



## EXAM DEVELOPMENT PARTICIPATION FORM

*Information will be kept confidential.*

Assessment Strategies Inc. (ASI) would like to thank you for your interest in participating in the development of the *Canadian Practical Nurse Registration Examination* (CPNRE). The success of the CPNRE exam development process heavily relies on the participation of subject matter experts from across the country that represent all domains of practical nursing.

This is a unique opportunity to help advance the practical nursing profession and network with colleagues from across the country, while both developing and sharing your knowledge, expertise and skills.

ASI develops and maintains the CPNRE in collaboration with the provincial/territorial regulatory authorities.

A brief overview has been provided below on the nomination selection process, the selection of participants for the item writing sessions, the CPNRE examination, and the item writing process.

### NOMINATION SELECTION PROCESS

Jurisdictions rely on the Terms of Reference and several other criterion including knowledge of current practice for entry-level practical nurses.

Participants must have:

- a current RN or PN registration/license;
- basic computer skills;
- an active email address.

Participants must also:

- be working in the field during their term of commitment to participate in the CPNRE development process;
- read the Terms of Reference for Item Writing Sessions prior to submitting their name to their jurisdiction;
- **provide assurance that they are not involved in the conduct of test preparation courses or study groups (or have not been during the last 12 months) for the CPNRE, that all questions to be submitted are a result of their own work and that all questions developed during the CPNRE development process are the sole property of ASI and are to be used only by ASI.**

The term of commitment for Participants is **one year**, at which time a new application must be submitted to ensure accurate contact information as well as information about employment and previous exam development participation.

Once nominated, jurisdictions will then contact the participant and inform them that his/her name as been forwarded to ASI and that they may be contacted regarding future participation.

### SELECTING PARTICIPANTS FOR ITEM DEVELOPMENT

The selection of participants from the national list of nominees takes into consideration several important factors. Such factors include jurisdictional representation, areas of responsibilities, preferred working language and availability. Overall, the intent is to obtain a balance between these factors to ensure that each item development session includes the best possible blend of participants to yield high quality items for the CPNRE examination test bank.



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### **CPNRE**

The CPNRE contains several hundred test items that were written, reviewed, and revised by subject matter experts from across Canada. Every item on the examination is selected from a large body of test items (which is referred to as the test bank) that must be continually updated and replenished to reflect the entry-level competencies required of practical nurses beginning to practice. In a typical year, between 5 and 7 item development sessions are necessary in order to maintain the test bank.

### **ITEM WRITING**

An item writing session is normally conducted over a 5-day period and involves 5 participants and a test consultant from ASI to guide the process. The first day is dedicated to developing the skills and expertise necessary to become proficient and efficient writers of test items. This includes tips and hints for writing effective test items as well as becoming familiar with the computers and software designed for the item writing sessions. With practice and guidance, participants will progressively improve their skills and become efficient at developing test items.

Should you have any questions about upcoming item writing sessions, please do not hesitate to contact Assessment Strategies (**1-888-900-0005**). We look forward to your participation and thank everyone for their interest in the CPNRE exam development process.



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We are pleased you are interested in offering your time, skills and expertise to assist with the Canadian Practical Nurse Registration Examination (CPNRE). This is a unique opportunity to help advance the practical nursing profession and network with colleagues from across the country, while both developing and sharing your expertise and skills.

If you haven't already done so, please read the Terms of Reference for Item Writing before completing both pages of this form. Once completed, send the form to your regulatory authority for review. Should you be nominated, your name will be forwarded to ASI, and a representative from ASI, may contact you regarding your future participation. The term of commitment for participants is one year, at which time a new application must be submitted to ensure accurate contact information as well as up-to-date information about your employer and previous exam development participation.

Please **PRINT** or **TYPE** all requested information.

### *This section to be completed by the PARTICIPANT*

I. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Registration No: \_\_\_\_\_ Regulatory Authority: \_\_\_\_\_

Home Address: \_\_\_\_\_  
(Street Address) (City) (Province / Territory) (Postal Code)

Business Address: \_\_\_\_\_  
(Street Address) (City) (Province / Territory) (Postal Code)

Email Address (essential): \_\_\_\_\_  
(Email is the primary mode of communication used to contact participants)

Telephone: ( ) \_\_\_\_\_ ( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
(Home) (Business) (Fax)

Years of experience as a registered nurse or practical nurse: \_\_\_\_\_

Area of interest:  Item Writing  Item Revision  Translation Review  
Preferred working language:  English  French  Either  
Preferred mailing address  Home  Business



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### 2. Current employment information

Employer: \_\_\_\_\_

Employment setting: \_\_\_\_\_

Current position: \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_  
MM/YY MM/YY

Area of responsibility: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Additional information can be submitted on separate sheet)

### 3. List your previous participation on exam development committees/groups

Year	Committee / Group	Year	Committee / Group

### 4. The following criteria must be met in order to participate in Exam development for the CPNRE

- A current RN or PN license/registration
- Basic computer skills
- Active email address

5. Participant signature: \_\_\_\_\_ Date: \_\_\_\_\_

**RETURN COMPLETED FORMS TO YOUR REGULATORY AUTHORITY**

### 6. This section to be completed by the REGULATORY AUTHORITY

SIGNATURE OF JURISDICTIONAL OFFICIAL: _____
TITLE: _____
ORGANIZATION: _____ DATE: _____