

National Council of State Boards of Nursing

February 2012

Requirements for Accrediting Agencies

and

Criteria for APRN Certification Programs

Preface

Purpose.

The purpose of the *Requirements for Accrediting Agencies and the Criteria for Certification Programs* is to provide criteria for an external review process that would ensure boards of nursing of the suitability of advanced practice certification examinations for regulatory purposes. The requirements have been updated to be consistent with the “Consensus Model for APRN Regulation: Licensure, Accreditation, Certification & Education”.

Definitions.

Accrediting Agency – an organization that establishes and maintains standards for professional nursing programs and recognizes those programs that meet these standards

APRNs – Advanced practice registered nurses, including certified nurse midwives (CNMs), clinical nurse specialists (CNSs), certified registered nurse anesthetists (CRNAs), and nurse practitioners (NPs)

Certifying Body – a non-governmental agency that validates by examination, based on pre-determined standards, an individual nurse’s qualifications and knowledge for practice in a defined functional or clinical area of nursing

Certification Program – an examination designed by a certifying body to evaluate candidates for advanced practice nursing

External Review Process – a review process by an accrediting body to assure appropriate standards are met

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The Consensus Model - A document that defines APRN practice, describes the APRN regulatory model, identifies the titles to be used, defines specialty, describes the emergence of new roles and population foci, and presents strategies for implementation

APRN Roles – Certified Nurse Practitioner, Certified Registered Nurse Anesthetist, Certified Nurse Midwife, and Clinical Nursing Specialist

Population Foci - family/individual across the lifespan, adult-gerontology, pediatrics, neonatal, women's health/gender-related or psych/mental health

REQUIREMENTS FOR ACCREDITING AGENCIES

- 1. Accrediting agency must have standards for accreditation that are sufficiently rigorous to ensure that the agency is a reliable authority regarding quality of the program it accredits.**
 - A. Accreditation standards effectively address the quality of the program.
 - B. Accreditation standards development and revision processes include input from the field and are reflective of advanced nursing practice in the APRN roles and population foci.
 - C. Accreditation standards regarding national application are realistic.

- 2. Accrediting agency must have effective mechanisms for evaluating a program's compliance with the agency's standards in order to reach a decision to accredit the program.**
 - A. Accrediting agency evaluates whether a program is successful in achieving its objectives.
 - B. Accrediting agency consistently applies and enforces its standards.
 - 1) Has effective controls against inconsistent application of agency's standards
 - 2) Bases decisions on published standards
 - 3) Has reasonable basis for determining that the information the agency relies on for making accrediting decisions is accurate
 - C. Accrediting agency evaluates the accredited program every five years, and monitors throughout the accreditation period to ensure that the credentialing program remains in compliance with the agency's standards.
 - D. Accrediting agency has documentation that is evidenced-based.

- 3. Accrediting agency must provide a detailed description of the agency's survey process.**
 - A. Frequency of review is a minimum of five years.
 - B. Copies of agency's survey forms, guidelines are available.
 - C. Procedures are in place to notify deficiencies and to monitor the correction of the deficiencies.
 - D. Accreditation decision categories (e.g., full, provisional, partial, etc.) are available and reported to NCSBN.
 - E. Information about the individuals who perform surveys for the accrediting agency is available.
 - 1) Education experience requirements that individuals must meet are established
 - 2) In-service training is provided
 - 3) Policies and procedures are in place with respect to an individual's participation in the survey or accreditation decision process of any program with which the individual is professionally or financially affiliated

- 4. Accrediting agency must have a data management and analysis system with respect to its accreditation decisions including the kinds of reports, tables, etc.**

- 5. Accrediting agency must have procedures for responding to and for the investigation of complaints against certifying bodies.**

- 6. Accrediting agency must have policies and procedures with respect to the withholding or removal of accreditation status for certifying bodies that fail to meet standards or requirements including:**
 - A. Notification to NCSBN in writing of any program that has had its accreditation removed, withdrawn or revised, or has had any other remedial or adverse action taken against it by the accrediting agency within 30 days of any such action taken.
 - B. Notification within 10 days of a deficiency identified in any accrediting entity when the deficiency poses an immediate jeopardy to public safety.

- 7. Accrediting agency must submit to NCSBN:**
 - A. A copy of any annual report prepared by the agency.
 - B. Notice of final accrediting findings and actions taken by the agency with respect to the program it accredits.
 - C. Any proposed change in the program's policies, procedures or accreditation standards that might alter the program's scope of recognition.

CRITERIA FOR EVALUATING CERTIFICATION PROGRAMS

Criteria	Elaboration
<p>I. The program is national in the scope of its credentialing.</p>	<p>A. Advanced practice nursing standards have been identified by national organizations.</p> <p>B. Credentialing services are available to nurses throughout the United States and its territories.</p> <p>C. There is a provision for public representation on the certification board.</p> <p>D. Tested body of knowledge exists related to advanced nursing practice in a specified role and population.</p> <p>E. Certification board is an entity with organizational autonomy.</p>
<p>II. Conditions for taking the examination are consistent with acceptable standards of the testing community and are intended to ensure minimal competence to practice at an advanced level of nursing.</p>	<p>A. Applicants do not have to belong to an affiliated professional organization in order to apply for certification offered by the certification program.</p> <p>B. Eligibility criteria ensure minimal competence to practice at an advanced level of nursing.</p> <p>C. Published criteria are enforced.</p> <p>D. Examination is in compliance with the American Disabilities Act.</p> <p>E. Sample application(s) are available and</p> <ol style="list-style-type: none"> 1) Certification requirements are included 2) Application procedures include: <ul style="list-style-type: none"> • procedures for assuring congruence between education and clinical experience, and the APRN role and population being certified, • procedures for validating information provided by candidate, • procedures for handling omissions and discrepancies 3) Professional staffs are responsible for credential review and admission decisions. 4) Examination should be administered frequently enough to be accessible but not so frequently as to over-expose items. <p>F. Periodic review of eligibility criteria and application procedures occurs to ensure that they are relevant, fair and equitable.</p>
<p>III. Educational requirements are consistent with the requirements of the advanced practice role and population focus.</p>	<p>A. Active, unencumbered U.S. registered nurse licensure is required.</p> <p>B. Graduation is required from a graduate or post graduate level advanced practice education program and the program meets the following requirements:</p> <ol style="list-style-type: none"> 1) Education program is offered by an accredited college or university that confers a graduate or post graduate degree in the advanced nursing practice role and population focus, 2) Post-graduate level certificate programs are offered through institutions meeting criteria in B.1.

	<p>3) Clinical and didactic program includes, but is not limited to:</p> <ul style="list-style-type: none"> • Biological, behavioral, medical and nursing sciences relevant to practice as an APRN in the specified role and population focus; • Legal, ethical and professional responsibilities of the APRN; and • Three separate, comprehensive graduate level courses (the APRN Core) in: <ul style="list-style-type: none"> • advanced physiology/pathophysiology, including general principles that apply across the lifespan; • advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and • advanced pharmacology, including pharmacodynamics, pharmacokinetics and pharmacotherapeutics of all broad categories of agents <p>4) Clinical and didactic program meets the following criteria:</p> <ul style="list-style-type: none"> • Curriculum is consistent with current competencies of the specific APRN role and population focus • Curriculum meets the requirements for clinical and didactic coursework as described in the Consensus Model for APRN Regulation: Licensure, Accreditation, Certification & Education, July 7, 2008 • Both direct and indirect clinical supervision is congruent with current advanced practice nursing standards and nursing accreditation guidelines • Supervised clinical experience is relevant and congruent to the APRN role and population focus <p>C. All individuals, without exception, seeking a national certification must complete a formal didactic and clinical advanced practice program meeting the above criteria.</p>
<p>IV. The standard methodologies used are acceptable to the testing community such as incumbent job analysis studies and logical job analysis studies.</p>	<p>A. A nursing organization exists that establishes standards for the advanced level nursing practice in one of the four described roles and one of six described population foci.</p> <p>B. Exam content based on a job/task analysis.</p> <p>C. Job analysis studies are conducted at least every five years.</p> <p>D. Results of the job analysis study are published and available to the public.</p> <p>E. There is evidence of the content validity of the job analysis study.</p>
<p>V. The examination represents entry-level practice with minimal though critical competencies in the advanced nursing practice role and population.</p>	<p>B. Entry-level practice in the advanced practice nursing role and population focus reflects minimal competency in all areas of practice and is defined by the job analysis studies. Exam has purpose statement and focus.</p>
<p>VI. The examination represents the</p>	<p>A. Job analysis includes activities representing knowledge, skills and</p>

knowledge, skills and abilities essential for the delivery of safe and effective advanced nursing care to patients.	<p>abilities necessary for competent performance.</p> <p>B. Examination reflects the results of the job analysis study.</p> <p>C. Knowledge, skills and abilities, which are critical to public safety, are identified.</p> <p>D. Examination content is oriented to educational curriculum practice requirements and accepted standards of care.</p>
VII. Examination items are reviewed for content validity, cultural bias and correct scoring using an established mechanism, both before use and periodically.	<p>A. Each item is associated with a single cell of the test plan.</p> <p>B. Items are reviewed for currency at least every three years.</p> <p>C. Items are reviewed by members of under-represented gender and ethnicities who are active in the field being certified. Reviewers have been trained to distinguish irrelevant cultural dependencies from knowledge necessary to safely and effectively practice. Processes exist for identifying and flagging items.</p> <p>D. Statistical bias analysis is performed on all items.</p> <p>E. All items are subjected to an “unscored” use for data collection purposes before their first use as a “scored” item.</p> <p>F. Processes are in place to detect and eliminate bias from the test.</p> <p>G. Reuse guidelines for items on an exam form are identified.</p> <p>H. Item writing and review is done by qualified individuals who represent the APRN roles and population foci.</p>
VIII. Examinations are evaluated for psychometric performance.	<p>A. Reference groups used for comparative analysis are defined.</p>
IX. The passing standard is established using acceptable psychometric methods and is re-evaluated periodically.	<p>A. Passing standard is criterion-referenced.</p>
X. Examination security is maintained through established procedures.	<p>A. Protocols are established to maintain security related to:</p> <ol style="list-style-type: none"> 1) Item development (e.g., item writers and confidentiality, how often items are re-used) 2) Maintenance and integrity of the question pool 3) Printing and production process 4) Storage and transportation of examination 5) Administration of examination (e.g., who administers, who checks administrators) 6) Ancillary materials (e.g., test keys, scrap materials) 7) Scoring of examination 8) Occurrence of a crisis (e.g., exam is compromised, etc.)
XI. Certification is issued based upon passing the examination and meeting all other certification requirements.	<p>A. Certification process is described, including the following:</p> <ol style="list-style-type: none"> 1) Criteria for certification decisions are identified 2) All requirements and passing exam results are verified 3) Procedures for appealing decisions are in place <p>B. Mechanisms are in place for communicating with candidates.</p> <p>C. Due process is in place for follow up of complaints.</p>

	D. Confidentiality of nonpublic candidate data is maintained.
XII. A retake policy is in place.	<p>A. Failing candidates are permitted to be reexamined at a future date.</p> <p>B. Failing candidates are informed of procedures for retakes.</p> <p>C. Test for repeating examinees are equivalent to the test for first time candidates.</p> <p>D. Repeating examinees are expected to meet the same test performance standards as first time examinees.</p> <p>E. Failing candidates are given information on content areas of deficiency.</p> <p>F. Repeating examinees are not exposed to the same items of a previous exam.</p>
XIII. Certification maintenance program, which includes review of qualifications and continued competence, is in place.	<p>A. Certification maintenance requirements are specified (e.g., maintenance of an active RN license, continuing education, practice, examination, etc.).</p> <p>B. Certification maintenance procedures include:</p> <ol style="list-style-type: none"> 1) Procedures for assuring match between continued competency measures and APRN role and population(s) 2) Procedures for validating information provided by candidates 3) Procedures for issuing re-certification <p>C. Professional staffs oversee credential review.</p> <p>D. Certification maintenance is required a minimum of every 5 years.</p>
XIV. Mechanisms are in place for communication to boards of nursing for timely verification of an individual's certification status, changes in certification status, and changes in the certification program, including qualifications, test plan and scope of practice.	<p>A. Communication mechanisms address:</p> <ol style="list-style-type: none"> 1) Permission obtained from candidates to share information regarding the certification exam process 2) Procedures to provide verification of certification and scores to Boards of Nursing 3) Communication mechanisms address procedures for notification within 30 days to Boards of Nursing regarding changes of certification status, including testing without passing if testing is a recertification option. 4) Procedures for notification of changes in certification programs (e.g., qualifications, test plan) to Boards of Nursing and to NCSBN
XV. An evaluation process is in place to provide quality assurance in its certification program.	<p>A. Internal review panels are used to establish quality assurance procedures:</p> <ol style="list-style-type: none"> 1) Composition of these groups (by title or area of expertise) is described 2) Procedures are reviewed 3) Frequency of review is defined <p>B. Procedures are in place to ensure adherence to established quality assurance policies and procedures.</p> <p>C. Procedures for review of quality assurance are publically posted.</p>