

# Continuing Competence in Certified Practice

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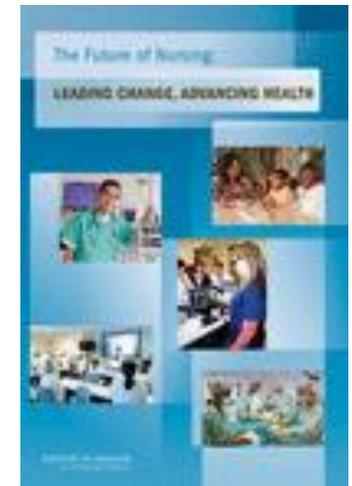
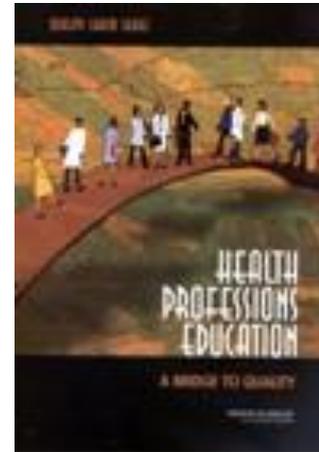
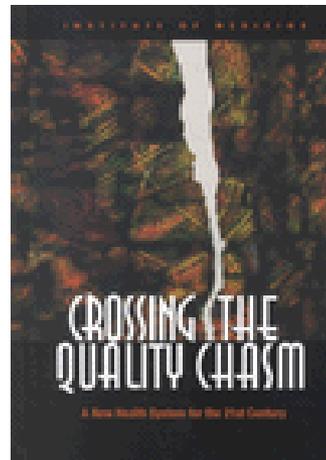
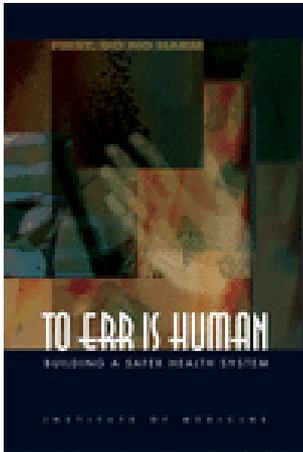
# National Calls for Action



*Citizen Advocacy Center*

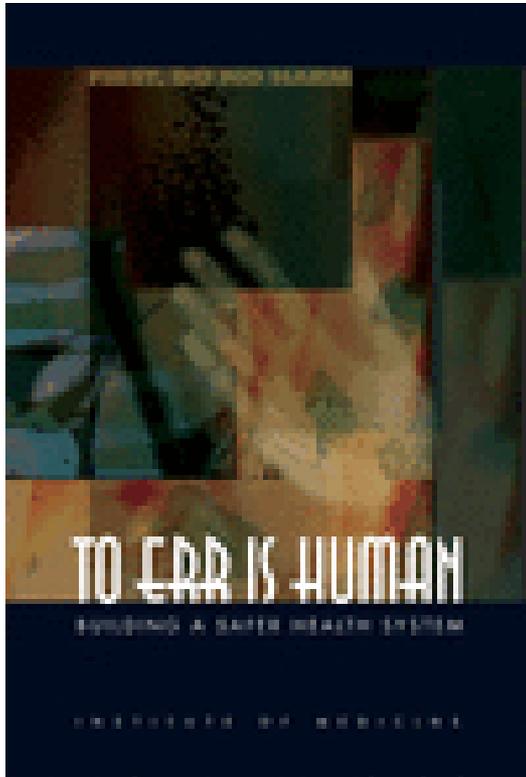
**“Can the public be confident that health care professionals who demonstrated minimum levels of competence when they earned their licenses continue to be competent years and decades after they have been in practice?”**

# National Calls for Action



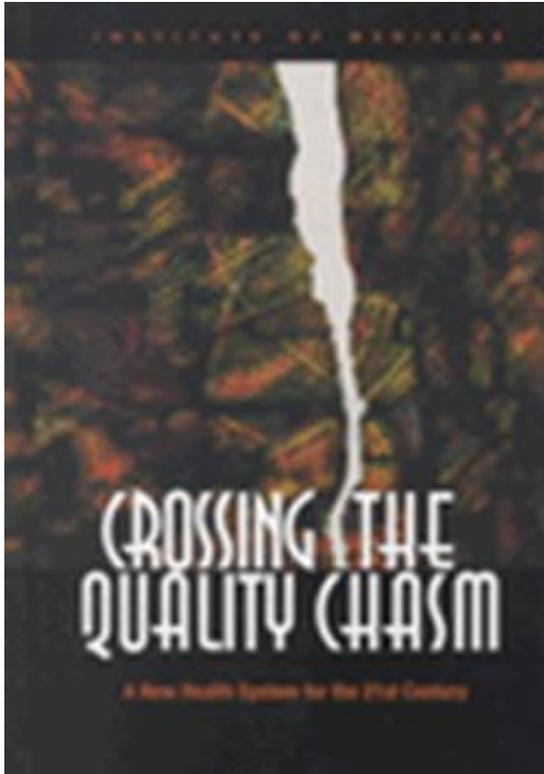
(Kohn, Corrigan, and Donaldson, 2000; Institute of Medicine, 2001; Greiner, Knebel, and Institute of Medicine, 2003; Committee on the Robert Wood Johnson Foundation Initiative on the Future of Nursing, at the Institute of Medicine, Robert Wood Johnson Foundation, and Institute of Medicine, 2011)

# IOM: *To Err is Human*



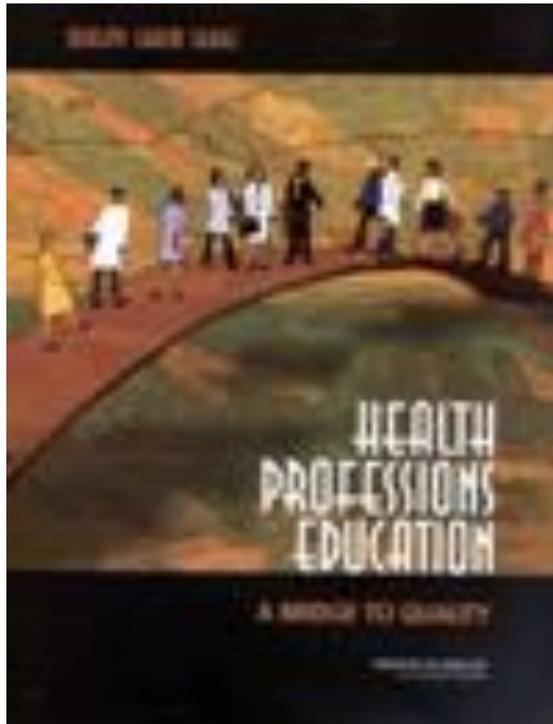
- Implement periodic re-examinations and re-licensing of doctors, nurses, and other key providers, based on both competence and knowledge of safety practice; and
- Work with certifying and credentialing organizations to develop more effective methods to identify unsafe providers and take action.

# IOM: *Crossing the Quality Chasm*



The IOM concluded that licensure laws function to assure the public that licensed professionals have the minimum competencies and qualifications required for practice

# IOM: *Health Professions Education*

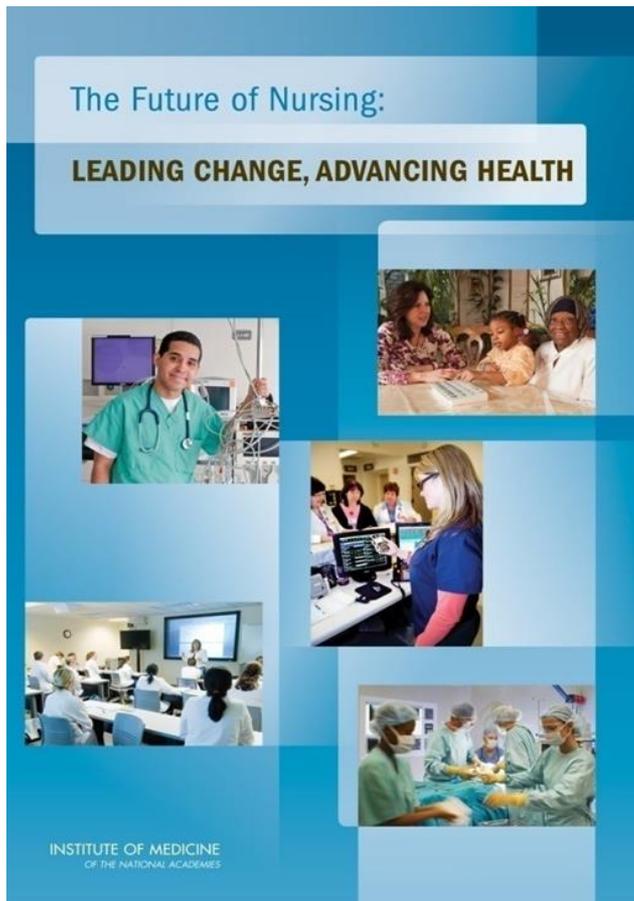


Recommendation 4: Health professions boards should move toward requiring licensed health professionals to demonstrate periodically their ability to deliver patient care...through direct measures of technical competence, patient assessment, evaluation of patient outcomes, and other evidence-based assessment methods

Recommendation 5:

Certification bodies should require their certificate holders to maintain their competence throughout the course of their careers by periodically demonstrating their ability to deliver patient care

# IOM: *The Future of Nursing...*

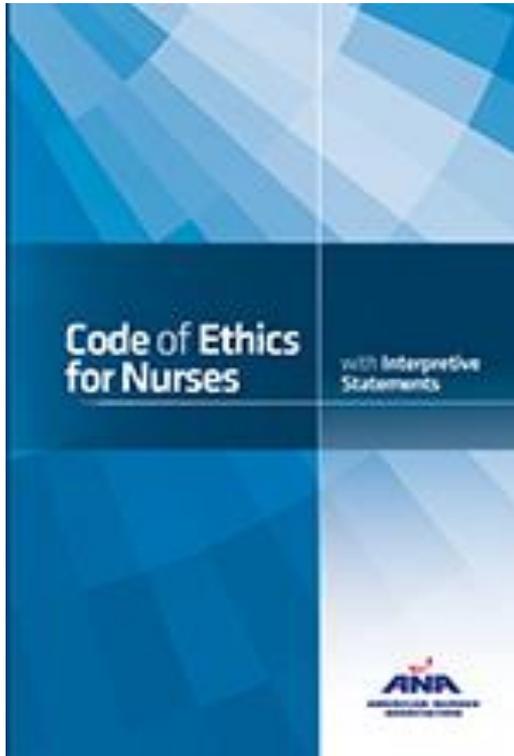


“...the nursing profession must adopt a framework of continuous, lifelong learning that includes basic education, residency programs, and continuing competence.”

# Clarification of Terms

- Competence
  - A potential ability and/or capability to function in a given situation.
- Competency
  - One's actual performance in a given situation.

# Code of Ethics for Nurses



- Provision 5:

The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.

# Interpretive Statement

## 5.5 Maintenance of Competence and Continuation of Professional Growth:

“Nurses must maintain competence and strive for excellence in their nursing practice, whatever the role or setting.”

“Professional growth requires a commitment to lifelong learning. Such learning includes continuing education and self-study, networking with professional colleagues, self-study, professional reading, achieving specialty certification, and seeking advanced degrees.”

## Standard 13 – Recertification and Continuing Competence

**“The certifying organization has a recertification program in place that requires certificants to maintain current knowledge and to provide documentation showing how competence in the specialty is maintained and/or measured over time.”**

# Background

- **Lack of evidence linking mandatory continuing education to professional competence** (Smith, 2004).
- **Improving outcomes and protecting patients from harm requires a shift from continuing education to a demonstration of continuing competence** (Ironsides, 2008).

# Background

- **Shift in focus from continuing education to the broader issue of continuing competence in the credentialing of nurses** (Yoder-Wise, 2012).
- **Nurse specialty certification has been associated with better patient outcomes; effect on mortality and failure to rescue in general surgery patients is contingent upon baccalaureate education** (Kendall-Gallagher, Aiken, Sloane, and Cimiotti, 2011).

# Background

- **Continuing competence is crucial to the trust that has been placed in nursing by society** (Schroeter, 2008).
- ***In The Future of Nursing: Leading Change, Advancing Health* “...the NCSBN has found that there is no clear link between continuing education requirements and continued competency.”** (Cited as personal communication, Kathy Apple, CEO, NCSBN, May 30, 2010).

# The Statement

- *The Statement on Continuing Competence for Nursing: A Call to Action*
- **National Board for Certification of Hospice and Palliative Care Nurses (NBCHPCN) Continuing Competence Task Force (CCTF)**
- **Work done for the profession**

# The Statement

- **Definition**
  - **Continuing competence is the ongoing commitment of a registered nurse to integrate and apply the knowledge, skills, and judgment with the attitudes, values, and beliefs required to practice safely, effectively, and ethically in a designated role and setting.**

# CCTF Beliefs

- **A professional and ethical obligation to safe practice;**
- **A commitment made to the individual, the profession, and to consumers;**

# CCTF Beliefs

- **A responsibility shared among the profession, regulatory bodies, certification agencies, professional associations, educators, health care organizations /workplaces, and individual nurses;**
  - **Healthcare organizations/workplaces accept responsibility for measuring, documenting, and supporting competency, and for addressing any deficiencies in staff members' competency;**

# CCTF Beliefs

- **Evolutionary, in that it builds on previous competence and integrates new evidence;**
- **Dynamic, fluid, and impacted by many factors as the individual enters new roles and situations.**

# Methods & Procedures

- **Descriptive survey**
- **Cross-sectional design**
- **Populations of interest:**
  - **Member boards of the National Council of State Boards of Nursing (NCSBN) – excluding non-RN, non-APRN boards**
  - **Nursing specialty certification boards that are regular members of the ABNS**

# Methods & Procedures

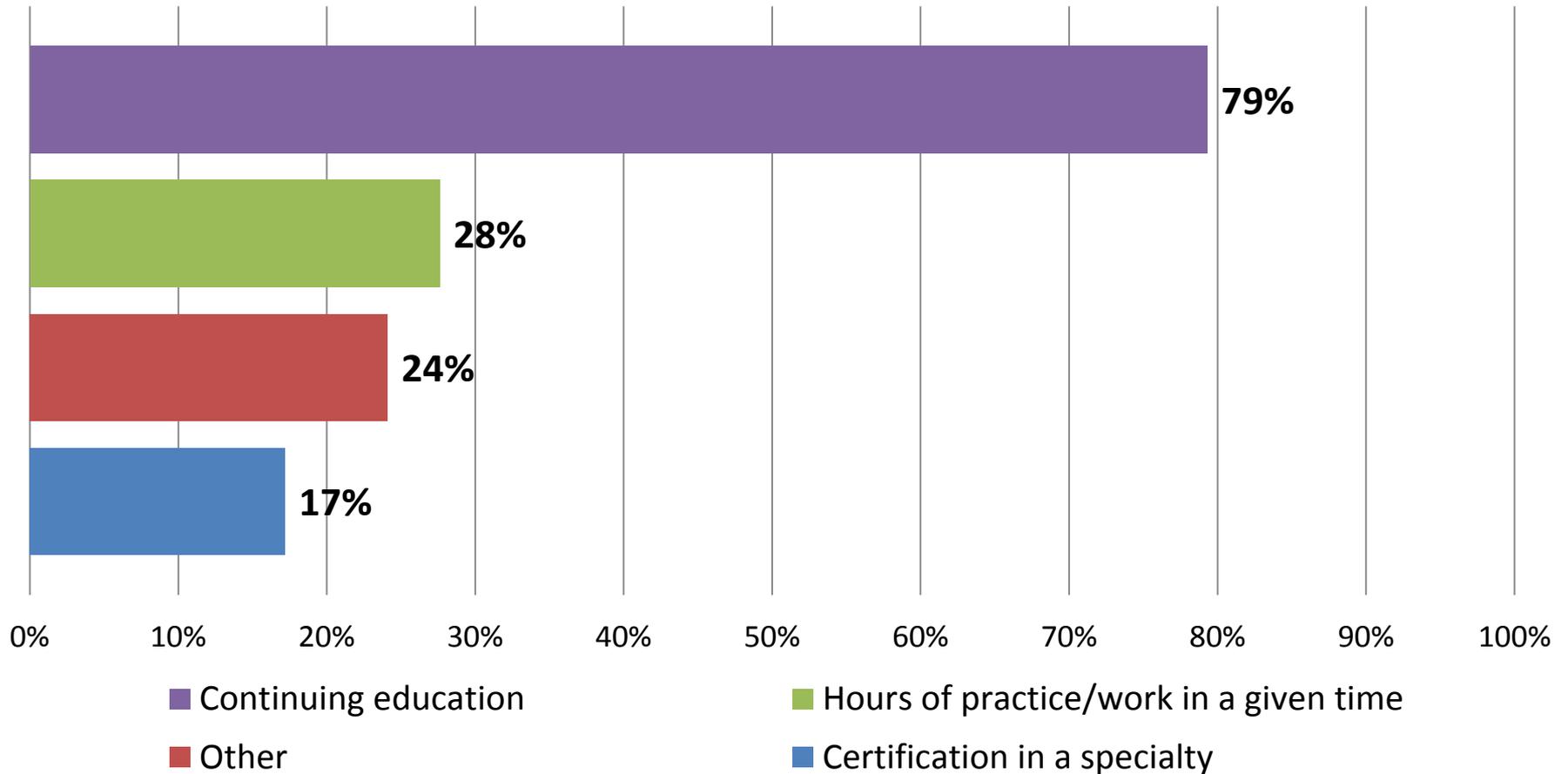
- **Survey instruments revised to incorporate items to explore continuing competence requirements.**
- **Invitation to participate in electronic survey sent by email.**

# Results

- **Response rates**
  - **State and territorial boards of nursing instrument sent to 56 NCSBN members**
    - **32 responses = 57% response rate**
  - **Nursing specialty certification board instrument sent to 32 members of ABNS**
    - **19 responses = 59% response rate**
  - **Not all respondents answered all questions**

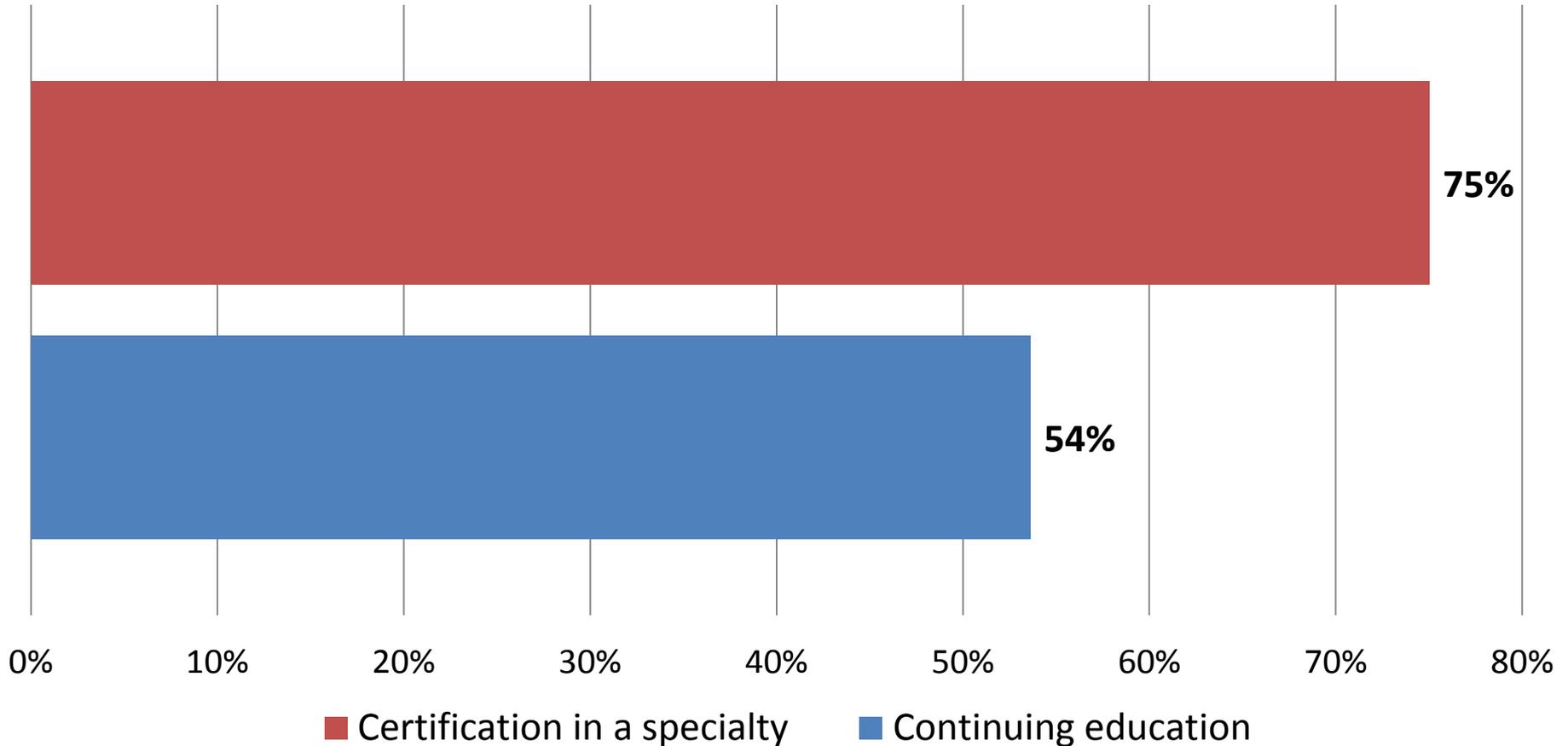
# Continuing Competence Requirements Renewal of a License to Practice as a RN

n = 29



# Continuing Competence Requirements APRN License Renewal

n = 28



# Results

- **Most (82%) of responding nursing specialty certification organizations have reviewed the *Statement on Continuing Competence for Nursing: A Call to Action***
- **More than half (56%) of responding nursing specialty certification organizations have adopted or endorsed the *Statement on Continuing Competence for Nursing: A Call to Action***

# Results

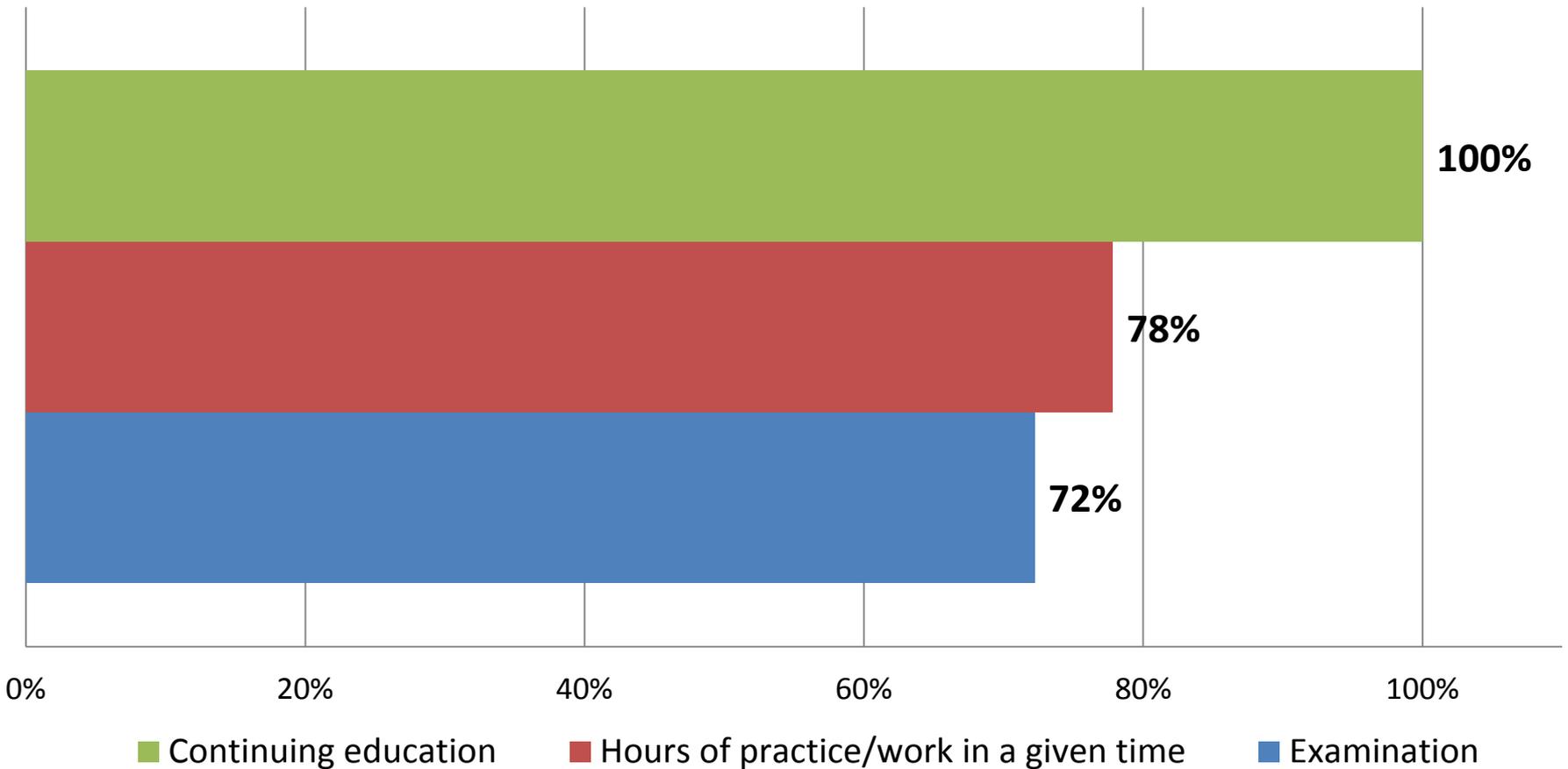
- **Most (77%) of responding nursing specialty certification organizations reported that their organizations do not use a formal definition of continuing competence**
- **Most (71%) of responding nursing specialty certification organizations do not use a conceptual framework for continuing competence**

# Results

- **At the time almost two-thirds (63%) of responding nursing specialty certification boards are planning to add continuing competence strategies to recertification requirements in the next two years**
- **The primary strategy under consideration was self-assessment**

# Continuing Competence Strategies Recertification

n = 18



# Limitations

- **Response rates were acceptable for an electronic survey** (University of Texas IAR, 2011)
- **Of course, a higher rate would have been desirable to obtain greater assurance the results were representative of the population**
- **Some respondents skipped questions**
- **State and Territorial Boards of Nursing were not asked about the use of a definition of continuing competence**

# Conclusion

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- **Continuing education remains the predominant continuing competence strategy for licensure renewal and recertification.**

# Since the Initial Survey...

- **Institute for Credentialing Excellence (ICE) releases Task Force on Continuing Competence *Methods for Ensuring Continuing Competence Part I (2013) and II (2014)***

# Since the Initial Survey...

- **“A national research agenda is needed to promote inquiry into the impact of credentialing on health care outcomes for nurses, patients, and organizations.”**
- **“The national effort to improve health care quality will be aided by a growing body of strong research that tests and clarifies the relationships between credentialing and outcomes for nurses, organizations, and patients and will contribute to the movement to improve health care quality.”**

# Since the Initial Survey...

- **“The effect of the credential on nurse, patient, and organizational processes and outcomes is the central focus of credentialing research in nursing.”**
- **Proposed a “...credentialing research framework to guide future studies...” and identified priorities for future research on credentialing.**

# Since the Initial Survey...

- **Orthopaedic Nurses Certification Board adds self-assessment and evaluation of learning plans before recertification**
- **“It’s about the patient in the bed!”**



***Thank You!***

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