Advancing Recertification for Nurse Anesthetists in an Environment of Increased Accountability

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The nurse anesthesia profession has been an advocate of credentialing since 1945 when the certification program and initial requirements were introduced. Substantial changes have evolved in the credentialing of health professionals over recent years to include documentation of initial and continuing competence while promoting patient safety. The National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA) has conducted a 3-year investigation into continuing competence as applied to the practice of nurse anesthesia and to other professions. The purpose of this article is to present the essential concepts and current developments related to competence and continuing competence for nurse anesthetists. The NBCRNA continues to seek input from nurse anesthetists and stakeholders in its deliberations on how to define the future requirements for continuing competence.

Keywords: Continued competency, continued professional certification, credentialing, recertification.
NOCA) and the national standard-setting organization for credentialing groups, including certification boards, licensing boards, and associations. The NBCRNA has been continuously accredited since 1980. Accreditation by the NCCA indicates that the NBCRNA certification program has been reviewed by an impartial commission and deemed to have met the nationally accepted criteria and guidelines of the NCCA. The ABNS, established in 1991, serves as the national umbrella organization for nursing specialty certification boards authorized and recognized to certify nurse specialties in the United States. It promotes the highest quality of specialty nursing practice through the establishment of standards of professional specialty nursing certification. The NBCRNA certification program was one of the first national certification bodies in 1992 to be recognized and approved by the Accreditation Board for Specialty Nursing Certification of the ABNS.

Current Perspective
The NBCRNA has conducted a 3-year investigation into continuing competence as applied to the practice of nurse anesthesia and to other professions. In conducting the investigation, the NBCRNA has evaluated ways to align its recertification program to current concepts of continuing competence and best practices in recertification. The investigation has identified that there is a paradigm shift toward progressive recertification processes based on a comprehensive view of how to enhance and measure continued competence. These progressive approaches focus on lifelong learning (or ongoing enhancement of competence), continuous professional development, and the opportunity for individuals to demonstrate their continuing competence. Two studies, a national benchmarking study, Practices and Requirements of Renewal Programs in Professional Licensure and Certification, and Recertification Practice Analysis for Nurse Anesthetists, provide sound foundations for a deliberative process to identify future requirements to document continuing competence for nurse anesthetists. A visionary change for the future is consistent with the NBCRNA’s mission to keep abreast of new research and developments in credentialing. A variety of accreditation and professional standards drive this need for change, including the documentation of continuing competence as a means of addressing patient and consumer protection and individual provider accountability. Just as important, the profession itself demands excellence in services that are provided to patients.

The NBCRNA’s current investigation into continuing competence is not the first for the nurse anesthesia profession. Twenty years ago, the AANA Ad Hoc Committee to Develop a Conceptual Competence Model conducted a large-scale analysis that it reported under the title Nurse Anesthesiology Competence Evaluation: Mechanism for Accountability. After defining a philosophy of nurse anesthesia practice, the task force presented a practice model and a program in which candidates for recertification...
tion and their employers could use a checklist based on the then-current professional practice analysis to document their continuing competence and identify areas for improvement.

**Essential Concepts**

*Entry-level competence* for nurse anesthesia is defined operationally as the professional standards for practice, which hold that the Certified Registered Nurse Anesthetist must:

1. Document compliance with all state requirements for current and unrestricted licensure as a registered professional nurse;
2. Document satisfactory completion of a nurse anesthesia educational program accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs ("accredited program") within the previous 2 calendar years;
3. Agree to 6 essential certifications (ie, that his or her license has never been revoked, restricted, suspended or limited by any state, has never been surrendered, and is not the subject of a pending action or investigation); and
4. Perform successfully on the National Certification Examination for Nurse Anesthetists (NCE).

The professional standards for practice as a nurse anesthetist are designed to ensure that, when initially certified, nurse anesthetists possess sufficient knowledge and skill to safely practice in the specialty.

The level of expertise expected of nurse anesthetists is defined by the AANA Scope and Standards of Nurse Anesthesia Practice. In an effort to provide direction for the recertification of nurse anesthetists, the NBCRNA has defined the definition of *continuing professional competence* as follows: Continuing professional competence is an ongoing, multimodal, and progressive process that maintains and enhances proficiency in nurse anesthesia practice and is a concept that ranges on a continuum from entry-level proficiency to complete mastery. The determination of what knowledge and skill equate to proficiency at the level required for continued professional certification requires judgment about the needs of patients and the range of services that experienced nurse anesthetists provide.

As nurse anesthetists advance in their careers, they are expected to:

- Possess the essential knowledge and skills related to nurse anesthesia;
- Keep current with changes and developments in the practice of anesthesia since initial certification; and
- Independently or collaboratively manage complex problems as they arise with individual patients and the overall system of healthcare.

Through the recertification process, the NBCRNA endeavors to ensure that nurse anesthetists maintain essential knowledge and skills as well as familiarity with current scientific and technological developments. A nurse anesthetist who has satisfied the objective criteria receives recertification for a 2-year period. Recertification indicates that the recertified nurse anesthetist has maintained a current registered nursing and/or advanced practice nursing license; practices in clinical anesthesia or nurse anesthesia–related administration, management, or research activities; has participated in approved continuing education activities; and is not known to have developed any impairment that could interfere with the administration of anesthesia.

**Recertification Benchmarking Study**

An important step in the process of evaluating the recertification program was to discern how other professions define continuing competence and what components of their recertification programs work well. The NBCRNA gathered this information by conducting a thorough consortium benchmarking study in collaboration with several other leading certifying bodies and the Institute for Credentialing Excellence. The benchmarking study included a review of published literature on recertification over the 10-year period before its publication, which encompassed 39 articles, reports, web pages, as well as book chapters and 2 books. The survey of 331 certification and licensure organizations represented a wide range of professions.

An important finding of the benchmarking study was that developing a meaningful definition of continuing competence gives clear direction to the design of recertification programs. It provides a philosophy that can be used to evaluate the contribution of potential program components relative to the needs and interests of patients, employers, and other stakeholders. Most definitions also make reference to what these needs and interests are, so that stakeholder needs and interests, in turn, help to define the procedures by which the requirements for continuing competence are determined.

Another important finding of the benchmarking study was that a variety of procedures should be used in the recertification program—not just continuing education—as a means of assessing continuing competence and that these various procedures should be used at different points in time. The variety is important because certificates of almost any field (including nurse anesthesia) specialize after earning their initial certification, tailoring their work to the unique needs of their practice setting and patient community. Nurse anesthetists work within organizations and systems, and their practice contributes to, and is shaped by, the specific organizations and systems of which they are part. That is, individuals work to define the system at the same time that the system works to define their practice. Variety in recertification programs also helps to ensure that multiple sources of data inform the decision to award or withhold recertifica-
tion. To be valid and meaningful, continuing competence must account for specialization in areas related to professional nurse anesthesia practice and other forms of career development.

Although nearly all credentialing organizations require continuing education, the clear consensus in the benchmarking study is that continuing education in itself is not enough. Other vehicles such as self-assessments, peer and supervisor assessments, performance reviews and references, continuing employment, improved continuing education (with an end-of-course assessment), and portfolios have value in demonstrating to stakeholder groups that their quality assurance needs are met through recertification. All of these tools and more are increasingly seen as necessary in meeting stakeholder needs for validated competence. In fact, recommendations in the recent Institute of Medicine report Redesigning Continuing Education in the Health Professions promote the use of improved continuing education augmented with evidence of learning provided by other activities as a requirement for recertification.8

The NBCRNA endorses the primary recommendation of the study: Continuing competence programs should take a multistep approach that uses a triangulation of tools in an iterative process.

Recertification Practice Analysis
Recognizing that initial certification as a nurse anesthetist requires applicants to pass the NCE and that the content for the NCE is established through an analysis of practice at entry level, the NBCRNA desired to understand in what ways, if any, the content basis for its recertification programs should be different. To address this interest, the NBCRNA asked, “What is the essential knowledge base for the recertification candidate?” That is, should expectations for the continuing competence of nurse anesthetists be different from expectations for initial certification and, if so, how? The NBCRNA undertook a recertification practice analysis to find answers to these questions.

The recertification practice analysis identified the knowledge and skill that reasonably experienced nurse anesthetists must have in order to provide competent service, especially in contrast with entry-level expectations as defined for initial certification. The recertification practice analysis focused on advanced practice in the specialty and identified the responsibilities of nurse anesthetists in the variety of settings in which they work.

The practice analysis provided logical, practice-related, and research-based content to support various elements of the NBCRNA’s recertification program. An important objective of the study was to demonstrate that the aspects of nurse anesthesia addressed by the recertification program should reflect the requirements of different practice settings, patient groups, and conditions. Building on the work of a panel of experts, all active certified nurse anesthetists were asked to participate in the validation survey component of the project, and 6,650 (23.5%) provided qualified, usable responses. Responses to items in the demographic portion of the survey support the conclusion that participants constituted a reasonably representative sample of certificants across a variety of practice settings.

Results of the study validated that there are 3 broad domains for the recertification knowledge base for nurse anesthetists: clinical practice, practice evaluation and improvement, and professional responsibility. Recertified nurse anesthetists rely on critical thinking as they apply research to clinical decision making and comply with the AANA Scope and Standards for Nurse Anesthesia Practice.6 Clinical practice establishes a baseline of knowledge and skill that goes beyond the content of the NCE. Practice evaluation and improvement places responsibility on the working nurse anesthetist for analyzing the effectiveness of different practices for various populations and recommending improvements in the systems in which they work. Professional responsibilities include personal, legal, and ethical duties related to patient care and safety.

The 3 domains were validated using scales for importance, criticality, and frequency. Tasks and knowledge and skill statements were validated using scales for criticality and frequency. The importance scale offered insight into how essential the domain is for the recertified nurse anesthetist. Criticality (potential for harm) and frequency scales also supplied support for decision making about the individual tasks in the practice analysis. The study concluded that these domains and tasks, along with the knowledge and skill required for their successful performance, supply a reasonable basis for the NBCRNA’s recertification programs.

The future development of evidence-based practice modules and recertification examination is a key component in the continued professional certification life cycle for nurse anesthetists. Through the use of a self-assessment, each nurse anesthetist can identify areas for continued education credits, additional practice competencies, and responsibilities that are requisite for recertification. The competency assessment can be used to augment the current continued education, practice, and licensure requirements.

Recertification in Related Disciplines
In consideration of the best practices as identified in the recertification benchmarking study for demonstration of continued competence and recertification, the NBCRNA has accumulated evidence from other professionals in anesthesia, advanced practice nursing, allied health, and other nursing specialty credentialing organizations. For instance, in the late 1990s, member organizations of
The American Board of Medical Specialties (ABMS) started the process of defining new requirements for physician recertification. Central to these requirements is the expectation that certified physicians will have to undertake periodic assessment. Consistent with this direction, the American Board of Anesthesiology (ABA) instituted the Maintenance of Certification Assessment program, which anesthesiologists who were certified in 2000 and later must pass in order to renew their ABA credential.9

The National Commission for the Certification of Anesthesiologist Assistants requires that its certified assistants submit continuing education credits biennially (every 2 years) for certification renewal and that they successfully complete the Examination for Continued Demonstration of Qualifications of Anesthesiologist Assistants (CDQ Examination) every 6 years.10 The CDQ Examination is designed to test the cognitive and deductive skills of the practicing anesthesiologist assistant who has successfully entered and continues to participate in the certification process for anesthesiologist assistants administered by the National Commission for the Certification of Anesthesiologist Assistants. To be eligible to apply for the CDQ Examination, a candidate must be currently certified as an anesthesiologist assistant. Table 2 shows the requirements for recertification for other professions including advanced practice nurses (nurse anesthetists, nurse midwives, nurse practitioners), anesthesiologists, and anesthesiologist assistants.

### Table 2: Comparison of Recertification Requirements With Other Professions

<table>
<thead>
<tr>
<th>Recertification program components</th>
<th>Nurse anesthetists (current)</th>
<th>Certified nurse midwives</th>
<th>Nurse practitioners (AANP)</th>
<th>Nurse practitioners (NCC)</th>
<th>Anesthesiologists</th>
<th>Anesthesiologist assistants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency for recertification</td>
<td>Every 2 years</td>
<td>Every 5 years</td>
<td>Every 5 years</td>
<td>Every 3 years</td>
<td>Every 10 years (if certified after 1999)</td>
<td>Every 2 years</td>
</tr>
<tr>
<td>Current licensure</td>
<td>Unrestricted license as a registered nurse</td>
<td>Unrestricted license as a registered nurse</td>
<td>Unrestricted license as a registered nurse</td>
<td>Unrestricted license as a registered nurse</td>
<td>Current license as a medical doctor</td>
<td>Not required</td>
</tr>
<tr>
<td>Continuing education</td>
<td>40 hours continuing education</td>
<td>20 hours CE; complete 3 self-learning modules each cycle that accounts for 18-20 CE credits per module</td>
<td>75 hours continuing education</td>
<td>15-60 hours continuing education</td>
<td>350 continuing education units in 10 years (200 prior to the Maintenance of Certification Assessment, or MOCA)</td>
<td>40 continuing education units</td>
</tr>
<tr>
<td>Examination</td>
<td>Not required</td>
<td>Proposed over the next 5 years: Assessment of Performance in Practice and Standardized Cognitive Assessment</td>
<td>Optional: computer-based exam or CE plus practice</td>
<td>Specialty Assessment Evaluation: 125 questions reflecting the core certification specialty knowledge competencies (2010-2013)</td>
<td>MOCA in years 7 to 10 of each cycle</td>
<td>Examination for Continued Demonstration of Qualification Exam every 6 years</td>
</tr>
<tr>
<td>Practice</td>
<td>Substantial engagement (850 hours) in the practice of nurse anesthesia over 2-year period</td>
<td>Not required</td>
<td>1,000 hours</td>
<td>Not required</td>
<td>Clinical practice is required and evaluated locally, with case evaluation and clinical simulation</td>
<td>Not required</td>
</tr>
</tbody>
</table>

Abbreviations: AANP, American Academy of Nurse Practitioners; NCC, National Certification Corporation.

The National Certification Corporation, which certifies nurse practitioners in several specialties, accepts 45 hours of continuing education in the specialty along with a specialty assessment from the National Certification Corporation's website as the basis for determining a professional development plan as one path for recertification.11 Alternatively, recertification may be linked to the specialty assessment.11 The American Academy of Nurse Practitioners (AANP) accepts 20 hours of continuing education that accounts for 18-20 CE credits per module. Self-learning modules are available on its website.

Future Possibilities for Nurse Anesthetist Recertification

Patient needs for competent care and the increasing attention of the public and other future possibilities for nurse anesthetist recertification.
credentialing programs to issues related to continuing competence represent important drivers for the recertification of nurse anesthetists. Based on its research, the NBCRNA seeks to ensure meaning and relevance as it advances quality assurance objectives through recertification. The NBCRNA presents the foregoing information about current conditions and considerations in the design of recertification programs in the hope of engaging nurse anesthetists and building recertification programs that are responsive to stakeholders. Discussions should account for the many ways that continuing competence is developed through ongoing study and practice, with the ultimate goal of an overall improvement in practice and patient safety.

Simulation assessment in the future may be one of the ways to assess continuing competence. Simulation can include the use of virtual applications or even actual demonstration at established centers and computer scenarios for a variety of practice situations. Because of the wide scope of nurse anesthesia practice, geographic access, and costs, implementation of standard requirements will be challenging. Therefore, the NBCRNA endeavors to offer a menu of choices to current nurse anesthetists in order to accommodate provider needs and adhere to standards for credentialing.

There is substantial interest among nurse anesthetists in obtaining advanced specialty recognition. A possibility is to consider enhanced continuing education activities in specialty areas within nurse anesthesia as part of a specialty recognition program. Under this scenario, nurse anesthetists who specialize in an area of practice (ie, pain, obstetrics, pediatrics) can document their specialty knowledge and practice, complete a focused assessment, and renew their certification as nurse anesthetists at the same time.

Summary

The NBCRNA has undertaken an in-depth analysis of the essential concepts and objectives related to continuing competence and recertification in nurse anesthesia. The analysis involved 2 studies: a certification industry benchmarking study to determine trends and programs in other professions, and a recertification practice analysis to determine the knowledge and skills required of recertified nurse anesthetists. Discussions have also included the possibility of specialty recognition programming as part of the recertification framework.

The NBCRNA has established a website through which to communicate information about recertification program planning discussions and to actively seek input. The expectation is that stakeholders will review the planning discussion and advise on ways to ensure that ongoing stakeholder needs may be addressed through recertification, so that the NBCRNA can continue providing excellence in credentialing for nurse anesthetists. It is essential that the NBCRNA continue to move deliberately in leading the changes necessary for recertification.

REFERENCES


AUTHORS

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