The Council on Recertification of Nurse Anesthetists recently revised the Policies and Procedures for recertification and the procedural rules for recertification review. This document is published in this June issue of the AANA Journal so that those interested may direct comments concerning the recertification criteria and procedures to the Council. The deadline for receipt of comments is August 1, 1979. Upon reviewing any material received, the Council will then publish the finalized documents.

Historical perspectives
In 1967 and early 1968, the Board of Directors of the American Association of Nurse Anesthetists realized that evidence of continued professional excellence was becoming increasingly important in our society. Therefore, they directed the AANA Education Committee to study the issue of recertification.

At the AANA Annual Meeting in 1969, a bylaw was changed to provide certificates to members who had demonstrated they had completed clinical and didactic experiences reflective of the changes in anesthesia practice within a five-year period. The program was optional to all members.

The Council on Recertification recognizes that continuing education is an essential component to maintain minimal qualifications for standards of practice and that the profession carries responsibility for establishing such standards for continuing education activities.

The rapidly changing character and increased complexity of our society demand continued updating of one's knowledge, understanding, and skills. It is evident that any improvement in standards and expectations cannot be met without the continuous involvement of knowledgeable and skillful professionals engaged in an ongoing, lifelong growth process.

It is recognized that practitioners accept individual responsibility for their own actions. This responsibility includes participation in effective continuing education offerings. Nurse anesthetists are legally and ethically responsible for the quality of their individual practice.

A characteristic of a profession is that its members accept collective responsibility for the quality of service offered to the public. At the AANA Annual Meeting in 1976, the members amended the bylaws to provide for mandatory continuing education for recertification of active practicing nurse anesthetists. This provides one means to assess current levels of education and knowledge of practitioners. A mandatory continuing education program was adopted by the AANA membership at the Annual Meeting, with full implementation effective August 1, 1978.
In November, 1977, the AANA Board of Directors accepted the recommendations of the AANA Ad Hoc Long Range Planning Committee and implemented the necessary procedures to develop a plan which would provide for an organizational restructuring of the Association.

In April, 1978, the AANA Board of Directors appointed an Ad Hoc Committee on Recertification in anticipation of the adoption of the proposed bylaw changes. This committee worked to develop bylaws, policies, procedures, and criteria for recertification. Its members are to remain as the initial members of the new Council.

At the AANA Annual Meeting in Detroit, September, 1978, the members adopted the proposed AANA bylaw revisions providing for an organizational restructuring of the Association and establishing a Council on Recertification of Nurse Anesthetists.

The members of this new Council are: Ruth Ecklund, CRNA; Elaine Jacobsen, CRNA; Barbara Filosi, CRNA; Sandra Maree, CRNA; Athole Jacobi, MD (Anesthesiologist); Jack Slusser, RN (Public Member); Mary J. Mannino, CRNA; Richard Ouellette, CRNA; and Jasper McPhail, MD (Surgeon).

Preface
This publication describes the Policies and Procedures governing the recertification of nurse anesthetists. Included are:

1. Responsibilities of the Council.
2. Recertification Criteria.

Responsibilities
Recertification standards for nurse anesthetists have evolved to meet the profession’s desire to promote adequate educational levels of health care practitioners. Therefore, those individual nurse anesthetists who wish to maintain a level of quality will subscribe to those standards required for recertification.

The recertification function is conducted by the Council on Recertification of Nurse Anesthetists. Membership on this Council includes: an anesthesiologist, a surgeon, nurse anesthetists, and a public member. Funding for the Council is derived from recertification fees paid by nurse anesthetists seeking recertification and fees paid by those agencies seeking recognition as approved providers of continuing education. Initial funding was derived by an unrestricted loan from the AANA.

The Council will be responsible for mailing applications for recertification, providing a mechanism for reviewing the applications to ascertain eligibility for recertification, and maintaining a list of those individuals it recertifies.

In the development of continuing education standards, policies and procedures, the Council seeks to obtain input from the profession, members of the community of interests and other interested individuals or agencies.

Continuing education standards and guidelines adopted by the Council become the basis for recertification decisions.

The Staff Secretary to the Council is available to respond to continuing education and recertification questions or problems.

Decisions of the Council, while subject to appeal, are not subject to approval by any other body. The appeal body for the Council is the Council on Nurse Anesthesia Practice.

Criteria for recertification
The criteria for recertification of individuals at stated intervals are as follows:

1. Evidence of having been granted initial certification by the Council on Certification of Nurse Anesthetists, or its predecessor.
2. Documentation of current licensure as a professional nurse with authority to practice nurse anesthesia, if such authority is granted. The appli-
cant must have complied with all state requirements, such that he/she had earned and continuously maintained licensure to practice as a registered nurse, performing nurse anesthesia, in the state or territory of the United States in which he/she practices, except for those individuals employed by the United States Government, who, in the alternative, need only give evidence as to such licensure in any state or territory of the United States. If licensure and authorization to practice nurse anesthesia, if such authorization is granted, were not continuously maintained, full documentation of the reasons for such failure must be presented, such documentation evidencing that such licensure and/or authorization were not revoked for any reason involving incompetence, moral turpitude, or unethical conduct.

3. Documentation of engagement in the clinical practice of nurse anesthesia or the administrative practice of nurse anesthesia, whether in the public or private sector as an administrator, educator or the like, during the two-year period prior to application. If such engagement has not been documented, the applicant must present evidence of the reasons therefor. If there has been no engagement during a three-year period prior to application, the applicant must present evidence of having completed a refresher course in nurse anesthesia which complies with the criteria for such course as set forth in the Appendix of this document.

4. Documentation of having met the requirements of the Council on Recertification concerning attendance at and completion of continuing education courses approved by the Council on Recertification, such requirements being set forth in Appendix 1 of this document.

5. The applicant must certify that he/she does not suffer from a mental or physical problem which would interfere with the practice of nurse anesthesia, and in particular, the applicant must certify that he/she does not suffer from drug or alcohol addiction or abuse or, alternatively, state the nature of the mental or physical problem or the addiction with sufficient specificity to permit the Council to evaluate its possible impact on the adequacy of nurse anesthesia practice.

Criteria for revocation of recertification

The criteria for revocation of recertification of individuals are as follows:

1. A failure to maintain licensure as a professional nurse and authorization to practice nurse anesthesia, if such authorization is granted, in the state in which the individual practices nurse anesthesia, except for those persons employed by the United States Government, such persons being required to maintain such licensure and authorization, if any, in any state or territory of the United States.

2. An adjudication by a court that the individual is mentally incompetent.

Recertification process

All individuals who are initially certified by the Council on Certification or its predecessor are eligible for recertification by the Council on Recertification. Those individuals who re-
ceived initial certification prior to December 31, 1978, and were recertified by the Council on Recertification will receive an application form from the Council on Recertification in June, 1980.

Those individuals who were initially certified prior to December, 1978, and had not maintained certification, may apply to the Council on Recertification at any time.

Those individuals who receive initial certification after December, 1978, would be eligible to apply for recertification after two-full fiscal years.

The Council on Recertification has been informed that certain associations will process and pay the recertification fee on behalf of their eligible members.

To facilitate the establishment of files, the Council on Recertification has requested from the American Association of Nurse Anesthetists documentation which reflects evidence of the applicant's having met the criteria for recertification. To the extent to which such files are incomplete, the applicant will be required to furnish additional information.

On June 1, 1980, the Council will send an application on those individuals that have been recertified by the Council. This application will be for recertification from August 1, 1980-August 1, 1982. With the application, the individual will document having met the criteria for recertification.

Composition and term of office

The Council on Recertification consists of nine individuals representing the community of interest involved in the process of recertification of nurse anesthetists. Membership is as follows: one active-practicing member who is actively engaged in the teaching or administration of a nurse anesthesia program; four active-practicing nurse anesthetists; a board-certified anesthesiologist and surgeon who have a current working relationship with CRNA's; one member representing the public at large; the chairman of the Continuing Education Committee of the AANA, who will serve in this capacity by virtue of said office as a full voting participant.

New members of the Council are elected as such by present members of the Council in the exercise of their sole discretion by the relevant professional association. The physician candidates are proposed by their respective certifying body and/or professional association. This slate of candidates includes a minimum of three nominees for each vacancy to be filled.

The terms of office for members of the Council are three-year staggered terms, except for the chairman of the Continuing Education Committee of the AANA, who will serve for a term corresponding with such chairmanship.

Time and purpose of meetings

Regular meetings. The Council meets three times a year, at such time and place as is determined by the Council.

Special meetings. Special meetings of the Council may be called by the Chairman or any six members, provided at least ten days' notice is given to each member of the Council in advance of the meeting, or unless such notice is waived in writing. Consideration of other matters at a special meeting, other than provided for in the call, may be conducted with the approval of two-thirds consent of the members of the Council present.

Procedural rules for recertification review

1. Definitions. As hereinafter used, the following terms shall have the meaning ascribed thereto as provided in this section.

(a) "Council" shall mean the Council on Recertification, which shall be vested with making the determinations of whether to certify for credit a proposed continuing education program, course or other material, and of
whether an individual shall be granted recertification status.

(b) “Council on Practice” shall mean the Council on Practice of the American Association of Nurse Anesthetists, which shall be vested with the authority to conduct appellate proceedings contesting the adverse determination of the Council.

c) “Adverse Determination” shall mean any decision rendered by the Council which denies, or indicates an intent to deny certification of any portion or all of a proposed continuing education program, course or material, or recertification of an individual as a Certified Registered Nurse Anesthetist.

d) “Applicant” means an individual who has submitted an application for recertification as a CRNA, and “Program Applicant” means an individual, association, organization, corporation, whether for profit or not-for-profit, or other entity which has submitted a request for certification of a particular course, program or material as qualifying for credit for continuing education.

2. Notice of Determination. The Council shall notify the applicant or program applicant of its decision either to certify or deny certification of the application for recertification as a CRNA or for certification of a continuing education course, program or material. Said notice shall bear the date of its issuance. In instances where the determination is adverse, the notice shall briefly inform the applicant of the specific reasons therefor and, in the case of a program applicant, of the portion of the course, program or material deemed unsatisfactory, insufficient or not within substantial compliance with the requirements of the Council. Further, the notice shall inform the applicant or program applicant of the right to appeal the Council’s adverse determination at its next regular meeting, the date of which shall be included in the notice.

3. Notice of Appeal. The applicant shall, as a matter of right, have an opportunity to appeal any adverse determination rendered by the Council. Said notice shall be in writing and must be received by the Council within 30 days of receipt of the notice of adverse determination. Failure to so notify the Council of one’s intent to appeal shall be deemed as waiver of said right, unless provided otherwise by the Council. All notices must be properly addressed and mailed to: Chairperson, Council on Recertification, 216 Higgins Road, Park Ridge, Illinois 60068.

4. Hearing Schedule. At the next regularly scheduled meeting, which shall be at least 30 days after the receipt of the request for appellate review, the Council shall consider the matters brought before it on appeal.

5. Quorum. Appeals may be heard and determined only in instances where a quorum of the Council is present during the entire proceeding. A quorum shall constitute one more than half of the members of the Council. Individuals who participated in the deliberation of the Council from which the appeal has been taken shall have the power to vote in the respective pending matter.

6. Discovery. The applicant or program applicant shall have a right of access to any and all reports, materials, and other documents and evidence which are relevant and were considered in the initial determination of the matter in question.

7. Scope of Appeal. The applicant or program applicant may limit the scope of appeal to the record and information which was considered in the initial adverse decision as rendered by the Council. In addition, the applicant or program applicant shall have an opportunity to present additional relevant information to the Council which may include written and oral testimony.

8. Participants. The members of the Council and the applicant or program applicant and his representative may be present at the meeting of the Council hearing the appeal. Others may
be present if so requested by the applicant or program applicant in writing and at least 20 days prior to the hearing. The applicant or program applicant may decline to appear if a written argument was received at least 30 days prior to the meeting. If the applicant or program applicant fails to appear in person or by written argument, the right to appeal shall be deemed waived and the prior decision shall stand.

9. Hearing Officer. The Chairperson of the Council shall act as the hearing officer and shall preside over the hearing and shall have the following duties:

(a) Determining the procedure to be utilized during the hearing;
(b) Providing assurance that all participants in the hearing have a reasonable opportunity to present relevant oral and documentary evidence;
(c) Maintaining decorum and order throughout the hearing procedure; and
(d) Assuring that the proceedings are conducted in a fair and impartial manner to the extent reasonably possible.

All procedural requests, objections or challenges shall be made at the time issues arise and shall be made to the hearing officer. The hearing officer shall render a decision thereon unless overruled by a majority vote of the Council. The hearing officer shall not vote on the final decision of the Council.

10. Record of Proceedings. An accurate record of the proceedings shall be maintained which may be accomplished by either the use of a stenographic court reporter, electronic recording device, detailed transcription, or the taking of adequately detailed summary minutes. The cost of the court reporter and any transcription thereof shall be borne by the party so requesting said stenographic court reporter or said transcriptions thereof, unless otherwise agreed by and between the parties.

11. Legal Representation. Both the Council and the applicant or program applicant shall have a right to be represented by legal counsel or other legal advisors. However, the proceedings shall not be conducted in a manner substantially similar to proceedings conducted in either courts of law or courts of equity.

12. Evidence. All arguments, documents or other information, evidence or testimony shall relate to the correctness and proximity in time of the adverse determination. In the case of a program applicant, plans, improvements, corrections or other modifications to the program, course or material which have been made after the adverse determination by the Council shall be deemed admissible in these proceedings to the extent relevant.

13. Burden of Proof. The applicant or program applicant shall have the burden of establishing that the initial decision of the Council was arbitrary and capricious.

14. Decision. Within 30 days after the hearing, the Council shall issue a written decision which shall either affirm or deny the initial decision. In instances where the decision is adverse to the applicant (affirmation of the initial adverse determination), the Council shall provide a statement as to the basis of its decision which shall inform the applicant as to the reasons for rendering the same. Further, if adverse, the notice shall inform the applicant or program applicant of a right to appeal to the Council on Practice within 30 days of receipt of the notice. All decisions and any statements, where necessary, shall be forwarded to the applicant by registered or certified mail, return receipt requested.

15. Notice of Appeal to the Council on Practice. The applicant or program applicant shall, as a matter of right, have an opportunity to appeal any adverse determination rendered by the Council after the first appeal. Said notice shall be in writing and must be received by the Council on Practice and the Council within 30 days of receipt of the notice of decision from the Council. Failure to so notify the Coun-
cil on Practice and the Council of one’s intent to appeal shall be deemed a waiver of said right.

16. Council on Practice Appellate Hearing Schedule. At the next regularly scheduled meeting of the Council on Practice, which shall be at least 30 days after the receipt of the request for appellate review, the Council on Practice shall consider the matters brought before it on appeal. The applicant or program applicant may request in his notice that a special session of the Council on Practice be convened for the sole and limited purpose of hearing the appeal. Such request shall be honored only if the reasons set forth in such request are to the satisfaction of the Council on Practice.

17. Costs of Appellate Hearing. In instances where the applicant or program applicant requests a special hearing of the Council on Practice, such applicant shall bear any costs incurred by the Council on Practice. Council members and other witnesses attending such appellate hearing. Such expenses shall be limited to those incurred in connection with the hearing and shall include, but not be limited to, travel expenses, lodging and hearing rooms’ rental expenses.

18. Quorum. Appellate hearings may be heard and determined only in instances where a quorum of the Council on Practice is present during the entire proceeding. A quorum shall constitute more than one-half the members of the Council on Practice. In determining a quorum, any individual or individuals who participated in the initial deliberative process conducted by the Council shall not be counted and the number of members of the Council on Practice shall be reduced accordingly. In addition, no individual or individuals who participated in the deliberation of the Council from which an appeal has been taken shall have the power to vote in the appellate hearing.

19. Discovery at the Appellate Hearing. The applicant or program applicant shall have the right of access to any and all reports, materials and other documents and evidence which are relevant and were considered by the Council in making its determination of the matter in question. This shall include all reports, interim reports, deliberations or other documents which may be favorable, unfavorable or neutral to the position of either the Council or the applicant or program applicant.

20. Scope of Appellate Review. The applicant or program applicant may limit the scope of appellate review to the record and information which was considered by the Council. This record may include any statements, rebuttal information and oral testimony which may have been presented to and considered by the Council. In addition, the applicant or program applicant shall have an opportunity to present additional relevant information to the Council on Practice which may include written or oral testimony.

21. Participants at the Appellate Review. The members of the Council on Practice, the applicant or program applicant and his/her representative, and one or more members of the Council who participated in its deliberations affecting the adverse determination may all be present at the appellate hearing. Further, witnesses to be called by either the Council or the applicant or program applicant may be present. If the applicant or program applicant fails to appear personally at the appellate review, his right to appellate review shall be deemed to have been waived and the prior decision of the Council shall stand, unless a written argument was received at least 30 days prior to the hearing.

22. Appellate Hearing Officer. An individual shall be selected by the Council on Practice to act as the hearing officer. The hearing officer shall preside over the appellate hearing and shall have the following duties:

(a) Determining the procedure to be utilized during the hearing;
(b) Providing assurance that all participants in the hearing have a reasonable opportunity to present relevant oral and documentary evidence;

c) Maintaining decorum and order throughout the hearing procedures; and

d) Assuring that the proceedings are conducted in a fair and impartial manner to the extent reasonably possible.

All procedural requests, objections or challenges shall be made at the time issues arise and shall be made to the hearing officer. The hearing officer shall render a decision thereon unless overruled by a majority vote of the Council on Practice. The hearing officer shall not vote on the final decision of the Council on Practice.

23. Record of Appellate Proceedings. An accurate record of the proceedings shall be maintained which may be accomplished by either the use of a stenographic court reporter, electronic recording device, detailed transcription, or the taking of adequately detailed summary minutes. The cost of the court reporter and any transcription thereof shall be borne by the party so requesting said stenographic court reporter or said transcriptions thereof, unless otherwise agreed by and between the parties.

24. Appellate Legal Representation. The Council on Practice, the Council, and the applicant or program applicant shall have a right to be represented by legal counsel or other legal advisors. However, the proceedings shall not be conducted in a manner substantially similar to the proceedings conducted in either courts of law or courts of equity.

25. Council Decisions. The decisions of the Council and the reasons therefore shall be admissible at the appellate hearing before the Council on Practice and shall be given such probative value as the hearing officer deems appropriate.


All arguments, documents and other information, evidence or testimony shall be related to the correctness and proximity in time of the adverse determination of the Council. Any new or additional matter shall not be introduced unless the Council on Practice, in its sole discretion, deems such material materially relevant to the decision.

27. Burden of Proof. The applicant or program applicant shall have the burden in establishing that the adverse decision of the Council was arbitrary and capricious.

28. Decision of the Council on Practice. Within ten days after the hearing, the Council on Practice shall inform the applicant or program applicant and the Council of its written decision either to affirm or deny the adverse decision of the Council or to refer the matter back to the Council for reconsideration. If the decision is to affirm, the reasons therefore shall be included in the notice of the decision. If the decision is to reverse or refer back, the Council shall be informed by separate letter of the reasons for such action, and such letter shall not be forwarded to the applicant or program applicant if it refers to a decision to reverse.

29. Effect of a Decision of the Council on Practice. The Council on Practice does not grant recertification and its decisions shall not in any event be deemed to have granted recertification to any applicant or program applicant. Nonetheless, the Council, by its Bylaws, has bound itself to abide by the decisions of the Council on Practice while acting as the appellate body designated in the Bylaws of the Council.

30. Confidentiality. All appellate proceedings, both before the Council and before the Council on Practice, shall be conducted in a confidential manner. The entire proceedings, including any notice of adverse determination, the notice of appeal, the record of appeal, the hearing, the deliberations and all other matters and testimony presented
in connection with any such hearing shall be confidential and not subject to public disclosure. By requesting an appeal to either the Council or the Council on Practice, the applicant or program applicant agrees that he/she shall not cause or attempt to cause any publication, disclosure or dissemination of information presented during the course of said proceedings. The only exception from this rule of confidentiality shall be that any party may disclose the content of the final decision, regardless of whether such final decision is rendered by the Council or the Council on Practice.

Note: The criteria for Appendix 1 is identical to the AANA Guidelines for a Refresher Program. Copies of this document may be obtained by contacting the Staff Secretary to the Council on Recertification.