



## Interpreting Your NCAS Report

NCAS produces reports for Health Care Assistants, Licensed Practical Nurses, Psychiatric Nurses and Registered Nurses. These reports are slightly different from one another because the competencies we are assessing vary from one profession to the next.

NCAS does not make any decisions about registration. We also do not make any recommendations or decisions about any kind of additional education or training you might need. Both of those kinds of recommendations are made by the nursing regulators and the health care registry.

We send your report directly to you AND to the regulator or registry that referred you.

**Please note:** NCAS may occasionally modify report templates to reflect changes in performance reporting.

### Focus on Competencies

Because NCAS assesses your competency to practice, our reports are competency-based reports. We are not reporting on your education or work experience, or on any other evidence you might offer about your ability to practice. NCAS simply reports on your ability to demonstrate certain skills, values and behaviours on the day you completed your assessments.

The regulators who use and designed the NCAS service define a competency as the “ability to apply particular knowledge, skills, attitudes, and values to the standard of performance required in specified contexts” (Farley & Clewley, 2005, p. 59). The regulators defined the “standard” by which you are being measured as “entry-level”. **In other words, NCAS is assessing whether or not you can demonstrate the competencies someone in your chosen profession should be able to demonstrate when they first enter practice.** The “entry-level” competencies are what the regulators have determined are absolutely critical for ensuring that you can provide safe, effective and ethical care. These competencies differ from profession to profession, and are the same competencies that a Canadian-educated health care assistant or nurse is required to meet. The specific entry-level competencies for your profession can be viewed in the How to Prepare section on the NCAS website at [www.ncasbc.ca](http://www.ncasbc.ca).

Your report blends the results of your performance on the Computer-Based Assessment, the Simulation Lab Assessment, and the Oral Assessment. Each of the three assessment tools covers different competencies. Sometimes they cover the same competencies, but in unique ways. So, blending the results of all three assessments provides a full picture of your competence.

## Your Report – Basic Data

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NCAS ID	XXXXXX	This is the identification number you were given by NCAS when you were first referred.
Name	XXXXXX	This is the full name under which you were referred to NCAS
Nursing Role	RN/LPN/RPN/HCA	This identifies the profession for which you've been assessed.
Date of Referral	XX	This is the date on which we accepted your referral from the regulator.

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## Your Report – Section One: NCAS Competency Framework Summary

This section offers you an at-a-glance visual summary of your results as they relate to the overarching Competency Framework for your profession. The framework is made up of competency categories. These are the broadest headings under which all the specific competencies we measure lie. Each profession has a slightly different framework. Here are the categories for each profession:

### *Health Care Assistant:*

- Accountability, Responsibility and Ethical Behaviour
- Collaborative Practice
- Knowledge-Based Practice – Planning
- Knowledge-Based Practice – Providing Care
- Therapeutic Relationship

### *Licensed Practical Nurse:*

- Accountability, Responsibility and Ethical Behaviour
- Collaborative Practice
- Knowledge-Based Practice – Assessment
- Knowledge-Based Practice – Evaluation
- Knowledge-Based Practice – Planning
- Knowledge-Based Practice – Providing Care
- Therapeutic Relationship

### *Registered Psychiatric Nurse:*

- Accountability, Responsibility and Ethical Behaviour
- Collaborative Practice
- Knowledge-Based Practice – Assessment
- Knowledge-Based Practice – Evaluation
- Knowledge-Based Practice – Planning
- Knowledge-Based Practice – Providing Care
- Therapeutic Relationship
- Therapeutic Use of Self

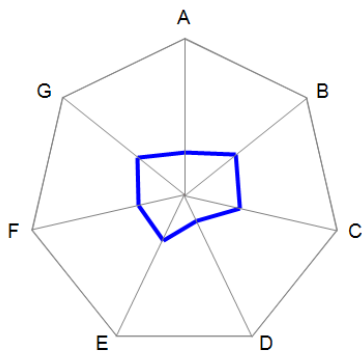
### Registered Nurse

- Accountability, Responsibility and Ethical Behaviour
- Collaborative Practice
- Knowledge-Based Practice – Assessment
- Knowledge-Based Practice – Evaluation
- Knowledge-Based Practice – Planning
- Knowledge-Based Practice – Providing Care
- Therapeutic Relationship

The graph that you see below has taken your performance, related it to very specific entry-level competencies, and then collected them under the headings in the framework.

What does the graph tell you? It offers you a snapshot of your performance in each of these very broad categories. It does NOT identify specific competency gaps because each category, as noted above, is made up of many specific entry-level competencies.

How do you read your graph? Well, in this RN report example below, we are measuring performance in seven categories. The closer the bold, interior line to the perimeter of the graph, the more your competence approaches expected entry-level practice in BC. The closer the interior line to the centre of the graph, the further away your competence is from expected entry-level performance in BC.



Legend	
A	Accountability, Responsibility and Ethical Behaviour
B	Collaborative Practice
C	Knowledge Based Practice: Assessment
D	Knowledge Based Practice: Evaluation
E	Knowledge Based Practice: Planning
F	Knowledge Based Practice: Providing Care
G	Therapeutic Relationship

This graph shows that this individual is not close to meeting entry-level competency requirements in any of the seven areas.

You shouldn't use this section to make assumptions about the kind of education you might need, because it is very general. This section must be read together with section two.

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## Your Report - Section Two: Detailed Competency Assessment

Now we get to a more detailed look at your results. As we've said above, NCAS measures all the entry-level competencies that regulators have identified and that our assessments can measure (not all entry-level competencies can or should be measured by this kind of assessment). Because there are so many entry-level competencies, and because many of them are related to one another, NCAS clusters these competencies into themes like Critical Thinking or Therapeutic Communication. This section of your report focuses on these themes. Sometimes competencies are assigned to more than one theme at the same time because that particular competency is highly relevant to more than one theme. But the themes should still be looked at independently – in other words, strong results in one competency theme don't make up for gaps noted in another thematic area. Together they tell a story.

Note: Because the competencies for each profession differ, the themes also differ across professions, both in number and description. So an RN report may include a theme like Health Promotion, and an HCA report may include a theme like Violence Prevention.

When NCAS assesses your performance, NCAS is assessing whether your responses on the CBA, the actions you took during the SLA, or the decision-making processes you described during the oral assessment, reflect the behaviours that would demonstrate to regulators your competency in a given area. There are only three possible outcomes.

1. Consistently Demonstrated: You consistently demonstrated the expected ability, set of skills or behaviours related to this competency
2. Emergent: You demonstrated emerging but inconsistent mastery of, or proficiency with, an ability, set of skills or behaviours related to this competency
3. Undemonstrated: You did not sufficiently demonstrate mastery or proficiency of an ability, set of skills or behaviours related to this competency

Each box in this section contains a definition of the theme, an outcome (either Consistently Demonstrated, Emergent, or Undemonstrated), and a description of the kinds of behaviours that someone in one of these three categories might display. These descriptions are generic. What that means is that the descriptions don't necessarily describe what you did or didn't do; rather, they describe the kinds of behaviours that someone who fits into that particular category would exhibit. Each box also contains a diagram. The bar in the diagram shows a dotted blue line that indicates how you performed. Let's look at an example:

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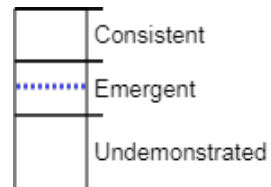
**Mental Health** – *This is the name of the competency theme.*

*The provision for nursing care within the context of a mental health practice environment. This includes care for individuals that are experiencing alterations in cognition, mood or behavior that are coupled with significant distress and/or impaired functioning. This is the definition of this competency theme. Many specific competencies are associated with this theme.*

**Emergent** – *This is the outcome of the assessment for this theme.*

Demonstrates evidence of mental health knowledge of cognition, mood or behavior disorders; however is inconsistent in applying specific interventions required to support the mental health needs of the client. Inconsistent in the use of nursing process and/or does not have a systematic approach of integrating information into the nursing process in the mental health context. Inconsistent use of therapeutic communication when interacting with the client. – *This is the generic description of the behaviours that someone who scores in the emergent category tends to exhibit.*

*This diagram shows that the individual scored in the middle of the emergent category.*



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To gain a better understanding of the competencies, the assessment “blueprint”, and how each assessment measures competencies, please visit our website, and refer to this document:  
<http://ncasbc.ca/Documents/Blueprint2015.pdf>