Background
Many national medical bodies, including the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) and the Institute of Medicine (IOM), identify knowledge and clinical competency as human factors that often contribute to patient safety errors.1 To address these problems, the Joint Commission is redirecting nursing education and training among its key patient safety requirements2 and the IOM stresses the importance of well-prepared nurses engaged in lifelong learning.3 A viable option to help promote these aims is the attainment of specialty nursing certification.

Certification is perceived as a validation of expertise and a demonstration of clinical competency.4 Moreover, certification is associated with personal satisfaction and sense of empowerment.5 6 7 This specialization is perceived favorably by patients and community members3 7 8 and certification may improve staff retention and teamwork amongst healthcare providers.1

In spite of these benefits, only 27.6% of nurses are certified nationally. At the Johns Hopkins Hospital Outpatient Center for Ambulatory Care Services, only about 25% of nurses are certified (n=17) out of 65 total nurses spread across 19 clinics and 75 specialty areas. Annually, these nurses serve the needs of nearly 232,000 patients.

Project Objectives
1. Create a collective vision among the Johns Hopkins Hospital Ambulatory clinic nurses leaders to embrace and support certification as a reflection of professional growth and a commitment to clinical excellence for patients and providers.
2. Collate the various nursing certifications available and create a grid of potential opportunities for each clinic area.
3. Explore individual perceived and actual barriers to pursuing certification and identify tactics to mitigate these barriers.
4. Assess the current highest educational degree and certification status of all RNs in the Ambulatory Clinics.

Methods
1. Use of the Magnet Recognition Program Demographic Data Collection Tool (DDCT) identifying 329 specialty certifications
2. Comprehensive PubMed and CINAHL plus database review
3. Creation of a JHH Ambulatory Care Services Specialty Certification Database, (63 certifications identified)
4. Validation of certifications through qualitative polling of ACL email listserve (n=14)
5. Development of quantitative metric tool

Results
Perceived Value of Certification Tool (PVCT)
A premium is placed on the intrinsic value of certification. All 100% of respondents agree that certification validates specialized knowledge, enhances feelings of personal accomplishment, provides personal satisfaction, enhances confidence in clinical ability and indicates professional growth, with these five intrinsic items scoring highest overall. Only 31% of the staff believe certification increases salary.

<table>
<thead>
<tr>
<th>Table 1: PVCT</th>
<th>Mean</th>
<th>SD</th>
<th>% Respondent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valuable specialty knowledge</td>
<td>3.758</td>
<td>0.328</td>
<td>29/29 (100%)</td>
</tr>
<tr>
<td>Enhances feeling of personal accomplishment</td>
<td>3.793</td>
<td>0.328</td>
<td>29/29 (100%)</td>
</tr>
<tr>
<td>Professional personal satisfaction</td>
<td>3.793</td>
<td>0.366</td>
<td>29/29 (100%)</td>
</tr>
<tr>
<td>Enhances personal confidence in clinical abilities</td>
<td>3.724</td>
<td>0.403</td>
<td>28/29 (97%)</td>
</tr>
<tr>
<td>Indicates professional growth</td>
<td>3.724</td>
<td>0.403</td>
<td>29/29 (100%)</td>
</tr>
<tr>
<td>Enhances professional credibility</td>
<td>3.660</td>
<td>0.448</td>
<td>29/29 (100%)</td>
</tr>
<tr>
<td>Provides evidence of professional commitment</td>
<td>3.580</td>
<td>0.449</td>
<td>29/29 (100%)</td>
</tr>
<tr>
<td>Indicates attainment of a practice standard</td>
<td>3.555</td>
<td>0.472</td>
<td>29/29 (100%)</td>
</tr>
<tr>
<td>Provides professional challenge</td>
<td>3.521</td>
<td>0.467</td>
<td>28/29 (97%)</td>
</tr>
<tr>
<td>Professional recognition from peers</td>
<td>3.566</td>
<td>0.485</td>
<td>28/29 (97%)</td>
</tr>
<tr>
<td>Increases marketability</td>
<td>3.558</td>
<td>0.479</td>
<td>28/29 (97%)</td>
</tr>
<tr>
<td>Indicates level of clinical competence</td>
<td>3.517</td>
<td>0.489</td>
<td>29/29 (100%)</td>
</tr>
<tr>
<td>Provides evidence of accountability</td>
<td>3.517</td>
<td>0.533</td>
<td>28/29 (97%)</td>
</tr>
<tr>
<td>Professional recognition from other health professionals</td>
<td>3.333</td>
<td>0.494</td>
<td>29/29 (100%)</td>
</tr>
<tr>
<td>Professional recognition from employers</td>
<td>3.256</td>
<td>0.573</td>
<td>24/29 (83%)</td>
</tr>
<tr>
<td>Increases consumer confidence</td>
<td>3.192</td>
<td>0.589</td>
<td>29/29 (100%)</td>
</tr>
<tr>
<td>Professional autonomy</td>
<td>3.183</td>
<td>0.416</td>
<td>29/29 (100%)</td>
</tr>
<tr>
<td>Increases salary</td>
<td>2.370</td>
<td>0.763</td>
<td>29/29 (100%)</td>
</tr>
</tbody>
</table>

Certification Incentives
Potential incentives were intentionally stratified according to: low, moderate and high degrees of implementation difficulty (i.e. low = easier to implement; moderate = neither easy nor difficult to implement; high = difficult to implement). The majority of participants agree or strongly agree that the cost of certification validates specialized knowledge, increases marketability, provides evidence of accountability and indicates a practice standard. Almost 76% of respondents agree or strongly agree that certification enhances personal confidence in clinical abilities. Nearly 57% believe they don’t have enough time to certify (17% unsure). Finally, 41% agree there isn’t tangible incentive to certify (31% unsure).

Specific Certification Recommendations
Ambulatory Care nursing staff should be encouraged to pursue their specialty specific certifications or three interdisciplinary certifications applicable to nearly all Ambulatory Care Service staff.

1. Certified Ambulatory Nurse, RN-BC
2. Medical-Surgical Registered Nurse, RN-BC
3. Nursing Executive, NE-BC

Addressing Barriers
Certification Costs
1. Promote membership to professional organizations (i.e. ANA) to reduce costs of exams. For non-ANA members, the costs of the certified ambulatory exam could exceed $825, compared to $550 for ANA members.
2. Budget departmental funds to cover some or all of the certification costs. These can be based on study group participation or the successful completion of the exam.

Certification Content
1. Develop a Certified Ambulatory Nurse study course12 and create local study groups to promote team engagement.
2. Recruit the nursing staff members to serve as certification leaders for Ambulatory Services.
3. Dispel myth of insufficient time. Most exams are offered quarterly, providing flexibility in scheduling.

Institutional Support
1. Senior leadership can initiate the certification process by identifying to staff the certifications they themselves plan on pursuing and a timeline for completion.14
2. Provide support to staff prior to the exam.
3. Celebrate the achievements of those who pass.
4. Create an implementation plan for increasing certification rates across the Ambulatory Care Services nursing staff.

Limitations
1. Cross-sectional design and mixed research evaluating the relationship between certification and patient outcomes.15 16 17 18
2. Many proponents of certification are the boards and organizations offering the certification.

References

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