



The purpose of the CRNE is to protect the public by ensuring that nurses entering practice in Canada possess the competencies required to practise safely and effectively. The competencies (i.e., knowledge, abilities, skills, attitudes and judgment) on which the examination is based outline the content to be measured on the exam.

Guidelines on how the competencies are to be expressed within the examination are stated in the exam blueprint. Because of the changes that occur in nursing practice, the competencies and blueprint are reviewed annually, and a comprehensive update is carried out approximately every five years. This update process involves extensive consultation with registered nurses (RNs) and the nursing regulatory bodies from across Canada.

REVISED LIST OF COMPETENCIES

Canadian nurses and regulatory bodies have identified 194 competencies to be measured during the 2005-2010 examination cycle. These competencies have been organized into a framework that reflects a primary health care model. They are grouped under the categories of: Professional Practice (44 competencies), Nurse-Person Relationship (21 competencies), Nursing Practice: Health and Wellness (46 competencies) and Nursing Practice: Alterations in Health (83 competencies).

Each competency is also rated and grouped according to its relative importance for safe and effective practice. Group 1 comprises the competencies identified as **very important** for the safe and effective practice of entry-level RNs; group 2 competencies are identified as **important** for the safe and effective practice of entry-level RNs.

Sample competencies in each of the competency categories, from both groups 1 and 2, are provided on the next page. The entire list of competencies and more detailed information on the competency frame-

BLUEPRINT AND COMPETENCIES

In June 2005, a new Canadian Registered Nurse Examination (CRNE) will be launched. This bulletin is the fourth of a series to keep you informed of issues related to the CRNE and the upcoming changes. It provides information about the revised list of competencies and the examination blueprint.

work is included in the *Blueprint for the Canadian Registered Nurse Examination June 2005 - May 2010* (2nd edition). The blueprint is available for purchase on CNA's website at www.cna-aiic.ca.

BLUEPRINT

The blueprint directs how the competencies are to be measured on the exam. The blueprint also specifies the contextual and structural variables to be considered during the development of the exam. The contextual variables specify the nursing contexts in which the examination questions will be set (e.g., client type, age and gender, culture, health situations and health care environment). The structural variables determine the general design and appearance of the examination (e.g., examination length and format, question presentation, test equating and taxonomy for questions). The following chart provides information on some of the structural and contextual variables included on the new CRNE. More comprehensive information is provided in the blueprint.



Competency Category	Sample Competencies
Professional Practice	Practises within scope of practice (group 1)
	Exercises professional judgment when following agency procedures, policies and position requirements (group 2)
Nurse-Person Relationship	Maintains the boundaries of a therapeutic nurse-person relationship (group 1)
	Maintains a distinction between social interaction and professional communication (group 2)
Nursing Practice: Health and Wellness	Reduces the risk of disease transmission (e.g., adheres to reporting protocols, uses standard precautions, encourages needle exchange program) (group 1)
	Collaborates in implementing strategies related to the prevention/early detection of prevalent diseases (e.g., cardiovascular, cancer, diabetes, mental illness) (group 2)
Nursing Practice: Alterations in Health	Calculates medication dosage correctly (group 1)
	Prepares the person for diagnostic procedures and treatments using appropriate resources (e.g., explanation, information, tests, obtaining specimens from the person) (group 2)

Structural Variables			
Examination Length	240-260 operational questions (This number does not include the experimental questions that will appear on the CRNE.)		
Question Presentation and Format	Presentation:	60 per cent case-based questions 40 per cent independent questions	
	Format:	15-25 per cent short answer questions 75-85 per cent multiple-choice questions	
Competency Categories and Weightings	Percentage (%)		
	Professional Practice	20-24	
	Nurse-Person Relationship	9-13	
	Nursing Practice: Health and Wellness	22-26	
	Nursing Practice: Alterations in Health	41-45	
Contextual Variables			
Type of Health Care Recipient	Percentage (%)		
	Individual Client	40-50	
	Family	25-30	
	Group, Population and Community	20-30	
Age and Gender		Male (%)	Female (%)
	0 to 18 years	10-15	10-15
	19 to 64 years	27-35	27-35
	65 to 79 years	5-10	5-10
	80+ years	1-3	2-5

MORE INFORMATION

The *Blueprint for the Canadian Registered Nurse Examination June 2005 - May 2010* (2nd edition) can be purchased from CNA's website: www.cna-aiic.ca.

The *Canadian Registered Nurse Exam Prep Guide* (4th edition), to be released in early 2005, will provide further information about the CRNE as well as almost 300 practice questions, answers and explanations, references, test-taking strategies and study tips.

In addition to this bulletin, the following CRNE bulletins are available on CNA's website: www.cna-aiic.ca.

CRNE Bulletin No. 1 – Overview of upcoming changes to the CRNE

CRNE Bulletin No. 2 – Implications of changes for 2004-2005 writers including sample short answer questions

CRNE Bulletin No. 3 – The *LeaRN* CRNE Readiness Test.

The CRNE Bulletin is published by the Regulatory Policy department of the Canadian Nurses Association (CNA).

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