Substantially Equivalent Competency Assessment of Internationally Educated Nurses: A Means of Prior Learning Assessment and Recognition

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Recent studies warn that Canada will face a critical shortage of as many as 60,000 full-time registered nurses by 2022 (Canadian Nurses Association, 2009), while Alberta predicts a shortage of 6,000 within the province by 2016 (College and Association of Registered Nurses of Alberta, 2010). Current explanations for the projected shortages are primarily related to budget shortfalls and reductions in employment opportunities along with retirement projections in the profession and the downsizing of educational programs (Baumann, Blythe, & Ross, 2010). At the same time, health care workers with skills and experience similar to those of nurses with international credentials are seeking pathways that would help them prepare for registered nursing practice in Canada and Alberta.

The federal and provincial governments implemented policies that facilitate timely and successful workforce integration of Internationally Educated Nurses (IENs) who have immigrated to Canada (Human Resources and Skills Development Canada, 2009). A tool and process grounded in Prior Learning Assessment and Recognition (PLAR) principles was designed to determine if an IEN has the appropriate foundational knowledge, skills and attributes for registered nurse (RN) practice in Canada. The tool and process provide professional regulatory authorities additional information they use to assist them in decisions regarding registering and licensing IENs for RN practice. The purpose in this article is to describe a competency assessment process that recognizes prior learning and experience of international health care workers.

According to the Alberta Health Professions Act (Alberta Queen's Printer, 2000), IENs may provide evidence of competence in the practice of the profession through a combination of education, experience, practice or other qualifications that demonstrate the competence required for registration as a regulated member. If documentation is insufficient, then IENs may be assessed to determine if they possess substantially equivalent competencies to that expected of the entry-level registered nurse educated in Alberta. Under Alberta legislation, IENs may be required by the provincial RN regulatory authority to complete a Substantially Equivalent Competency (SEC) assessment to determine their preparedness to provide safe, ethical and competent nursing care. In this assessment, IENs progress through a series of assessments guided by specially trained registered nurse assessors who compare the IEN's knowledge, judgment and performance against entry-to-practice nursing competency benchmarks set for all registered nurses working in Canada.

Background of the SEC Assessment

In 2003, the reality of a future nursing shortage triggered Human Resources and Skills Development Canada (HRSDC) to fund a project at Mount Royal University (MRU) (formerly Mount Royal College) to assess the impact of PLAR on the ease of admissibility and placement of IENs into employment in nursing and into educational programs (Mount Royal University, 2006). At the time of the project, PLAR in nursing was more often used to assess and acknowledge learning or experience for the purpose of awarding credit in an academic

institution, and seldom used to establish the required knowledge, skills and abilities for functioning successfully in employment settings, that is, for meeting qualifications as a RN for a career or workplace. The concept of PLAR was chosen for the project, and subsequent SEC assessment development, as it was a process that allowed individuals to demonstrate how their knowledge, skills, attitudes and capacity to make judgments were relevant to occupational requirements (Mount Royal University, 2006; Innerd, Green, Towson, & Collins, 1997). The use of PLAR to assess competencies in nursing was considered an "attempt to move away from individual opinion towards assessment based on observation, description and analysis of nurses' work" (Redfern, Norman, Calman, Watson, & Murrells, 2002, p. 54). MRU was interested in the application of PLAR strategies for supporting IENs in meeting the requirements for registration as an RN in Canada, but was cognizant of the critical importance of meeting the rigor of other professional assessment and evaluation models.

The goal of the Mount Royal University PLAR project was to demonstrate the impact of a comprehensive, systematic method of assessment in nursing to improve access to nursing education programs and accelerate graduation and employment of nurses into the labor force. The study resulted in the development of a series of SEC assessment tools and a service that would provide the provincial RN regulatory authority information regarding the IEN's nursing competencies that would subsequently inform decisions about granting the IEN access to the Canadian Registered Nurse Examination (CRNE) and eligibility for registration. In turn, IENs have an opportunity to recognize their strengths, as well as identify areas requiring growth in knowledge and practice to help prepare for the CRNE.

Through a mixed-method study with an emphasis on qualitative research, the SEC assessment tools were tested for validity, reliability, authenticity, currency and sufficiency with fourth year baccalaureate students using the CRNE competencies. To date, the assessment tools and SEC assessment processes continue to undergo testing to ensure their trustworthiness as an assessment tool of prior learning within the context of nursing knowledge and practice at an entry-to-practice level.

IEN-Initiated Process

The starting point for an IEN interested in nursing in Alberta is to contact the provincial RN regulatory body. The IEN will complete an application to the regulatory authority to be assessed for eligibility for licensure as a registered nurse (RN). The regulatory authority assessment involves consideration of a number of factors revealed through review of educational transcripts, nurse registration verifications, and other application documents providing information regarding competence to practice. If the regulator is unable to establish that the applicant is substantially equivalent in competence through the review and assessment of application documentation, the IEN is referred to the Mount Royal University IEN Assessment Centre to complete an SEC assessment. Demographic data about the IEN is not provided to the Assessment Centre to support the expectation of the assessors maintaining objectivity. Assessors are not informed about the geographic location of the IEN's original place of education or practice in order to promote fairness and reduce bias, predisposition to opinion or profiling based on countries of origin. However, the demographic data available indicates that the majority of IENs attending the IEN Assessment Centre originally come from the Philippines, India and the African Congo countries. At present, 75 percent of all IENs applying for registration through the RN regulatory authority are referred for SEC assessment.

IEN registration applicants/candidates who decide to book an assessment following regulatory authority referral are advised about the process either by phone or in person at the Assessment Centre. Candidates are sent information about the SEC assessment and referred to the MRU IEN Assessment Centre website.[1] The website is provided to assist IENs with understanding the assessment process; it offers information on how to prepare for an assessment and provides study examples that help IENs familiarize themselves with the scope of practice required of an RN working in Canada. IENs are also invited to come to the MRU IEN Resource

Library to review textbooks, videos and/or work with other IENs in preparation for the SEC assessment. IEN candidates must meet the regulatory authority's English language requirements in speaking, listening, reading and writing prior to being referred to the Assessment Centre to increase the likelihood that any identified areas requiring growth during the assessment components are related to nursing knowledge or practice versus language difficulties.

The Assessors

The assessors who complete the SEC assessments are specially trained Bachelor of Nursing-prepared registered nurses, who have at least five to 10 years of experience working within the Canadian RN scope of practice in a variety of health care settings. The assessors come from different clinical, educational, administrative or research nursing backgrounds where entry-to-practice RN competencies are the foundational requirement. Experience in educational or clinical staff evaluation is also a criterion for the role. Assessors are often referred to as "nurse consultants" because of the amount of consultation that is expected between them to make determinations based on sufficient substantiating evidence and recognition of converging, diverging and congruent data. The blend of clinical, educational, administrative, and research practice that the assessors bring to the SEC assessment process adds breadth and depth to often complex analytical decisions.

The assessors participate in a three to four month orientation that includes theory review, observation, participant observation, and mentorship of SEC assessment delivery, analysis and synthesis in report writing. Ongoing mentorship, peer review, professional development, and recalibration efforts to maintain standardized process, content validity and inter-rater reliability are addressed below.

Different Types of SEC Assessments

IENs referred to the Assessment Centre by the provincial RN regulatory authority may be required to complete a variety of assessments. The most common referral is for a "Complete" SEC assessment. A "Complete" assessment takes four-and-a-half days. It comprehensively addresses entry-to-practice (CARNA, 2006) knowledge and practice in medical-surgical-community nursing, maternal-newborn health, child health, and mental health nursing. An IEN might be referred for a "General" SEC assessment, which is a two-day assessment that addresses generalist knowledge and practice in a variety of medical-surgical-community and focus (specialty) situations. Lastly, the candidate might be referred for one to three "Focus" assessments that address knowledge and practice in three focus areas (i.e., maternal-newborn health, child health and mental health nursing). Focus assessments can take between one to three days depending on the referral combination.

SEC Assessment Criteria

In a simulated setting and cross section of time, the generalist entry-to-practice competencies outlined in the Jurisdictional Competency Project (Process): Entry-level Registered Nurse Practice (Black et al., 2008; Executive Director Counterparts of the Registered Nursing Regulatory Bodies in Canada, 2006, 2008) are used as the benchmarks for the assessor to measure the candidate's knowledge and practice competencies. To complete a SEC assessment, the assessor uses lists of operational definitions of the competencies, key performance indicators and standardized descriptors to measure an IEN's nursing knowledge, judgment, values, attitudes, and performance against the MRU SEC assessment template that was derived from the multijurisdictional entry-to-practice competency document. The main competency categories addressed are:
- Professional Responsibility and Accountability
- Knowledge-Based Practice: Specialized Body of Knowledge
- Knowledge-Based Practice: Competent Application of Knowledge
- Ethical Practice
- Service to the Public
- Self-Regulation

The Components of the SEC Assessment

The SEC assessment process has been refined over the past four years based on the experiences of MRU in assessing over 1,300 IENs. In addition, the revisions take into consideration the critiques, psychometric reviews and feedback received from other jurisdictions as they implemented the MRU tools and processes. The above listed competency categories (which, more specifically, include 78 entry-to-practice competencies) are assessed through a series of assessment tools. Augmenting the usual PLAR strategies such as examinations, demonstrations and portfolios, the MRU assessment model uses a multiple strategy approach that combines written examinations, "case management" situations, modified Objective Structured Clinical Exams (OSCEs), and candidate self-assessments to assess the IEN's competencies in relation to the competencies for entry-to-practice as a RN in Canada. This is consistent with PLAR literature, which indicates that competence assessment should use strategies that cover assessment of cognitive, affective and psychomotor skills in nursing if these are integral to the definition of competence (Redfern, Norman, Calman, Watson, & Murrells, 2002). More recent literature supports using a combination of assessment methods because,

> In a practice discipline, content knowledge is a necessary but insufficient condition for safe practice. Nurses must also have the ability to recall the knowledge that is relevant for a particular clinical situation … the ability to use relevant knowledge in particular contexts.
> (Tanner, 2011, p. 491)

"Single assessment strategies do not begin to capture the many and varied competencies that mark the nursing discipline" (Mount Royal University, 2006, p. 18).

The assessment strategies introduced above were developed to provide a more complex, holistic understanding of IEN strengths, capacities and areas of weakness. These strategies provide alternative measures of nursing knowledge, health assessment skills, psychomotor skills, critical thinking skills and clinical judgment skills through demonstration, interview and clinical lab assessment.

More specifically, the multiple choice and short answer exams provide an opportunity for the candidate to demonstrate nursing competency through theoretical knowledge of disease process, nursing process, health promotion, population health, pharmacology and communication. Many of the questions resemble those in the Canadian Registered Nurse Examination (CRNE) preparatory guides (Canadian Nurses Association, 2010; Marshall-Henty & Bradshaw, 2011; Schow & Murray, 2009). The clinical judgment scenarios are short (three-minute), specific, written scenarios that the candidate reads and then provides verbal responses to the assessor. The scenarios contain client data and/or information and a question for the candidate. The clinical judgment scenarios assess the candidate's ability to think deliberately and critically through a nursing situation in a timely manner. There is an opportunity to apply essential and relevant knowledge, consider possibilities and options and make reasoned, reflective and insightful decisions and actions in a variety of situations. IENs are encouraged to provide rationale as part of their response.

The modified triple jump is a case study made up of three main themes relating to nursing process and nursing frameworks. The candidate has the opportunity to assess, plan, implement and evaluate nursing practice related to a typical case situation. This process is very individualized, as the direction of the triple jump is based on the candidate's initial assessment/ interpretation of the situation. The triple jump assesses the candidate's knowledge, problem solving and self-directed learning abilities, as well as critical thinking skills and ability to use a nursing care framework. It is also helpful in assessing the candidate's ability to organize, prioritize and rationalize. The case studies also provide an opportunity to assess diversity, lifespan issues, cultural competency, knowledge of primary health care principles and principles of safety, and knowledge and understanding of the Canadian health care system.

The Objective Structured Clinical Exam (OSCE) is an opportunity for candidates to work through a simulated case study situation and demonstrate their nursing skills in a practical manner with either a standardized

patient or a high fidelity simulation mannequin. The standardized patient role involves scripts enacted by other nurse consultant assessors or persons with nursing background to enable feedback to the assessor to verify the quality and quantity of care given and received. Both standardized patient and high fidelity simulation OSCEs involve follow-through case situations, including history-taking, physical examination, responding to changing client and situational status, collaboration with other health professionals, counseling, referral making and use of the nursing process in client management. The OSCE is probably the most heavily weighted tool, as it is used to assess clinical skills performance, communication, clinical judgment, assessment, decision making, implementation of nursing interventions and evaluation. It is used to help identify strengths and areas requiring growth in application of knowledge. OSCEs are used to assess the candidate's knowledge and skills in:

- nurse-client relationships
- critical thinking and clinical judgment skills
- health assessment and nursing skills
- ethical decision making skills
- pharmacology and pathophysiology
- rapidly changing client situations
- documentation

The self-assessment tool is an opportunity for candidates to evaluate their practice and provide examples of how they feel they meet the CARNA Nursing Practice Standards when reflecting on their practice from their original country of practice. Each candidate who comes for a SEC assessment completes a self-assessment. The tool assesses the candidate's understanding of his or her current scope of practice and interpretation of provincial Nursing Practice Standards (CARNA, 2006). It is helpful in assessing competencies such as research integration, self-regulation/continuing competency, interpretation of policies and collegial relationships.

The Analysis and Synthesis of the SEC Assessment

During the SEC assessment, the assessor uses multiple strategies to observe patterns within the IEN's knowledge, performance, values and attitudes. Through the use of the variety of tools, the assessor is able to understand the multiple dimensions of a nurse's practice. Given that nursing is not simply a quantifiable science, but instead includes many different ways of knowing such as evidence-informed practice, interactional knowing, intuitive knowing, esthetic knowing and practical wisdom, the multiple tool approach assists in illuminating patterns in the nurse's practice. Similar to "triangulation" in quantitative data collection, assessors are looking at how the information from all sources converges. The assessor can recognize patterns in the IEN's practice when he or she brings all the information together. Sufficiency in observations is determined similar to the "saturation" criteria of qualitative data collection -- that is, when the assessor begins to observe the same practice repeatedly and no new aspects are emerging in the various assessment strategies, the assessor is able to make a judgment about the pattern and move on to another area of assessment. This helps defend the "trustworthiness" of the data.

The assessor is also looking for congruence across measurements. Congruence is related to convergence and saturation; however, congruence looks at agreement between the data. Given that assessors are analyzing human behavior, it is quite conceivable that there will be discrepancies in performance on one assessment when compared to another. The assessment tools provide the assessor opportunities to revisit apparent discrepancies and explore them further to determine if there is agreement in behavior among the tool findings or if the discrepancy reveals an important dimension of the IEN's practice. The multiple tools also help to recognize divergence reflected in thoughts, values and beliefs that may have been missed with the use of only one tool. The finding from one tool is not privileged over another. The assessor needs to understand the "whole" and not look at only one element in isolation. There is indeed a "gestalt" element to the SEC assessment that is linked to the analysis of convergence, congruence and divergence. The assessor needs to understand the significance

of the observation within the "whole" of the assessment and analyze the IEN's overall capacity or potential to function in the Canadian health care system based on the entry-to-practice competencies. A review of the literature by Redfern et al. (2002) supports the perspective that competence assessments should use multiple methods to increase validity and promote comprehensiveness in the assessment of the complex skills required by nursing students.

The results of the individual SEC assessments are brought together in a summative report for each candidate. The report includes a synthesis of the candidate's knowledge and skills using a four-point assessment criteria scale. The scale illustrates whether the candidate "met, high partially met, low partially met, or did not meet" each of the competencies. These determinations are made using operational definitions of the competencies as well as leveling criteria to address quality, comprehensiveness, depth, frequency and independence. The SEC assessment report also includes summary comments categorized by thematic competency clusters, accompanied by substantiating or supporting examples that illuminate the candidate's strengths and areas requiring growth. This summative report is peer reviewed two times prior to leaving the Assessment Centre to check for clarification of meaning and accuracy by ensuring there is sufficient substantiating evidence, consistency of style and flow of the report. The summary report is then submitted to the regulatory authority within a three-week turnover time from first day of assessment to submission.

Report to the Regulatory Authority

The summative SEC assessment report is of particular significance to the regulators as it provides them with information that is unattainable from written documents about a nursing education program or from employer reference letters. The provincial RN regulatory authority reviews the SEC assessment report in relation to the IEN's nursing knowledge, judgment and practice skills in conjunction with the information they already have in the candidate's application, and makes decisions in relation to the IEN's licensure application. The regulatory authority may decide the applicant is eligible to write the Canadian Registered Nurse Examination (CRNE) and for temporary registration as a graduate nurse while completing the remaining requirements toward registered nurse registration. They may refer the candidate back for further specialty SEC assessment, and may require the candidate to complete one or more nursing theory and clinical bridging courses to address competency areas requiring growth. If competency limitations identified by the regulatory authority are extensive in number and depth such that there is not a sufficient foundation upon which to build a bridge to Canadian nursing practice, the regulatory authority may decide that the applicant must take an entire basic registered nursing education program as his or her route to registration.

Partnerships and Assessments Outside of Alberta

In 2008 - 2010, Mount Royal University developed a partnership with the western provinces and northern territories by sharing the MRU model for IEN assessments through a Capacity Building for IEN Assessment (CBIA) project. The project was intended to clarify for IENs the processes related to becoming a registered nurse in Canada. Educating, collaborating and planning for future standardization across the provinces and territories was ongoing within the CBIA project. In 2007, MRU also partnered with RN educators in Nova Scotia to support them in building capacity through use of the MRU process for IEN competency assessments.

On two occasions, Mount Royal University IEN assessment teams performed assessments overseas to once again ensure that IENs applying to the regulatory authority for RN licensure were able to demonstrate Canadian entry-to-practice RN competencies. Consistent with regular practice, MRU and the provincial RN regulatory authority worked together to help IENs understand the RN scope of practice through the SEC assessment and licensure process so that IENs were fully aware of practice expectations prior to immigrating to Canada. Prior to immigration, IENs also became more aware of their knowledge and practice strengths, as well as areas requiring growth and the steps that were required to meet the standards of practice.

Criticisms of the SEC Assessment Process and the Responsive Actions

Processes that involve humans evaluating humans are often under close scrutiny; the MRU assessment process is carefully observed by regulatory authorities, government, labor unions, employers, nurse educators, fairness commissions and the IENs themselves. Criticisms have focused on the fairness of the process, level of subjectivity, possible bias, questionable validity of the tools and inter-rater reliability concerns. In addition, the question about qualitative data collection versus quantitative data collection surfaces from a psychometric point of view.

The hypothesis that the SEC assessment content and process benchmarks were too high for an IEN at the entry-to-practice level compared to what is expected of Canadian educated nurses at an entry-to-practice level was addressed through a research study by Besner, Jackson, McGuire, & Surgeoner (2010). The purpose of their study was to examine equity and fairness of the Mount Royal University SEC assessment process for IENs related to what is normally asked of Canadian educated nurses. The research question was whether the SEC assessment process subjected IENs to the same standard of competence as expected of fourth-year Bachelor of Nursing (B.N.) students, or to experienced Canadian educated RNs. The researchers concluded that although the sample was small, without exception, the practicing nurses and graduating students performed at a significantly higher level than did the IENs, suggesting that the SEC assessment is a fair and equitable way to identify candidates who are inadequately prepared to meet expected standards of practice in Canada.

The Besner et al. study (2010) confirmed that IENs typically perform poorly with respect to competencies that assess the breadth and depth of nursing knowledge expected of Canadian graduates (i.e., primary health care, comprehensive health assessments, professional culture, etc.). Hence the researchers recommended IENs have an opportunity to complete a Nursing in Canada course prior to doing an SEC assessment. As a result of this study, as well as an ongoing recommendation by the IEN Assessment Centre assessors, a Nursing in Canada course was developed through the Mount Royal University Bridge to Canadian Nursing Program for IENs to learn the professional role expectations of a Canadian RN prior to the SEC assessment.

Through this same research study, Besner et al. (2010) further explored the perception of potential subjectivity within the SEC assessment process. The study indicated that "approaches [are] employed to help establish validity (the extent to which the SEC assessment process measures the construct of interest) and reliability (the extent to which the SEC assessment process measures consistently)" (p. 18). Specifically, some of the approaches to address subjectivity that were listed in the report included:

- using multiple assessment tools to assess knowledge, skills and attitudes;
- using strategies to draw out congruence, convergence and divergence to verify determinations;
- a sufficient sample of performance observed (over 1,300 IENs assessed) to reference to the norm;
- in-depth orientation for new assessors and nurses who act as standardized patients;
- lists of key performance indicators and standardized answer keys;
- operationally defined competency lists;
- descriptor rubrics for determinations of whether competencies are met, high partially met, low partially met, or not met;
- peer reviews of SEC assessment reports, through which it may be suggested to the assessor to further substantiate his or her determinations or descriptions in the report, clarify meaning, or make corrections to the flow of the report;
- other assessors or persons with nursing backgrounds playing the standardized patient role using standardized scripts in regular or high fidelity OSCEs to offer feedback to the assessor to verify the quality and quantity of care given/received;
- informal peer consultations and general decision-making, with no particular IEN in mind;
- professional development activities, which build on consistent expectations, analysis and problem-solving.

The research report states that following the interviews, the researchers were satisfied that SEC assessments are not unduly influenced by personal biases and measures are being taken to decrease or eliminate subjectivity (Besner et al., 2010).

Reliability and validity of the tools have been challenged by psychometricians who prefer high-stakes tests consisting of multiple choice exams and standardized time constrained OSCEs. Experience and research, though, suggest a profound dissatisfaction with standardized tests alone because they are not sufficiently authentic to predict the relationship between performance on the exam and performance in professional practice (Hart, 1994; Ryan, 1995; Sacks, 1999; Tanner, 2011).

Consequently, there is an interest in alternative assessments that can demonstrate complex forms of learning and take a holistic view of competency assessment (Glasgow et al., 2006; Van Kleef, 2011). The MRU assessment process combines standardized and holistic competency assessment methods based on the assessment principle of "fitness for purpose" (e.g., multiple choice exams, simulations, scenarios and physical demonstrations) (Maki, 2010a). The tight alignment between MRU's assessment strategies and the circumstances that IENs will experience as practitioners is a strong component of the SEC assessment because it enables inferences about how well IENs will actually integrate, apply and draw from their learning when practicing. In other words, the alignment contributes to the predictive validity of the tools. Concepts such as acceptability, comparability, cognitive complexity, fairness and meaningfulness are being explored for their contribution to the validity of the MRU tools (Baartman, Bastiaens, Kirschner, & Van der Vleuten, 2006; Baartman, Prins, Kirschner & Van der Vleuten, 2007).

Another area that attracted considerable critique was inter-rater reliability and the flexible testing scenarios. Further actions are being taken to maintain inter-rater reliability at the minimum standard of 80 percent. For example, consistency between assessors and recalibration of assessors is being addressed through an assessor peer review of candidate summary reports, development of videotapes of simulated SEC assessments for assessors to use in a pre-assessment preparation and orientation, and annual review of assessors using videotapes of assessments (Maki, 2010a; 2010b). The Assessment Centre also plans on continuing to build on professional development opportunities to test appropriate inferences. Standardized practice has also been enhanced by the use of additional operational definitions, specific leveling criteria, descriptor rubrics, interpretive documents, lists of standardized expectations and standards for report writing and clustering of competency themes. Exams were computer analyzed resulting in a reliability coefficient of at least 0.8 on all exams.

After five years of intense use of the assessment tools and processes, the assessment team has developed in-depth knowledge of the strengths of the tools and areas for further development. A comprehensive review and critical analysis work plan is currently in place to examine all SEC assessment strategies and tools for the purpose of establishing renewed validity, reliability, defensibility, efficiency, cost effectiveness and sustainability. A new table of specifications composed of an interpretive document; taxonomy (knowledge, application, critical thinking) and content domains, as well as structural, contextual and clinical variables has been created to determine present percentages of content and target percentages. These target percentages of content are based on current literature, national/provincial health statistics, as well as CRNE and regulatory authority entry-to-practice competency requirements to ensure that all SEC assessment components are measuring relevant content and expected scope of practice. Development of further key performance indicators based on best practices, refining, updating, developing new banks of items and rebalancing of tools is ongoing. The critique of the MRU assessment tools and processes has reinforced the commitment of the assessors to continue to use both traditional and contemporary assessment strategies. The incorporation of new forms of technological assessment delivery and analysis strategies, as well as further use of high fidelity simulation techniques are also ongoing considerations.

Sustainability of the SEC assessment process requires ongoing investment from government, professional

regulators, employers and educators. According to the Pan-Canadian Framework for the Assessment and Recognition of Foreign Qualifications (Human Resources and Skills Development Canada, 2009), internationally educated professionals continue to play a vital role in sustaining Canada's economic strength and high quality of life, and therefore concerted efforts by government, regulators, employers and educators on the assessment and recognition of international qualifications to support immigrant application must continue. The purpose of the Pan-Canadian Framework includes a public commitment to continue to support qualification assessment and recognition practices.

As stated, the purpose of the SEC assessment process is to identify the IEN's knowledge, skills, values and attitudes of nursing practice within a Canadian health care context. Through the SEC assessment, IENs learn to recognize their strengths, as well as become aware of their areas requiring growth to meet the Canadian RN scope of practice requirements. The SEC assessment is about identifying potential and capacity for RN practice. The usefulness of the SEC assessment process is that it acknowledges the IEN's strengths, provides rich descriptions of the areas requiring growth in a nurse's practice to assist the IEN, reflects the complexities of nursing practice, recognizes the uniqueness of the population being evaluated, and gives the regulatory authority the information it needs for registering and licensing IENs. Thus, the MRU IEN Assessment Centre has purposefully continued to use a variety of robust assessment strategies, typically used in undergraduate B.N. programs and PLAR activities, and strategies that provide the IEN an opportunity to make the best case for themselves.

Future Research

There is room in the literature for further research on the process, outcome and impact of standardized and holistic assessment and evaluation strategies in the area of SEC assessments of IENs. For example, a longitudinal study following IENs from regulatory authority application, through SEC assessment, bridging courses, through the national exams, and integration into the workplace would be valuable to yield further information about the value of the SEC assessment components to registration and licensure. This type of study would also offer information about the IEN's lived experience, the helpful and hindering processes, the barriers, the choices, further needs, resources, points of IEN departure in the recruitment – work integration trajectory and outcomes. A study looking at trends and patterns of IEN strengths and areas requiring growth is also warranted to assist with development of bridging course curricula, as well as to offer data that further assists regulatory authorities with licensing decisions.

Evaluation of current tool development is necessary, for example, the continued development of interpretive documents and mapping to determine accuracy, validity, sufficiency, authenticity/item reliability and inter-rater reliability will need to be ongoing. A mixed method study that examines the costs and benefits of the present multiple assessment strategy approach would facilitate further development of assessment processes and tools.

Outcome studies are needed to examine if the SEC assessment process and bridging course completion make a difference in health outcomes. A study to assess if the present processes are a sustainable health human resource strategy is also warranted. Exploration of sustainable financial models would be valuable to others considering implementation of a similar process. Research to assess if the SEC assessment process is applicable for other prior learning assessment and recognition purposes would be of interest as well, including its applicability for other health professions.

Conclusion

Internationally educated nurses report that the Substantially Equivalent Competency (SEC) assessment has provided them with an opportunity to identify their strengths and areas requiring growth in their nursing

knowledge, judgment and practice, which, together, they believe help them to understand the role and expectations of an RN working in Canada. IENs also report that the SEC assessment assists them in understanding the possible need for bridging education and helps them to know what they need to study to prepare for the CRNE. SEC assessment reports provide the regulatory authority with information that would otherwise be unavailable to them in the assessment process. The SEC assessment tools and processes that recognize prior learning and experience continue to undergo evaluation and development to address their trustworthiness and the validity and reliability of their measurements. Through the use of the SEC assessment process to identify knowledge and practice strengths, areas requiring growth, and the accessibility to educational bridging programs to meet the Canadian RN scope of practice requirements, IENs are better positioned for success on the CRNE and success in their transition to the workplace. The Mount Royal University IEN Assessment Centre and the provincial RN regulatory authority continue to work together on SEC assessment expectations, special projects and research initiatives to ensure safe, competent nursing practice is provided to the public by internationally educated nurses.

Note

[1]   The Mount Royal University Internationally Educated Nurses Assessment Centre website is http://www.mtroyal.ca/ProgramsCourses/FacultiesSchoolsCentres/HealthCommunityStudies/Programs/IENAssessmentCentre/index.htm.

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