

Today's Owners, Tomorrow's Leaders

Why Supporting Board Certification Matters

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New evidence from a major study on the value of emergency nursing specialty certification advances the case for supporting board certification for nurses across all practice areas. The

purpose of this article is to discuss the implications of this research, including how nurse leaders can benefit from tapping into the value of certification, and why nurse leader support for board certification matters.

Recently, the Board of Certification for Emergency Nursing (BCEN), an independent, nonprofit credentialing organization established in 1980, set about the task of evaluating the relationship of the Certified Emergency Nurse (CEN) certification to outcomes that matter to emergency nurses who are considering the value of certification for their own career and outcomes that matter to organizations that hire emergency nurses. The CEN is widely regarded as the foundational emergency nursing specialty certification and is currently held by more than 35,800 nurses in the United States and abroad. In total, more than 47,500 BCEN certifications are currently held by registered nurses (RNs) working across the emergency spectrum in adult/mixed, pediatric, flight, critical care ground transport, and trauma settings.

BCEN commissioned the Human Resources Research Organization (HumRRO), an independent, nonprofit research organization, to conduct the value of certification study.¹ The 2 major components of the research were a nurse survey to measure outcomes of value to individual emergency nurses and a supervisor survey to measure outcomes of value to employers of emergency nurses. The findings were first released in September 2017 and are currently featured in two 2018 BCEN white papers.^{2,3}

The study's findings are based on responses from over 8,800 CEN-certified and non-CEN-certified nurses and 1,002 of their supervisors. All respondents were RNs whose primary job is emergency nursing. Most worked full-time as staff nurses, charge nurses, clinical nurse managers, or higher-level managers in private and public hospitals or freestanding ER centers or federal facilities. Over three-quarters worked in an emergency department, whereas others worked in pediatric emergency departments, flight or ground transport, or other types of units. Worthy of note is the fact that supervisors had a response rate of 31.5%.

BCEN's *Value of CEN® Certification Research Study* is notable, not only for its scale, but also for its rigor. More than a correlational study, hierarchical multivariate regression analysis was used to control for other possible influences on outcomes including education and years of experience.

The major findings? CEN certification is significantly and positively linked with multiple outcomes of value to individual emergency nurses and their supervisors. Nurse supervisors rated CEN-certified nurses significantly higher than their noncertified peers in all 7 areas of emergency nursing expertise evaluated. Supervisor responses also yielded significant positive relationships between CEN certification and multiple aspects of technical performance, accuracy and ethics. Additionally, the overwhelming majority of supervisors and their charges agreed or strongly agreed on 3 things: the value of the CEN, the value of having certified nurses in their organizations, and the importance of those nurses maintaining their certification over time.¹

CEN-certified emergency nurses reported they experience greater nursing self-efficacy and have greater career success and satisfaction including higher pay, employability, and job advancement than their noncertified peers. For 90% of the certified nurses, holding the CEN gives them a feeling

of accomplishment and pride, and 80% said being CEN-certified means being more likely to have the knowledge they need on the job.¹

WHAT WE KNOW

At over 2.9 million strong⁴ and the largest slice of the U.S. health care workforce pie by far,⁵ nurses provide the lion's share of care. Because they have the most contact with patients, nurses are uniquely positioned to intervene early when they observe or suspect things are starting to go wrong for their patients. Therefore, they truly can make all the difference. On the basis of pure logic and well-established in the literature, we know nurses are a major driver of quality, safety, and patient outcomes.

We know today's savvy and educated consumers/patients not only want excellent care, they want it delivered by people who are kind, caring, and compassionate, and they want the best value for the dollar. With a variety of tools at their fingertips, they can comparison shop before selecting providers and facilities whenever circumstances permit. Whether patients rate the care they receive as terrific or terrible or somewhere in between, they can register and even broadcast the details of their experience, which can help build or damage an institution's reputation and impact market share.

We also know that people trust nurses above all other professions. For 16 consecutive years, Americans have put nurses atop Gallup's annual poll on the honesty and ethical standards of 22 occupations, with 82% describing nurses' ethics as "very high" or "high" in the 2017 survey.⁶

Perhaps lesser known among the things we know is the fact that consumers/patients are aware of nursing certification, value it, and prefer being cared for by certified nurses. A 2002 Harris poll conducted on behalf of the American Association of Critical-Care Nurses found that 78% of respondents knew nurses could be certified. Further, awareness of nurse certification exceeded awareness of certification for all other professions surveyed including physicians, accountants, mechanics and teachers. Even more importantly, 3 in 4 (73%) said that given a choice, they are much more likely to select a hospital that employs a high percentage of nurses with specialty certification.⁷

Similarly, a 2013 Harris Interactive survey conducted for the National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA) and the Citizen Advocacy Center (CAC) found that "large majorities of Americans want the health care professionals who treat them to be required to keep up with developments in their professional fields and want their skills assessed by independent bodies." Among the key responses (*Figure 1*), 85% said it is important that health care professionals who are going to treat them "have an independent body of health professionals evaluate their skills/knowledge to certify them as competent."⁸

Lastly, as the body of value of certification research grows and matures, we know with increasing specificity the many ways that certification, through its validation of clinical knowledge and expertise, and mastery of professional issues, offers substantial value and impacts for

Figure 1. Select Responses From Harris Interactive Survey
Source: National Board of Certification and Recertification for Nurse Anesthetists.

Select June 2013 Harris Interactive Poll Responses

- 85% believe it is important that health care professionals who are going to treat them have an independent body of health professionals evaluate their skills/knowledge to certify them as competent.
- 91% of US adults think it is very important/important that a health care professional who is going to treat them has passed an examination on their profession's specific knowledge.
- 89% believe it is very important/important that health care professionals who are going to treat them attend educational programs throughout their career to refresh their knowledge and learn about the latest scientific evidence and new technologies.

patients and their families, nurses, and health care teams, and institutions and communities.

WHAT NURSE LEADERS NEED

Safe, high-quality care delivered efficiently is paramount, whether your point of view is from the unit-, institutional-, or system-wide level. Health care organizations of every size and configuration need to recruit and retain nurses who know the most current evidence-based practices, who are prepared to assess, evaluate, and manage their patients, and who will consistently rise to the occasion.

As a nurse leader, you count on your nurses to consistently deliver exceptional care. You rely on them to anticipate patient needs, document accurately, communicate and coordinate with their team, and all the while, compassionately inform and educate patients and their families. Because of the central role nurses play, nurse leaders are wise to capitalize on, and as a precursor, proactively foster and support, their nurses' lifelong learning.

To fulfill this tall order, nurse leaders need engaged and empowered nurses who deliver discretionary effort. We need nurses who think critically and are equipped to partner with us in problem solving. We need more owners and fewer renters. Yet even the best nurse leaders can become numbed by stress and the daily grind, and not think past "I need 10 nurses on my schedule today." We all need to be reminded not to succumb to the commodity mindset. More than showing up, taking care of patients with no errors, and clocking out (ideally, with no overtime), our nurses can *be* more and want to *do* more—and it is up to nurse leaders to create the conditions to support that.

When we view each of our nurses as individual-owner-partner, that is when we strike gold. It begins with seeing, valuing, and recognizing each of our nurses and mentoring them toward their full potential. And the ownership treasure trove runs deep. As Joe Tye and Bob Dent note in *Building a Culture of Ownership in Healthcare*, "When you move from a culture of mere accountability to a culture of ownership, you create a sustainable source of competitive advantage for both

recruiting and retaining great people and for earning long-term patient loyalty."⁹

THE WHOLE PACKAGE

Certification is an objective measure of competency whose ultimate goal is to promote optimal patient outcomes.¹⁰ The benefits of certification are borne out in the literature, which confirms certified nurses' superior clinical expertise and technical performance¹⁻³ and associates certification with nurse empowerment, collaboration, and retention.^{2,11-13} In a landmark, large-scale study, certified nurses reported that certification enabled them to feel more confident in their ability to detect complications and initiate early and prompt interventions, as well as more effectively communicate, collaborate with other health providers, experience fewer errors, and receive higher patient satisfaction ratings. Numerous studies link certified nursing practices with a host of improved patient outcomes.^{2,14,15}

Looking at some of the specific BCEN study findings, supervisors rated certified nurses higher on every aspect of nursing expertise from clinical foundations to professional practice. CEN status was significantly and positively correlated with performing patient care with a high degree of accuracy, anticipating hazards, and promoting safety in patient care, remaining current on new technical developments, and exhibiting ethical behavior and concern for accuracy.

Board-certified nurses are invested in their practice and their profession. They are about excellence in every way. As proven expert resources, certified nurses are the nurses providers seek out to collaborate with. They inspire other nurses and contribute to the engagement, satisfaction and overall effectiveness of their teams. Top nurse leaders prefer to have certified nurses on their units because they are the nurses that help them get things done every day and solve their most stubborn problems. In short, certified nurses are the whole package (*Figure 2*).

When you consider that "ownership springs from the intrinsic motivation of pride and engagement"⁹ and the BCEN study finding that 90% of certified nurses felt a sense

Figure 2. Characteristics of Board Certified Nurses
Source: Board of Certification for Emergency Nursing.



of pride and accomplishment, it is not hard to see why board-certified nurses are owners. Although you might argue that nurses who get certified are “natural” owners, a good argument can be made that the noncertified nurses on your unit may be owners-in-the-rough and certification will pave their way to becoming full-fledged owners. The pertinent questions are: How might your unit or department run with more certified nurses on your teams? and How much easier might your days be?

CERTIFICATIONS VERSUS CERTIFICATES: AVOIDING CONFUSION

An important distinction for all to understand is the difference between certificates and professional certifications. Both certificate programs, such as Basic Life Support (BLS), Advanced Cardiac Life Support (ACLS) and Pediatric Advanced Life Support (PALS), and certification programs, such as the CEN and well over 100 others offered by certification bodies like BCEN, are vital to the work nurses do.

There are, however, significant differences (Table 1). Certificate programs, which are generally highly focused, consist of educational offerings that occur over several hours or days and convey topic-based information and/or a specific skill set. The more expansive certification programs validate a nurse’s knowledge, skills and experience across an entire specialty area of practice through a comprehensive, rigorous, standardized, and psychometrically sound exam. You might say that certificates are to certifications what individual merit badges are to the Girl Scout Gold Award or the Boy Scout Eagle Award.

BRIDGING GAPS AND REMOVING BARRIERS

As previously mentioned, the BCEN study found high perceived value of the CEN and certification by nurse

supervisors. Individual nurses had similarly strong positive responses (Figure 3). When supervisors and nurses were asked whether their employers provided support for nurses seeking to obtain certification and recertification, the numbers were less rosy (Figure 4).

These 2 sets of responses reveal 2 important gaps. First, there is a sizeable gap between the high valuation of certification and the prevalence of employer supports for certification. While two thirds of supervisors said their organization covers the fee for the initial certification exam, half said their employer provides preparatory review materials to assist with studying, 41% said their organization covers all or part of a preparatory course, and 38% said their employer covers the fee for recertification.

Second, there is a noticeable gap between supervisor and individual nurse knowledge or perception of whether their employer provides each type of support, with individual nurses saying “yes” 9% to 15% less often. This differential suggests a ready opportunity for nurse leaders to encourage and support certification by simply ensuring their nurses are fully aware of employer supports in place. Taken together, the 2 gaps suggest an opportunity for nurse leaders to convey how much and why they value certification to their supervisors and advocate for more robust employer support.

The research on barriers to certification is quite clear: the top 3 barriers are cost, lack of institutional support, and lack of institutional reward. Two other commonly reported barriers are lack of time and test anxiety.^{16,17}

Employers are in a prime position to help lower or eliminate these barriers. Yet as we see in the research and on the ground, organizational support for certification runs the gamut. For many organizations, certification support comes vis-à-vis the Magnet Recognition Program®. Although there is no doubt that pursuit of Magnet status

Table 1. Certificate Programs versus Certification Programs

	Certificate Programs	Certification Programs
<i>Purpose</i>	Learn about, practice or demonstrate knowledge or proficiency in focused topic, subject or skill set.	Validate knowledge, skills, experience, expertise, and judgment across entire specialty practice area.
<i>Essential to safe and professional practice</i>	Yes	Yes
<i>Awarding organization</i>	Varies	Independent credentialing bodies
<i>Nationally recognized</i>	Most	Yes
<i>Portable</i>	Varies. Nurses may be required to take employer-sponsored or employer-approved offering.	Yes
<i>Eligibility requirements</i>	Varies Clinical experience or RN licensure may or may not be required.	Strict, nationally standardized. Most require RN licensure. ^a Many require relevant direct or indirect clinical experience. ^a
<i>Preparation/course of study</i>	Class or course offered over several hours to several days, in person or online. Content can vary by instructor or provider.	Independently designed. Spans weeks or months. Prep materials and review courses developed by professional associations and dedicated certification prep providers.
<i>Culminates in exam or practicum</i>	Sometimes/optional Narrow focus Offered by sponsoring organization or online. Test content varies.	Rigorous, standardized, comprehensive exam offered in secure testing facility. Based on national role delineation studies. Psychometrically sound Legally defensible
<i>Outcome</i>	Proof of completion document and/or CE hours.	Professional credential
<i>Renewal/recertification frequency & requirements</i>	Frequency varies May be used for certification program CE hours.	Every 4 years, on average ^a Retake exam or accrue required amount of CE hours.
<i>Eligible for accreditation?</i>	May be offered by an accredited or non-accredited continuing education provider.	May be accredited (e.g., by ABSNC or NCCA) to validate the credentialing program has met international credentialing standards. ^a

American Board of Nursing Specialties Member Organization Profiles Summary Survey Data, 2016. Compiled by the Board of Certification for Emergency Nursing.

Source: Board of Certification for Emergency Nursing.

^a ABSNC, Accreditation Board for Specialty Nursing Certification; CE, continuing education; NCCA, National Commission for Certifying Agencies.

motivates employer support for board certification, it is important that support for certification be rooted in genuinely valuing nurses and their professional development versus being viewed as “necessary evil” for attaining Magnet recognition. On the other end of the spectrum and for all too many organizations, certification is, unfortunately, not even on their radar.

Employers that have increased their certification rates have achieved their success by instituting—and sustaining—a mix of certification and recertification strategies that work best for

their units and organizations, with nurse leaders serving as the chief architects and champions. Common barriers are tackled by employers covering all or part of the cost of the exam fee, subsidizing and/or offering in-house review courses, study materials, and continuing education, and funding professional association memberships. While some incentivize certification and recertification through bonuses and pay increases, others offer paid time off to take the exam, eligibility for choice assignments and advancement opportunities. Also, credentialing bodies offer substantial exam fee discounts to nurses who are

Figure 3. Value and Importance of the CEN and Certification
Source: Value of CEN Certification Research Study.

Percentage of ‘agree’ and ‘strongly agree’ responses:

Indicate how much you agree...	Supervisors	Nurses
The CEN® certification is valuable to the emergency nursing profession.	95%	88%
It is important to have professional, certified emergency nurses in my organization.	92%	82%
It is important for emergency nurses to maintain their certification over time by recertifying.	93%	86%

members of professional associations and to employers via volume-based exam voucher programs. Whichever support strategies organizations find work best for them, a universal characteristic of successful certification support programs is recognizing certification achievements loudly and proudly.

THE COST VERSUS ROI CONUNDRUM

Certification does come with a price tag and the conundrum for health care institutions is how to capture the return on investment (ROI), given that some of the benefits of having a certified workforce can be more easily captured on the general ledger than others.

For example, meaningful institutional support of certification is increasingly recognized as a retention tool. Organizations that support professional development—including certification and recertification—are organizations that nurses are less likely to leave. Further, data from BCEN's study helps dispel the common myth that certified nurses have greater intent to leave than noncertified nurses.¹ Given the average cost of nurse turnover is between \$36,000 to \$57,000, and each percentage change in RN turnover will cost *or save* the average hospital an additional \$379,500,¹⁸ supporting certification is a retention strategy that can have a measurable positive impact on the bottom line.

At Houston Methodist Willowbrook Hospital, Emergency Services Director of Nursing Joseph A. Hutchins, BSN, RN, CEN, CPEN, has seen contamination rates drop, adherence to sepsis bundles increase, and awareness and drive to treat other core measures on his unit increase as their certification rate has increased. Forward thinking nurse leaders like

Hutchins are developing innovative ways to track the measurable and immeasurable impacts and recognize “the financial burden is nothing compared to the rewards to the profession and to the organization.”²

As Scott Hilliard, DNP, RN, CEN, who is director of the emergency department's clinical operations at IU Health Methodist Hospital, where certification rates have risen from 8% of eligible nurses to 75%, says, “If cost is an issue, I would say that it is an administrator's job to figure out how to get at that cost. That is why we went into administration, and that is our responsibility.”²

CONCLUSION

It is not only by intuition and anecdote that we know certification matters. Research confirms it. Developing our nurses, building a culture of ownership, and cultivating tomorrow's leaders begin with genuinely valuing nurses, and they progress by leaps and bounds with board certification. In all of this, nurse leaders are privileged to have a lead role and be among the biggest beneficiaries.

Nurse leaders who are harvesting the fruits of board certification know to do 3 things. First, model what success looks like by getting certified in your specialty, in nursing leadership, or ideally both. Second, encourage, mentor, and recognize your nurses' pursuit of certification and recertification while helping your organization understand the payoffs. Third, be persistent and creative in sustaining support, and tracking and measuring the outcomes as your certification rates rise. Who can help you design and accomplish all of this? Ask a board-certified nurse. **NL**

Figure 4. Employer Support for CEN Costs
Source: Value of CEN Certification Research Study

My employer provides support for obtaining certification or recertification:

My Employer...	Supervisors	Nurses
Covers the fee for initial exam	68%	55%
Covers the fee for recertification	41%	26%
Covers all or part of the cost of preparatory courses to assist with studying	38%	29%
Provides preparatory review materials to assist with studying	50%	35%

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