examination in French. NCSBN will translate two operational item pools each year into French. Following this forward translation by a translation professional with expertise in Canadian French, NCSBN will work with Canadian regulatory bodies to identify a Canadian Translation Panel. The panel will consist of three nurses proficient in English and French who will review each translated item for accuracy and contextual equivalency. This method, referred to as a mixed method, process oriented approach, is supported in the literature as a preferred method for ensuring construct equivalence in health care measurement instruments.
Following the Canadian Translation Panel’s approval the French NCLEX Operational pool will be administered to French Canadian NCLEX-RN Candidates. Once sufficient candidate response data is obtained, the items will be subject to a separate Differential Item Functioning (DIF) analysis, to ascertain whether the items appropriately measure candidates’ nursing ability irrespective of the language in which these test items were administered. Items identified as possessing DIF will be reviewed by the NCLEX DIF panel for presence of bias. In addition to the construct equivalence confirmed by the Canadian Translation Panel, the use of DIF analysis is supported in the literature as a preferred method to ensure measurement equivalence.

**Will reference material be available in French?**
Yes, the NCLEX-RN Test Plan, NCLEX tutorial and Candidate Bulletin will be available in French prior to 2015.

**Exam content**

**Can you explain the research conducted prior to using the NCLEX-RN in Canada?**
In 2009, NCSBN sent surveys to 2,396 first-time, Canadian-educated nursing candidates (699 in British Columbia and 1,697 in Ontario) who successfully passed the Canadian Registered Nurse Examination (CRNE) in 2009. The survey required the candidates to rate 142 nursing activity statements on how important and how frequently they are performed considering client safety and/or the threat of complications or distress. The 142 nursing activity statements were identical to the list of activity statements placed on the 2008 RN Practice Analysis survey sent to U.S.-educated candidates the results of which informed the 2010 NCLEX-RN® Test Plan.

The results of the surveys, identified in the Comparison of Entry-level Registered Nurses in the U.S. and British Columbia, Canada and Comparison of Entry-level Registered Nurses in the U.S. and Ontario, Canada, indicated that respondents considered the activity statements listed in the survey as representative of the work they performed in their practice settings. Additionally, the importance and frequency ratings of the 142 activity statements were comparable to the U.S. respondents with respect to client safety and/or the threat of complications or distress. Given the strong correlation between the importance and frequency ratings, the results of the two studies firmly suggest that the entry-level RNs in British Columbia, Ontario and the U.S. view entry-level nursing practice similarly.

Based on this information, NCSBN continued to explore comparisons in nursing practice in the U.S. and Canada. The 145 RN competencies identified in the College of Nurses of Ontario (CNO) National Competencies in the Context of Entry-Level Registered Nurse Practice were compared in the following three areas: 142 activity statements identified in NCSBN’s 2008 RN Practice Analysis; the knowledge, skills and abilities (KSAs) needed by newly licensed RNs to practice safely identified in the 2008 Knowledge of Newly Licensed Registered Nurses Survey; and the NCLEX Integrated Processes described in the 2010 NCLEX-RN® Test Plan (NCLEX Integrated Processes are defined as processes fundamental to the practice of nursing and therefore are integrated throughout the NCLEX-RN Test Plan. They include the Nursing Process, Caring, Communication/Collaboration and Teaching/Learning).

Using the existing entry-level competency category structures, the study sought to identify equivalent areas in the competency-based statements that are used as a foundation to assess the ability of the entry-level nurse to deliver safe and competent care in the respective locations. The study revealed a well-defined pattern of similarity in the entry-level nursing competencies between Ontario and the U.S. While there are a few health care system nuances in both the U.S. and Canada, one of the most
important findings is that the competency categories, which reflect direct client care by entry-level RNs, represented a 98.54 percent correlation; the largest overall percentage of direct one-to-one competency agreement between Ontario and the U.S.

Considering the results of this research, it is fair to conclude that there is an established relationship of similarity in the entry-level nursing practices between Canada and the U.S. This relationship strongly suggests that the NCLEX-RN Examination would provide a fair, valid, and psychometrically sound measurement of the minimal nursing competencies required for safe and effective practice for those seeking registration/licensure as an RN in Canada.

How do you ensure that Canadian candidates will not be expected to answer questions on skills that are not considered entry-level in parts of Canada (i.e., ventilators, arterial lines, etc.)?

In 2010, NCSBN conducted several research studies comparing nursing practice and nursing competencies in the U.S. and Canada. The results of these studies revealed a 98% congruency in nursing practice and competencies between the two countries. Canadian regulatory bodies will conduct a review of operational NCLEX items to ensure all items administered starting in 2015 are congruent with regulatory nurse practice acts and entry-level scope of practice in the 10 provinces/territories.

How do the Entry-to-Practice (ETP) competencies in Canada relate to the items that will be on the exam?
The NCLEX-RN is based on the data collected from the practice analysis studies (see the Exam Development FAQ section) conducted every three years. NCSBN conducted background research on the nursing practice in the U.S. and Canada, which included a comparison of the Canadian ETP competencies with the entry-level nursing activity statements as used in the RN practice analysis. Study results revealed a high degree of correspondence between the Canadian ETP competencies and the RN entry-level nursing activity statements. Additionally, NCSBN conducted practice analysis verification studies in collaboration with College of Nurses of Ontario and with College of Registered Nurses of British Columbia. Study results indicated that entry-level practice characteristics among the U.S., Ontario and British Columbia are highly similar. Full reports for the Ontario and British Columbia studies are available on the Exams Publications page of the NCSBN website.

Prior to writing the NCLEX-RN, nursing students complete an educational program that teaches them the knowledge, skills and abilities that will prepare them to enter the nursing profession. Nursing candidates’ academic preparation provides a starting point for them to practice in a variety of settings. In complement, the NCLEX-RN is developed to assess whether nursing candidates possess the minimal entry-level competence to provide safe and effective care.

Does the exam assess components related to community health?
NCLEX-RN items are developed based on healthcare settings in which entry-level RNs practice. These settings include acute/critical care, long-term/rehabilitation care, outpatient care and community-based/home care.

Each item development subject matter expert panel is carefully assembled to ensure that a diverse group of nurses are represented. These panels include item writing, item review, practice analysis, and every other panel along the test development process. NCSBN pays attention to demographic characteristics such as geographical areas, gender, practice settings and nursing specialties, to name a
few. Community-based nursing practice along with other nurse practice settings, are selected to ensure comprehensive representation in the overall test development process.

Community health concepts, including social determinants of health and the care of populations, are incorporated throughout the test plan categories and the items that are subsequently developed based on these categories. The entry-to-practice exam focuses on the validation of required entry-to-practice competencies and is not intended as a comprehensive validation of the acquisition of program content.

**Can you describe the risk management category of questions?**
NCLEX-RN items that assess risk management are categorized in the Safe and Effective Care Environment section under the Management of Care test plan area. Management of Care items measure areas where nurses provide and direct nursing care that enhances the care delivery setting to protect the client and other healthcare personnel. This area addresses professional responsibility competencies where nurses manage client care, engage in client advocacy and provide care continuity.

**How are ethical components of nursing practice and critical thinking measured on the NCLEX exam?**
Ethical components of nursing practice are addressed in the practice analysis and as a result are represented among the entry-level job task statements that form the test plan categories. Questions measuring nursing ethics are asked on the NCLEX-RN exam just as questions that measure other nursing competencies. The exam as a whole assesses the student’s application of critical thinking across the test plan categories and the competencies associated with the provision of nursing care.

**How will issues regarding American drug names and measurement values be addressed for Canadian writers?**
The NCLEX-RN items currently include both metric and imperial measurement options. Over the next two years, our transition process and the review by Canadian experts will ensure the appropriateness of terms used in the exam for both Canadian and American candidates, and that all writers of the NCLEX-RN in 2015 will be assessed based only on nursing competence, not his or her place of origin.

**How will content related to Canadian health care history, the Canadian medical care system, and Canadian legislation be addressed on the exam?**
In order to be psychometrically sound and valid as a regulatory entry to practice examination, the NCLEX-RN exam must measure nursing competence, not the candidate’s knowledge of a particular health care system, history or legislation. However, candidates must be able to identify the potential impact of the context in which care is provided on his or her approach to providing nursing care. The NCLEX will include questions that will assess the candidate’s ability to apply critical thinking in these scenarios.

Differential item functioning (DIF) analysis is conducted on all exam results to ensure that the exam items are measuring only nursing competence. If items perform differently based on an individual's place of origin, then what is likely being measured is not nursing and the item would be removed.

Canadian nursing students will continue to acquire the required knowledge about legislation, policies, standards, and context affecting their practice as a nurse in Canada in their educational programs, and will build on this knowledge as they progress in their career as a nurse.

**Exam Administration**
When is the exam starting in 2015?
The NCLEX exam will begin administration for Canadian entry-to-practice in January 2015.

What are the fees for taking and retaking the NCLEX? Why is the registration fee not the same as in the U.S.?
The current NCLEX registration fee, as established by contract, for candidates seeking licensure/registration by Canadian Regulatory Bodies is $360 CDN. This fee is the same for each registration regardless of the number of times the candidate has taken the NCLEX-RN. The fee is based on the set of services required to meet the needs of Canadian candidates (including the provision of a French version of the exam and the establishment of test centers in Canada). This application process and fee is distinct from the process and fees for application for registration/licensure with provincial/territorial regulatory bodies. Candidates will continue to require approval from their regulatory body before they are eligible to write the exam.

Will Canadian NCLEX candidates have the same passing score (cutscore) as U.S. NCLEX candidates?
Yes, the NCLEX-RN passing standard will be the same for U.S. and Canadian entry to nursing practice. Currently the NCLEX-RN passing standard is 0.0 logit. Find more information on how the NCLEX passing standard is set on the Passing Standards page of NCSBN.org.

How do you determine which centers a candidate can use to write the NCLEX?
One of the benefits of the exam model CCRNR chose is in the flexibility it provides candidates seeking licensure/registration from Canadian regulatory bodies. Canadian candidates may sit for the NCLEX-RN at any Pearson Professional Center (the permanent test sites) in Canada, any Temporary Test Center, and any Pearson Professional Center located in the U.S. Appointments at permanent Pearson Professional Centers are available year round. Once candidates are made exam eligible by the regulatory body, they can select any test center in which to write the NCLEX-RN. Candidates will schedule their NCLEX-RN using the Pearson VUE Website or by phone with Pearson VUE’s call center.

Will there be French personnel to answer the needs of the unilingual French candidates at the temporary and permanent test centers in remote areas?
Pearson VUE will be recruiting bilingual individuals to staff its permanent and temporary test centers. While not every invigilator will be bilingual, NCSBN and Pearson VUE will work with regulatory bodies to serve the needs of unilingual French candidates.

Is all biometric registration and student data going to be housed in the U.S. or Canada? How do you address concerns about the privacy of Canadian students?
Canadian and provincial law allows for the transmission of data to a service provider in the U.S., subject to meeting the standards of Canadian and provincial/territorial privacy laws. Under the contract between the regulatory bodies and NCSBN, NCSBN will comply with U.S., Canadian and provincial/territorial laws. NCSBN and Pearson VUE have established a system of security, consent, and notice standards related to the collection and transmission of such data.

How long can students work as a graduate nurse before they take the NCLEX?
The NCLEX is only part of the nursing regulatory licensure/licensure process. As such, any other licensure/licensure requirements or policies are determined by the regulatory body in the jurisdiction in which the candidate is seeking registration/licensure. Candidates will need to contact their regulatory body for further information.
If a Canadian student takes the NCLEX for licensure/registration in Canada, will they be able to work in the U.S.?
The NCLEX is only part of the nursing regulatory licensure/registration process. As such, any other licensure/registration requirements or policies are determined by the regulatory body or board of nursing in the jurisdiction in which the candidate is looking to practice. Candidates will need to contact the regulatory body or board of nursing for further information on the requirements and how these can be met.

How long does it take for candidates to receive the results and how are they notified?
The regulatory bodies will be developing administrative processes to support the delivery of the NCLEX as of 2015. Detailed information will be available in the second half of 2014. NCLEX candidates will receive their results directly from the regulatory bodies, and CCRNR’s collective goal is to provide the results to candidates as soon as possible after the examination.

What will the cost to students be?
The cost for Canadian students to take the NCLEX-RN has currently been established at $360 CAD. There may be additional administration fees payable to the regulatory body in the jurisdiction to which the student is applying for licensure or registration. These administrative details will be finalized over the next two years and communicated to students as soon as they have been determined.

Do students get more anxious if they continue to write and they know that a longer exam means the less well they are doing?
As a candidate takes the examination, items are selected based on the candidate’s response to previous items. The examination ends when the computer can determine that a candidate’s performance is either above or below the passing standard based on pre-established scoring criteria, regardless of the number of items answered or the amount of testing time elapsed. A longer exam does not indicate that a candidate is performing poorly. It only indicates that the candidate’s ability is close to the passing standard and more questions are needed to ascertain the candidate’s ability is either above or below the passing standard. Additional information on the pass/fail rules can be found on the Computerized Adaptive Testing page of the NCSBN website.

Can candidates skip questions? Do they have the ability to go back to a question?
Every time a candidate answers an item on the NCLEX, the computer re-estimates the candidate’s ability based on his or her responses to all of the previous items. The computer then selects the next item targeted to the candidate’s ability. In order ensure items are targeted to a candidate’s ability, the computer will not allow a candidate to skip items or return to previous items. Candidates are encouraged to consider each question carefully and answer as best they can.

Six hours is a long time for writing an exam. How will breaks be provided to allow for nutrition?
Candidates are provided two pre-programmed breaks during the NCLEX examination. The first break occurs after two hours of testing, and the second occurs after three and half hours of testing. Candidates may take or skip any pre-programmed breaks provided. Candidates are also permitted to take unscheduled breaks during the testing session. The exam clock does not stop during scheduled or unscheduled breaks.
If a Canadian writes the NCLEX will he/she be able to apply for registration in the U.S. as well as Canada or in more than one province?

NCLEX-RN is developed as an assessment of entry-level nursing practice competency. Passing the NCLEX-RN is one important component of obtaining the privilege to practice registered nursing at the entry-level. In addition to successfully completing the NCLEX-RN, boards of nursing in the U.S. and regulatory bodies in Canada may require additional evidence, such as successful completion of approved nursing education and meeting language proficiency requirements, prior to granting that privilege. Since specific licensure/registration requirements may differ from jurisdiction to jurisdiction, reciprocity of registration is at the discretion of the regulatory bodies involved.

How is the passing standard determined?

To ensure that the passing standard for the NCLEX-RN accurately reflects the amount of nursing ability currently required to provide safe and effective care at the entry level, the NCSBN Board of Directors evaluates the passing standard every three years when the test plan is reviewed. In evaluation of the passing standard, they consider information from a variety of sources, including (1) the results of a criterion-referenced standard setting study undertaken by a nursing subject matter expert panel; (2) historical record of the passing standard and annual summaries of candidate performance on the NCLEX examination since the implementation of the CAT methodology in 1994; (3) the results from annual standard setting surveys, which solicit the opinions of employers and educators regarding the competence of the current cohort of entry-level nurses; and (4) information detailing the educational readiness of high school graduates who expressed an interest in nursing.

What is the pass mark in terms of percentage?

The NCLEX examination is developed using the Rasch measurement model, which is an item response theory model. Compared to classical test theory, the Rasch model allows person-free item calibration and item-free person measurement. In this framework, candidate performance on the examination is measured in logits as opposed to the traditional totals and percentages. A mathematical explanation of logits can be found on the NCSBN website.

In December 2012, the NCSBN Board of Directors voted to raise the NCLEX-RN passing standard. The NCLEX-RN passing standard was changed to 0.00 logit. This standard is effective starting April 1, 2013, in conjunction with the implementation of the new 2013 NCLEX-RN Test Plan, and will remain in effect until March 31, 2016.

What is the pass rate and do you know if there is a difference between those attending prep sessions and those that do not?

The pass rate for all first-time NCLEX-RN candidates was approximately 89% for candidates testing from January to September 2012. Additional information can be found on the NCLEX Examination Pass Rates page of the NCSBN website. NCSBN does not track candidate performance according to test preparation practices.

What information will schools receive regarding the school’s candidates performance?

All nursing programs recognized by their regulatory colleges may subscribe to NCLEX Program Reports. Program Reports are produced semi-annually and annually. One of the two semi-annual reports covers graduates from a program testing between October 1 and March 31, while the other semi-annual report covers the span between April 1 and September 30. The annual Program Reports cover graduates testing between April 1 and March 31. Additional information on NCLEX Program Reports may be found
How will students with disabilities be accommodated?
Students meeting accommodation requirements will be provided accommodation on the NCLEX-RN examination. Specific policies around the criteria for accommodation will be developed by CCRNR in accordance with Canadian legislation.

Educator and student preparation

Should educator tests/exams reflect how students are tested on the NCLEX-RN?
Educators should ensure that their students are familiar with the different types of items that appear on the NCLEX. NCSBN and Pearson VUE provide a number of resources for achieving this goal. The NCLEX Tutorial provides a hands-on opportunity for students to practice responding to the various item types available on the NCLEX exam using non-nursing content. The 2013 NCLEX-RN® Detailed Test Plans provide a sample NCLEX item after each of the test plan categories utilizing several types of NCLEX items. Additionally, the educator version of the 2013 NCLEX-RN® Detailed Test Plan includes an item writing exercise which provides step-by-step instructions on how to develop an exam item.

What can nursing schools do to prepare for the NCLEX exam? Is there anything we should be doing to assist our students?
To better prepare students for the NCLEX-RN, educators can gain familiarity with the current NCLEX-RN Test Plan, its corresponding content distribution and examination delivery methodology. NCLEX resources are available free of charge for educators and students. These resources include:

- NCLEX Tutorial
- NCLEX Candidate Bulletin
- Test Plans & Detailed Test Plans
- Computerized Adaptive Test (CAT) educational video and presentations
- Twitter
- Facebook
- Frequently Asked Questions (FAQs)

NCSBN encourages educators and students to utilize these resources and become familiar with the NCLEX-RN exam, its delivery, anticipated item types, specific terminology and test site administration rules. All NCLEX online resources may be found at www.ncsbn.org/nclex.htm.

If educators review the practice analysis, will we have a good understanding of what is covered on the NCLEX exam?
Yes. The practice analysis report, available for download on the NCSBN website, very clearly details the survey process and, at the very end of the report, includes the task statements both in survey form and result format. The report includes all the questions asked of entry-level nurses as well as their ratings of how important each task is and how often each task is performed in their work setting. The results of the practice analysis are translated into the test plan, so educators can also see what types of tasks entry-level nurses are performing in the detailed test plan found on the NCSBN website.

What do you recommend for students to practice writing the exam?
NCSBN does not recommend or endorse any review courses or study materials.
**Miscellaneous**

I’ve heard that Pearson provides nursing textbooks and NCLEX review courses. Isn’t this a conflict of interest?

Pearson VUE works with NCSBN to develop and administer the NCLEX-RN and NCLEX-PN examinations. Pearson Higher Education is a separate entity from Pearson VUE and is not involved in the development or administration of the NCSBN-owned NCLEX-RN and NCLEX-PN Examinations.

NCSBN owns the intellectual property of the NCLEX exams and Pearson VUE, pursuant to its contract with NCSBN, is required to keep such NCSBN information confidential and cannot share NCSBN’s confidential information with other entities, including Pearson Higher Education.

**How will CCRNR ensure that accommodation requests are reviewed using the same standards across the country?**

Accommodation requests are currently reviewed by each provincial or territorial regulatory body in accordance with its applicable human rights legislation, the policies of each regulatory body, and the requirements of the exam provider. Requests for accommodations on the NCLEX will be reviewed according to the same legislative requirements and in accordance with regulatory body and NCSBN policies.

**Have the regulatory bodies decided on the time frame for releasing exam results to candidates (i.e. week/two weeks etc)?**

Each regulatory body will be responsible for distributing exam results to its own candidates. The release time may differ slightly depending on the individual regulatory body’s registration/licensure processes. However, as the regulatory bodies will be receiving results directly from the exam provider within days of each exam sitting, candidates can expect to receive their results in a shorter time frame than they would today.

**Are there a maximum number of times that you can retake the NCLEX and will this be consistent across Canada?**

Regulatory bodies across Canada currently allow individuals three attempts to successfully pass the registration exam. Regulatory bodies may also have their own regulations or policies in place regarding the requirements that must be met before an individual can make further attempts. It is not expected that this will change before 2015. However, CCRNR is continually looking at areas for further harmonization across the country, and may review this policy in the future should evidence support a change to the current approach.

**Will candidates who are unsuccessful writing the current RN exam in 2014 be able to write the NCLEX-RN in 2015?**

Yes, candidates who are unsuccessful on the CRNE in 2014, but remain eligible to make further attempts, would be required to write the NCLEX in 2015.

**Will entry to practice competencies be changed, revised, and/or reorganized?**

There is no expectation that the entry to practice competencies, which were recently updated, will be further revised or reorganized as a result of the move to the NCLEX for 2015.
Are there specific requirements that must be met before an individual will be eligible to write the exam?
As is the case today, each provincial or territorial regulatory body determines an individual applicant’s eligibility to attempt the registration/licensure exam. This decision may depend on the individual’s successful completion of educational or other requirements in the jurisdiction. While a candidate can register for the exam directly through Pearson VUE, it is up to the regulatory body to approve the individual to actually write the exam.

**Some materials referenced and/or suggested will be available in French in the future; as materials become available, interested stakeholders will be advised.**