2017 CLEAR Quick Poll Results

Compiled by members of the CLEAR Examination Resources & Advisory Committee (ERAC)

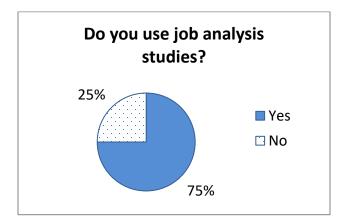
CLEAR periodically issues a "Quick Poll" survey, asking members about their credentialing practices, policies, and issues. These Quick Polls are not designed as scientific studies but allow us to gather snapshot data regarding current practices in credentialing. Here are the results of several Quick Polls from 2017.

Job Analysis

Question: Does your organization use the results of periodic job/task/practice/competency analysis studies to support the development of the credentialing program's education, experience, and/or examination requirements?

Number of responses: 93

Results:



Among respondents providing specific details, more than one half said they conducted periodic practice analysis studies every 3 to 5 years, and about equal numbers said that they conducted these studies very frequently (at least every year to 2 years), or somewhat less frequently (every 6 to 10 years). Practice analysis studies continue to contribute to valid and reliable credentialing programs' education, experience, and/or examination requirements.

Background Checks

Question:

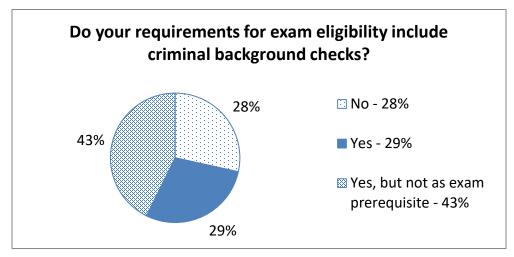
Licensure and certification programs typically require candidates to meet specified eligibility requirements before taking the exam. In addition to specifying education and experience requirements, some programs require a criminal background check.

Do your requirements for exam eligibility include criminal background checks?
□ Yes
□ No
☐ We do <u>not</u> require background checks as a prerequisite for taking the exam, but
criminal background checks are usually part of the application process for licensure of
certification

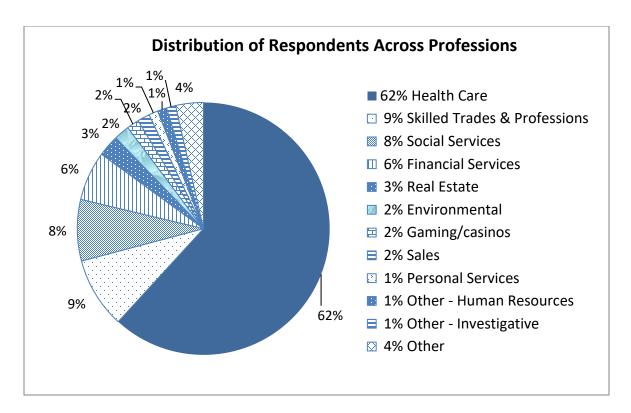
WI	hich best describes the field or profession of your program?
	Health care (including medical, dental, veterinarian)
	Financial services
	Skilled trades (construction, engineering, mechanics, etc.)
	Personal services (cosmetology, massage therapy, etc.)
	Social services (education, counseling, social work, etc.)
	Sales
	Other (please specify)

Number of responses: 253

Results:



Based on fields listed under "other," some responses were incorporated into existing categories, and real estate, gaming, environmental, and investigative fields were added as separate areas. Most respondents were in health care credentialing, and the remainder were distributed across a variety of fields and professions, as shown here:



Health care includes medical, dental, pharmaceutical, and veterinary services. Skilled trades and professions include architecture as well as engineering, construction, mechanics, etc. Personal services include massage therapy, cosmetology, etc. Pesticides and agriculture are included in the Environmental area. Note that some real estate professionals may have selected Sales and so could be included in that category. Additional fields specified for the Other category are child care facility inspection, senior advisors, law/legal services, mortuary/cemetery, and credentialing for multiple professions.

Responses varied by profession. All respondents in environmental or personal services indicated that they do <u>not</u> require criminal background checks. Conversely, all of those in gaming, real estate, and sales indicated that they do conduct background checks—some as an exam prerequisite and others elsewhere in the application process. The table below shows the distribution of responses by profession. Note that the number of persons responding is quite small for some fields. Sales and real estate are reported both separately and combined.

			Yes, but not as
Professional Area	No	Yes	exam prerequisite
Environmental (N=5)	100%		
Financial Services(N=16)	38%	38%	25%
Gaming/Casinos (N=4)		50%	50%
Health Care (N=157)	21%	32%	47%
Personal Services (N=3)	100%		
Real Estate (N=7)		29%	71%
Sales (N=4)		50%	50%
Skilled Trades (N=23)	61%	13%	26%
Social Services (N=20)	30%	15%	55%

Human Resources (N=3)	67%	33%	
Investigative (N=3)	33%	33%	33%
Other (N=9)	33%	33%	33%
Sales/Real Estate (N=11)	1	36%	64%

Exam Retake Policy

Question:

How long must those applying for your professional credential wait to retake an exam following a failed attempt?

□ No wait

 \Box 1 – 3 months

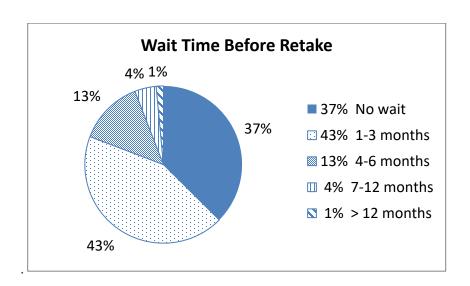
 \Box 4 – 6 months

 \Box 7 – 12 months

 \square >12 months

Number of responses: 203

Results:



A substantial portion (37%) of respondents indicated that no wait time is required; a failing examinee may take the exam at the next offering. A majority of respondents, however, indicated that they require a waiting period of a month or longer before allowing an examinee to retake the exam. For most, the waiting period is six months or less. Only three organizations (1%) require a waiting period of a year or more.

Question:

Aside from wait time, if any, what other criteria must those applying for your professiona
credential satisfy before registering to retake an exam?

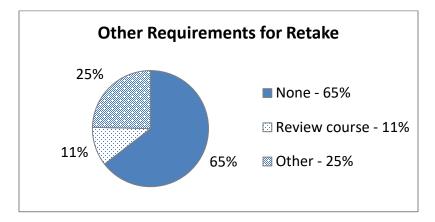
□ None

☐ Complete a review course

☐ Other (If other, please specify)

Number of responses: 203

Results:



There were many variations regarding requirements to take a review course. Some organizations require such a course after one failed attempt; others, only after a specified number of unsuccessful attempts. Some respondents indicated that retake policies differ across exams under their purview. Others indicated that the retake policy is partially or fully determined by the need to ensure an examinee would not see the same exam form on a retake. Some respondents indicated that the only requirement for a retake was to pay an additional fee.

Apart from retake requirements, some organizations limit the number of attempts or the time period allowed for additional attempts. Some require more rigorous remediation after a specified number of unsuccessful attempts, e.g., documentation showing completion of learning targeted to the areas of poor performance, or completion of a new course of study (diploma) at a different educational institution.

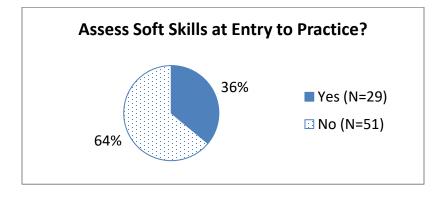
Ninety-eight of the 203 respondents provided the names of their organizations. Of those identified, 45 organizations serve various health care-related occupations. No other field was represented in significant numbers.

Soft Skills Assessment

Question: Does your organization assess soft skills at entry to practice? (Vendors, please answer Yes if true for any of your programs.)

Number of responses: 80

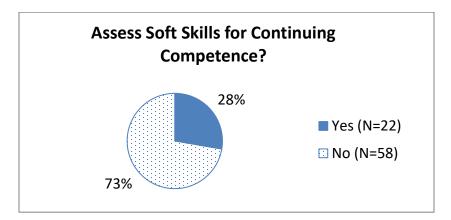
Results:



Question: Does your organization assess soft skills as part of your continuing competence program? (Vendors, please answer Yes if true for any of your programs.)

Number of responses: 80

Results:



Approximately 36% of those responding indicated that they assess soft skills at entry-to-practice, while just under 28% assess soft skills as part of their continuing competency programs. Nineteen of the 80 (24%) assess soft skills both at entry level and as part of continuing competency assessment. Slightly more respondents reported assessing at entry level than for continuing competency.

Respondents were asked to identify or describe the soft skills they assess. These included the following:

Communication, including verbal/oral, interpersonal, and written

Clinical reasoning/judgment

Analytical reasoning, synthesizing information, identifying key issues

Critical thinking, problem solving, decision making

Emotional intelligence, situation awareness

Interpersonal relationship skills, conflict resolution, empathy, rapport building

Counseling, support, and advocacy skills

Teamwork, professional collaboration, professional boundaries, conflict of interest management

Ethics, ethical decision making

Attitudes, trust, loyalty, integrity, self-motivation, responsibility

Confidence, adaptability, professionalism

Management skills, leadership, influencing and motivating others

Time management, resource utilization

Customer service

Risk analysis

Communication was the single most-often mentioned soft skill, specifically cited by more than 22%.

Reporting of Scores and Additional Feedback

Question: In addition to pass/fail information on your credentialing examinations, do you provide NUMERICAL (such as actual, percentage, scaled or graphical representation) assessment scores to

□ all candidates?

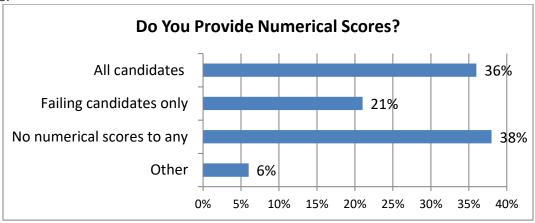
☐ failing candidates only?

☐ do not provide numerical scores to any candidates

□ Other

Number of responses: 79

Results:



Some respondents indicated that they provide graphical feedback rather than subscores, and some provide more information to failing candidates (e.g., subsection performance). Others indicated that the nature of feedback varies depending on the profession or occupation.

Question: Do you provide additional diagnostic/feedback information for specific domains or competencies for

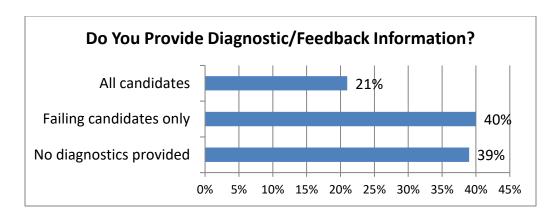
☐ all candidates?

☐ failing candidates only?

☐ no diagnostic/feedback information provided

Number of responses: 77

Results:

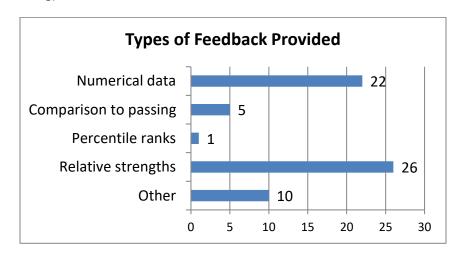


Only about one-fifth of respondents provide feedback to all candidates by content areas or competencies; presumably, passing candidates have less need or less desire for diagnostic information. Nearly 40% provide no detailed scoring to passing or failing candidates. Those who do provide additional diagnostic scoring were asked to indicate what sort of information they provide and what data analyses they perform.

Question: Please describe the feedback you provide by checking all options that are appropriate.

- ☐ Numerical data
- ☐ Performance in comparison to passing candidates
- ☐ Percentile ranks (performance in comparison to other candidates but not the passing standard)
- ☐ Comparison of relative strengths/deficits
- ☐ Other (please describe)

Number of responses: 64 (some individuals checked more than response) Results (N selecting):



Feedback reporting practices described include graphs, numerical data, and/or descriptive categories (e.g., above passing, below passing, or borderline) for separate domains or competencies. Some organizations provide comparisons of the candidate's subscores with group averages. Most reports are designed to give the candidate an overall impression of

strengths and weaknesses, but some organizations give more specific feedback such as the number of points earned relative to the number of points possible in each area.

Question: Before providing diagnostic feedback to candidates, what internal analysis of content area scores is done?

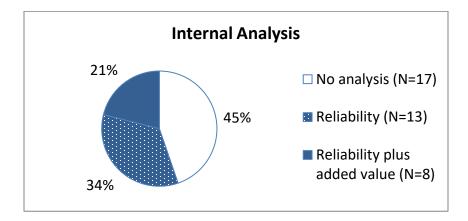
☐ No statistical analysis

☐ Reliability of content area or domain scores

☐ Reliability plus additional statistical analysis to determine added value of the scores

Number of responses: 38

Results:



Over half (55%) reported that they do investigate the reliability of subscores, with 8 organizations (21%) indicating that they go beyond reliability analysis to determine the value of subscores.

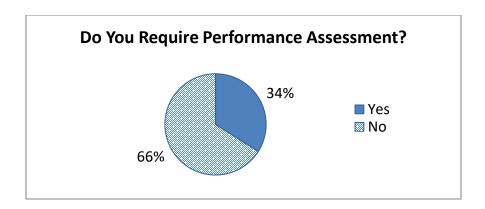
Performance Assessments, OSCEs

Question: Does your organization require candidates to pass any type of performance examination or OSCE in order to be licensed/certified? (If you have more than one program, do you require such an exam for at least one program?)

In order to avoid duplicating information from individuals from the same credentialing programs, respondents were also asked to briefly describe the assessment and provide the name of their organization and program.

Number of responses: 138

Results:



Approximately a third of respondents indicated that they do require some type of performance assessment, commonly an OSCE (objective structured clinical examination), for licensure or certification. Responses were categorized by profession or field for 85 respondents providing such data. The number and percentage of those requiring a performance assessment are shown by field in the chart below. Most respondents represented medical fields, and most of these (75%) do require a performance assessment. Performance assessments also appear to be common in the financial industry, though the number of respondents is small.

