



AMERICAN BOARD OF NURSING SPECIALTIES

ACCREDITATION STANDARDS

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STANDARD 1

DEFINITION AND SCOPE OF NURSING SPECIALTY

The certification examination program is based on a distinct and well-defined field of nursing practice that subscribes to the overall purpose and functions of nursing. The nursing specialty is distinct from other nursing specialties and is national in scope. There is an identified need for the specialty and nurses who devote most of their practice to the specialty.

RATIONALE

The Accreditation Board for Specialty Nursing Certification, Inc. (ABSNC) has adopted the following operational definitions which will assist the applicant organization in understanding the differences among the three types of nursing certification:

- Basic specialty nursing certification – offered to any qualified registered nurse candidate.
- Advance practice nursing certification – offered to a registered nurse candidate prepared at the graduate degree level. Practice and certification are within a specialty nursing area.
- APRN certification – offered to a registered nurse candidate prepared at the graduate degree level with educational and certification content congruent in terms of specific role and population. APRN is a legally protected title for licensure purposes. APRN certification should measure entry level competence at a graduate degree level in a defined area of practice.

The technical dimensions of specialty nursing cannot exist apart from their scientific basis. To be recognized, a professional specialty, like a profession, must have a distinct and developing body or system of scientific knowledge. This system must describe the science, its set of elements, and the relationship of the elements to the whole of nursing science. The system of knowledge should reflect the profession's view of the specialty, its realm and object, and the specified area of study. Further a specialty must have a defensible claim or legitimacy that can be acquired only when the specialty serves a societal need.

CRITERIA

- Evidence of the professional and scientific status of the specialty exists.
- A body of scientific knowledge that is unique and distinct from that of basic nursing provides the theoretical underpinning for the specialty. A substantial portion of the knowledge base is not shared by other nursing specialties, although some of the components may be shared with related specialties.
- There is evidence of a societal need for nurses in the specialty and a pool of nurses who concentrate their practice in the specialty.
- A national or international-organization with registered nurse members, advanced practice nurse members and/or APRN members that endorse or support the specialty.
- The specialty has been defined, its core knowledge explicated, a scope of practice written, with the nursing component delineated, and standards for the specialty specified.
- The science, its' set of elements, and the relationship of the elements to the whole of nursing science, is described.
 - The practice specialty's definition and/or standards describe how the following four essential elements of contemporary nursing practice as detailed in the American Nurses Association Social Policy Statement (ANA, 2000) are operationalized:
 - attention to the full range of human experiences and responses to health and illness without restriction to a problem-focused orientation;
 - integration of objective data with knowledge gained from an understanding of the patient or group's subjective experience;

- application of scientific knowledge to the process of diagnosis and treatment; and, provision of a caring relationship that facilitates health and healing.
- If the specialty certification is available to other disciplines:
 - Role Delineation Studies (RDS)/job analysis data provide evidence that demonstrates the unique role of nurses from other disciplines practicing in the specialty.
 - Based on the RDS/job analysis, an examination, including but not necessarily limited to those unique nursing components, is administered to RNs, advanced practice nurses and/or APRNs.
 - the certification credential awarded to nurses is a nursing credential; the nursing credential is awarded only to RNs, advanced practice nurses and/or APRNs.

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
<p>1.1 Provide written materials that describe the definition of the specialty, standards, scope of practice, and the specialized body of knowledge required for nurses practicing in the specialty. Materials specify how the certifying organization uses these materials. Examples might include:</p> <ul style="list-style-type: none"> a. Table of contents from Core Curriculum b. Copies of publications and other documents that discuss the focus of the specialty, the phenomena with which the specialty is concerned, and its relationship to the whole of nursing. 	
<p>1.2 Provide information describing representative nursing educational and training programs with a major or formal focus in the specialty (e.g. formal academic programs, continuing education, or curricula from institutional programs, such as extended preceptorships).</p>	
<p>1.3 Provide written materials that document the national or international organization(s) that endorse or support the specialty as defined in the scope and standards (e.g. membership brochure, position papers, web page(s)).</p>	
<p>1.4 Provide data on the percentage of nurse members in the professional membership organization or supporting nursing organization (e.g. number of nurses belonging to organization in comparison to number of nurses in the specialty as well as to the whole of the RN, advanced practice nurse or APRN populations).</p>	
<p>1.5 Provide data on the approximate number of nurses who practice in the specialty and cite the reference source in support of these data (e.g. data from HRSA)</p>	
<p>1.6 Describe the types of jobs available to nurses in this specialty and provide at least two job descriptions for nurses in the specialty.</p>	
<p>1.7 Provide at least two examples of documentation demonstrating the demand for nurses in the specialty. Examples might include:</p> <ul style="list-style-type: none"> a. Certification trends b. Advertisements for jobs in the specialty c. Data supporting the present and future patient/client base in the specialty 	

<ul style="list-style-type: none"> d. Enrollment figures from educational and training institutions e. Labor projects (e.g. Department of Labor forecasts) f. Articles about the nursing shortage in the given specialty 	
<p>1.8 If the specialty certification is also available to other disciplines, the candidate must:</p> <ul style="list-style-type: none"> a. provide written materials from the RDS/job analysis that demonstrate that although there may be a core base of knowledge that is shared among disciplines practicing in the specialty, there is a component that is specific to that nursing specialty. b. provide materials that demonstrate that, based on the RDS/job analysis, a component of the nursing certification examination is different from examination components of other disciplines and this nursing specific examination component is available only to RN certification candidates, advanced practice nursing or APRN certification candidates. c. Provide materials that demonstrate that the credential awarded to nurses is designated (e.g. titled) a nursing certification and that it is awarded only to RNs, advanced practice nurses or APRNs. 	

**STANDARD 2
RESEARCH BASED BODY OF KNOWLEDGE**

A body of research based knowledge related to the nursing specialty exists. Mechanisms have been established for the support, review, and dissemination of research and knowledge in the specialty. Activities within the specialty contribute to the advancement of nursing science within the specialty.

RATIONALE

The body of knowledge related to a specialty can evolve only when the recursive cycle of theory, research, and practice is supported through dissemination of information, critical review of scholarly work, and appropriate allocation of resources.

CRITERIA

A published body of literature and research focuses of the specialty, and published/stated research priorities have been established for the specialty.

DOCUMENTATION - The application must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
2.1 Provide at least one example of published bodies of literature and research on the focus of the specialty (e.g. articles, journals, books, chapters, Internet) and provide at least one example of how knowledge is disseminated within the specialty (e.g. continuing education brochures, academic courses, specialized training programs)	
2.2 Provide a description of research plans and activities of the specialty and/or applicant organizations that were concluded or conducted during the previous 3-year period.	

**STANDARD 3
ORGANIZATIONAL AUTONOMY**

The certifying organization (certifying governing body) is an entity with organizational autonomy governed in part or in whole by certified nursing members. However, a collaborative relationship exists between the certifying organization and a national or international specialty association that supports the nursing specialty and the standards for specialty practice.

RATIONALE

Certification is a mechanism for acknowledging and promoting professional competence. It also emphasizes commitment to consumer protection. A collaborative relationship should exist between the certifying organization (certifying governing body) and a specialty association that supports the specialty and sets standards for specialty practice. However, the certifying organization (certifying governing body) must be sufficiently independent from the specialty association to ensure integrity of the certification process, to maintain clear lines of accountability, and to prevent undue influence on the part of vested interests. At least 51% of the members of the certifying governing body must be registered nurses certified in the specialty. If the specialty membership association has representation on the governing board of the certifying organization, the remaining board members from the certifying organization must constitute the majority.

CRITERIA

All policy and budgetary decisions relating to certification are the sole decision of the certifying organization (governing body), not subject to approval by any other entity. There is philosophical support from, and appropriate collaboration with, a national or international specialty association.

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
<p>3.1 Submit the relevant sections of the bylaws and policies and/or procedures for the certifying organization (certifying governing body) that cite specific sections, articles, and paragraphs that address the certifying organization’s sole responsibility with regard to:</p> <ul style="list-style-type: none"> a. Administrative authority b. Item development and ownership c. Examination content and construction d. Examination copyright ownership e. Test administration f. Investigation/management of testing irregularities (whose responsibility) and contingency plans g. Eligibility requirements for certification and recertification h. Setting of passing scores i. Appeals process j. Budget preparation and approval k. Fee setting l. Grants/loans received, if applicable m. Certification board meeting processes, if not covered by Bylaws n. Selection, performance evaluation and dismissal 	

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
<ul style="list-style-type: none"> o. of chief staff officer Nominations, elections, and/or appointment processes for officers and governing body (board) members (provide detailed information about this process) 	
<p>3.2 If incorporated, submit a copy of the certifying organization’s articles of incorporation.</p>	
<p>3.3 If a formal relationship exists with the specialty organization, submit a copy of the agreement or contract that describes the terms and conditions of this relationship.</p>	
<p>3.4 Provide a list of board members and officers and demographic information of city/state of residence, employer name/city/state, position held, credentials.</p>	
<p>3.5 Provide documents that identify the mechanism used to disclose potential conflicts of interest (e.g. forms signed by Board members, policies)</p>	
<p>3.6 Submit an organizational chart of the certifying organization and any allied organizations, indicating all the relationships between organizations, board members, committee members and staff.</p>	
<p>3.7 Submit a minimum of one letter/statement of agreement, endorsement, or support for the certifying organization by a national or international specialty organization with nursing members (e.g. letters of support, written agreements, position statements, newsletters, press releases, or journal articles).</p>	
<p>3.8 Provide a minimum of one document that demonstrates continued collaboration between the certifying organization and a national or international specialty organization (e.g. joint meetings, liaisons, or representatives to the respective boards, published statements.)</p>	

**STANDARD 4
NONDISCRIMINATION**

The certifying organization does not discriminate among candidates as to age, sex, race, religion, national origin, ethnicity, disability, marital status, sexual orientation, and gender identity.

RATIONALE

Candidates have the right to expect that all aspects of the certification process are fair and free from discrimination. All reasonable efforts should be made to ensure that examinations are job-related; that no candidate is excluded from the examination as a result of age, sex, race, religion, national origin, ethnicity, disability, marital status, sexual orientation, and gender identity; that language that may be offensive to population subgroups has been eliminated; and that efforts have been made to reduce bias and stereotyping.

Bias is the presence of an item characteristic that results in the differential performance of candidates of equal ability. Variations in test results are acceptable only when they reflect the true ability of candidate(s) and not when they result from unintended interpretation of the item by an identifiable subgroup. Bias in an examination is a validity issue.

Stereotyping in tests refers to material that characterizes individuals by virtue of their group membership. It can be offensive or demeaning even when it is not intended to be.

CRITERIA

The certifying organization takes steps to detect and eliminate bias from the test and to accommodate candidates with disabilities.

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
4.1 Submit the policy on non-discrimination and provide evidence on how this policy is distributed to potential candidates.	
4.2 Submit the policy and/or procedure that describes the process employed for bias and sensitivity review of individual items, the test as a whole, testing directions, and other materials published and distributed by the certifying organization.	
4.3 Provide evidence of compliance (e.g. policies, procedures) with the Americans with Disabilities Act of 1990 as Amended 2008, particularly that test centers are convenient, non-discriminating, comfortable, and convenient for all candidates and that all candidates are provided with fair testing conditions. Submit policies/procedures regarding providing alternate dates based on religious needs.	
4.4 Provide evidence/examples that reasonable accommodations are provided to eligible candidates	

(such as may be noted in documents/letters from the testing agency that demonstrate how requests were met).	
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**STANDARD 5
PUBLIC REPRESENTATION**

The certifying organization (certifying governing body) includes at least one public member with voting rights.

RATIONALE

Specialty nursing certification serves the general public, the nursing profession, and the specialty. Public input broadens the perspective of certifying organizations and helps focus attention on consumer concerns as they relate to quality, cost effectiveness and access to care. The public member’s lack of professional, career-related affiliation with a health care organization, related specialty, or vendor precludes actual or perceived conflict of interest.

CRITERIA

The certifying organization assures genuine public input into certification policies and decisions. By “public input,” the certifying organization indicates that it requires public members (1) who are not, and have not ever been nurses or other healthcare professionals; (2) who are not current or past employees of the certifying organization or the related specialty membership organization; (3) any vendor; or (4) non-nursing professionals who work closely with nurses in the nursing specialty environment. Public members who are otherwise qualified and have previously served as public members of the same or other boards are eligible to serve the same or other boards subject to the board’s own by-laws.

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
<p>5.1 Submit bylaws, policies, and/or job description and cite those sections that:</p> <ul style="list-style-type: none"> a. Describe the qualifications of the Public Member(s). b. Provide for public member’s vote during the certifying organization’s policy making processes, discussion, and decisions. c. Describe expectations for contributions and participation from the public member(s) (e.g. job description). 	

**STANDARD 6
ELIGIBILITY CRITERIA FOR TEST CANDIDATES**

The eligibility criteria for basic specialty nursing certification include:

- RN licensure
- Educational and experiential qualifications as determined by the individual specialty certifying organization.

The eligibility criteria for advanced practice nursing certification include:

- RN licensure
- A minimum of a graduate degree in nursing or the appropriate equivalent, including content in the specified area of specialty practice.

RATIONALE

The Accreditation Board for Specialty Nursing Certification, Inc. (ABSNC) has adopted the following operational definitions:

- Basic specialty nursing certification – offered to any qualified registered nurse candidate.
- Advance practice nursing certification – offered to a registered nurse candidate prepared at the graduate degree level. Practice and certification are within a specialty nursing area.
- APRN certification – offered to a registered nurse candidate prepared at the graduate degree level with educational and certification content congruent in terms of specific role and population. APRN is a legally protected title for licensure purposes. APRN certification should measure entry level competence at a graduate degree level in a defined area of practice.

Eligibility criteria should be based on a series of variables that are indicative of skills, knowledge and abilities required for specialty practice and which are expected to enhance safe and effective practice. These variables may include education, experience, prerequisite credentials, references, and performance on an objective examination. Each variable in the eligibility criteria is defined by the certifying organization, the profession, and other stakeholders.

ABSNC is committed to promoting the highest standards for the future of specialty nursing practice. ABSNC believes educational preparation for nurses combined with specialty certification will enhance clinical practice.

CRITERIA

The educational and experience requirements for certification must be specified by the certifying organization, along with associated rationale for each requirement.

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
6.1 Provide materials that list the eligibility criteria required for initial certification.	
6.2 Describe the rationale for each eligibility requirement (e.g. summary of RDS/job analysis, expert panel reviews, etc.)	
6.3 An eligibility determination must be made for each applicant. Submit the policies and procedures for	

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
<p>processing, reviewing and making judgments as to the candidate’s eligibility. If determining eligibility is subcontracted out, describe the training and monitoring processes performed by the certification organization and the subcontractor to maintain quality.</p> <ul style="list-style-type: none"> a. Submit the job description(s) of the professional staff that oversee the credential review process. b. Provide documentation that eligibility is determined prior to the day of the examination. 	
<p>6.4 For advanced practice and APRN examinations, submit policies and procedures that indicate that:</p> <ul style="list-style-type: none"> a. every candidate’s eligibility is verified at the time of initial certification b. program completion (e.g. academic) is verified for initial certification c. current licensure is verified for initial certification 	
<p>6.5 If practice examinations are offered, submit documentation indicating that taking a practice examination:</p> <ul style="list-style-type: none"> a. is not a requirement to sit for an actual certification examination b. does not imply successful performance on the examination 	

STANDARD 7 VALIDITY

The certifying organization has conducted validation studies to assure that inferences made on the basis of test scores are appropriate and justified.

RATIONALE

Validity is an essential component of any certification process and one of the most important considerations in test development and use. The concept of validity refers to the degree to which decisions based on test scores are sound, rational, and consistent with the purpose of the test. A passing score on a certification examination provides evidence that the nurse has the knowledge to practice competently in the nursing specialty, at the level indicated by the test. Certification indicates a level of knowledge beyond that required for entry-level practice in nursing, and it represents entry-level competence for certification in a nursing specialty. Advanced practice nursing certification should measure entry-level competence at a master's degree level. This implication is valid only if the test actually measures knowledge of the specialty and the passing score is set at a performance level of at least minimal competence for certification level practice (see Standard 12, Passing Scores).

Construct validity (construct-related evidence of validity) demonstrates the relationship between behavioral characteristics and abilities necessary for competent performance in a profession and the certification examination. For nursing certification, the characteristics are knowledge, skills and abilities underlying practice in the specialty. Construct validity is established to the extent that a well designed job analysis or role delineation study (RDS) has been properly executed.

Content-related validity (content-related evidence of validity) is, in part, maximized through the development of examinations that measure the content (constructs) identified via a job analysis/RDS. It is a determination that the content and format of the test, both in terms of individual items and the relative emphasis (weighting) of different parts of the test, are based on the identified or defined behavioral domain of the nursing specialty. Content validity is supported if the test measures to the degree indicated by the test specifications, the intended content areas and level of knowledge, the test format is appropriate, and the content of the test questions is accurate. Content-related validity is also assured through the test development process (see Standard 8, Test Development).

Several measures can be taken to promote the content validity of a certification examination program. One of the most important of these is conducting a job analysis/RDS. The job analysis/RDS should define the tasks (competencies) of a particular job as well as the knowledge required to perform the tasks competently. Skills must also be defined if a practical examination is administered. Linking this information to the examination content is of key importance. Two approaches to conducting a job analysis/RDS, logical and empirical, are commonly used. The use of both approaches strengthens the content-related validity of a test and is preferred.

The logical approach to an job analysis/RDS assumes that a representative group of nursing experts can develop a test blueprint based on what their experience and observations lead them to believe are the primary job activities necessary to perform competently in the nursing specialty. However, because the job analysis that results from this process is based on the input of a relatively small number of experts, it should be subjected to additional review and comment in the form of a validation survey. The survey should include an appropriate sample of nurses and provide them with the opportunity to comment on components of the job analysis/RDS and the weights assigned to the components of the job analysis/RDS (if initial weights were derived by the group of nursing experts). It is common for various rating scales to be used as part of the process of collecting data from the survey respondents and deriving or modifying the weights for the job analysis/RDS components. These can include scales assessing the frequency of task performance, criticality of task performance to certification-level practice, and the importance of mastery of the knowledge or skills to certification-level practice.

The empirical approach to a job analysis/RDS imposes a different form of objectivity on the process, in that conclusions are formulated based on data collected from a representative sample of nurses. Two phases are usually included. During the first phase, tasks are documented. Knowledge/skills are documented either during this phase or during the second phase. This documentation may occur through a panel of subject matter experts, literature reviews, or interviews with job incumbents. During the second phase, a well-defined research design is used to develop and pilot test an instrument, data are collected from a representative sample of nurses practicing in the specialty, and data are linked to the knowledge used to develop the test blueprint. Thus, the link between test content and work that is performed in the field is provided.

CRITERIA

With regard to the concept of validity, the certifying organization has defined competence to practice at each level it certifies in the specialty, and assures content validity of the certification examination.

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
7.1 Submit a copy of the job analysis/RDS report. If the job analysis/RDS is older than five years, document the rationale for not conducting another job analysis/RDS during the past five years. Provide qualitative or quantitative reasons, reports from Test Vendor Staff (e.g. meeting minutes, panel of experts, etc.) and other factors supporting the decision not to conduct a more contemporary job analysis/RDS. Describe the schedule to be followed for updating the job analysis/RDS.	
7.2 Reference the section of the job analysis/RDS report that describes the process used to define the content of the job in terms of representative, critical behaviors.	
7.3 Reference the section of the job analysis/RDS that describes the panel of experts who defined the job content, the sampling plan used to select them, and include evidence supporting their expert status (e.g. demographic information such as position, employer and credentials)	
7.4 Reference the section of the job analysis/RDS that describes the panel of experts who translated the results of the job analysis/RDS to the test specifications, the sampling plan used to select them, and include evidence supporting their expert status (e.g. demographic information such as position, employer and credentials)	
7.5 Reference the section of the RDS/job analysis that describes the empirical procedure used to verify the job content and determine the test content and test format specifications. This documentation should address: a. Defining the questions to be asked;	

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
<ul style="list-style-type: none"> b. Preparing the survey instrument; c. Defining the survey sample; d. Pilot testing survey instruments; e. Psychometric properties of the survey instrument; f. Distributing the survey instrument; g. Data collection; h. Data analyses, including psychometric properties; i. Preparation of test specifications including the linking of knowledge and skills (if delineated) to task statements; j. Weighting of test content and choice and weighting of test format (e.g. multiple-choice items, essays, practical test, etc.); k. Preparation of the final report of the study. 	
<p>7.6 Regarding the job analysis/RDS methodology, if you used a logical/judgmental panel of experts exclusively, describe the method of decision-making used (e.g. Delphi techniques, focus group, or other objective decision-making process) and the validation survey.</p>	
<p>7.7 Submit a copy of the test specifications (blueprint).</p>	

STANDARD 8

TEST DEVELOPMENT

Certification examinations are constructed and evaluated using methods that are psychometrically sound and fair to all candidates.

RATIONALE

For a certification examination to be psychometrically sound, care and attention must be devoted to the test development processes including item development or item writing and test construction based on a job-related test content outline and post-administration analysis.

The test blueprint and the item bank inventory should be used to guide the focus of item development. The process of developing individual test items, or item writing, further involves the selection of item writers, item writer training, item editing, maintenance of item security, and where practical, pre-testing. Items should be written by content experts who represent the various aspects of the specialty through geographic, demographic and practice diversity. The qualifications of individuals involved in item development should be documented, consistent with the stated level and purpose of the examination, and reflective of the clinical practice skills and amount of experience found in the certificant population. Since item development is not a commonly held skill, selected item writers should receive basic instruction in sound item writing and evaluation principles. They should be familiar with the purpose and identified structure of the examination as well as its intended audience.

Once developed, test items should be fully reviewed to ensure content accuracy, and reference citations should be current and documented in writing. Technical editing for accuracy and clarity should be performed by someone other than the item writer. Items should be re-evaluated by a qualified group of content specialists following the editing process to assure that alterations have not changed the essential meaning of individual questions.

Examination security begins with individual item security from the time of initial development. Mechanisms should be in place to assure that items, even in the developmental stage, are not compromised from a security standpoint. Secure item development sites, security and intellectual property ownership agreements signed by item writers and test developers, limited copies of written materials, and destruction of working notes are required.

Test construction is the process of compiling individual items and questions in accordance with the examination blueprint to constitute a complete examination. A mechanism to verify that the actual test complies with the domains and content areas specified in the test specifications or blueprint should be in place. Item distribution within the content domains of each examination should be documented. A sensitivity or cultural bias review should also be performed on each examination prior to administration. Items and questions should be evaluated for terminology, phrases, idioms, and language that may be sexist, racist, or may offend or discriminate against any legally protected subgroup in the target population

Once an examination is administered, the performance characteristics of the test items must be computed and evaluated before final scoring of the examination. Minimally, a mechanism supervised by qualified individuals should be in place to compute and evaluate the difficulty and discrimination of individual items. Item history should be available. Items that are "too easy", "too difficult", or that have a negative discrimination should be thoroughly evaluated to determine the cause. Final decisions regarding the viability of individual items should be based on these analyses and subject-matter expert review. If items are eliminated from a test form, the effect on compliance with the test blueprint and the passing score should be re-evaluated. The test performance should also be compared with a priori predictions of the psychometric characteristics of the test. Item and test statistics are critical and should be calculated and documented. The relative difficulty of examinations should be determined. A mechanism should be in place to assure that the difficulty is computed and used in the process of maintaining equivalent difficulty or compensating for differences in difficulty across examination forms.

Bias may be present when the performance of an examinee population subgroup differs from the group at large for a particular examination item. Variations in test results are acceptable only when they reflect the true ability of candidates. Instances of possible bias, as determined by the review of items by a panel of content specialists and statistical analysis, should be further evaluated. Items deemed biased should be revised or removed from the item bank and operational test forms.

CRITERIA

The certifying organization demonstrates that fair and psychometrically sound methods are used to construct and evaluate all items and tests.

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
8.1 Submit the policy or procedure for selecting individuals to write and review items.	
8.2 Provide demographic data on item writers who submitted items during the last 3-year period, including position, employer and credentials.	
8.3 Submit the outline, and any related policies and procedures, or training manual for the process of training item writers. Include editorial standards for clarity, accuracy, non-bias, sensitivity and consistency of items.	
8.4 Submit the policy or procedures related to item banking, item bank maintenance, item banking quality control, and item bank security.	
8.5 Submit the policy or procedure that describes the preliminary item analysis conducted prior to final scoring (if pretesting has not been employed) and the procedures for handling flawed items, ensuring equivalence of test forms, determining the adequacy of equating, and assessing the impact on the final passing score, if applicable.	
8.6 Submit policies or procedures that describe the process of assembling the test based on the test blueprint and identify the individuals and panel(s) of experts responsible for reviewing and approving the final test forms, sampling plan, and ensuring the content validity (content-related evidence of validity) of each form. If available, provide copies of rating scales or review forms used during this process.	
8.7 Describe the process used to review and approve items on the final test forms and the roles and responsibilities	

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
of expert panel(s), certification board members and staff, and test vendors during this process.	
8.8 Provide evidence that content experts review items selected for operational use on test forms for currency and relevance at least ever three years.	
8.9 Provide psychometric reports and item analysis summary reports for all test forms administered during the past 2 years (e.g. summary page from item analysis report showing summary item statistics at the test form level) plus individual item statistics for at least 5 items from each form.	

**STANDARD 9
RELIABILITY**

The certifying organization assures that test scores, including subscores, are sufficiently reliable for their intended uses.

RATIONALE

Reliability provides an indication of the degree to which test scores will be consistent over different forms of the same test administered on different occasions. A score obtained on a certification examination on one occasion provides an estimation of an individual's knowledge of nursing practice in a specific specialty. The estimation, based on only one test score, may or may not be precise. If an individual, for example, took ten forms of a given test, on ten different occasions, the ten scores achieved would vary somewhat. Discounting the effect of some event such as studying for the test, this variability would be due to measurement error. Both the reliability and the error of measurement associated with test scores can be estimated using classical measurement theory or item response theory (IRT).

Measures of reliability associated with classical measurement theory include coefficient alpha and KR-20. Both provide measures of internal consistency. Internally consistent items correlate well with one another, indicating that they measure the same ability or competency. Both coefficient alpha and KR-20 are useful for assessing the amount of error internal to the test itself, but do not provide a measure of the amount of error that might occur due to candidate factors such as fatigue and anxiety. The standard error of measurement (SEM) is an estimate of how much a candidate's score would be expected to vary if the candidate repeatedly took the same test, with performance on one occasion not affecting performance on any other occasion. Both overall SEM and SEM at the cut-score should be calculated and evaluated.

Item response theory offers similar measures of reliability for criterion referenced tests. Item characteristics curves (ICC) indicate how informative each item will be at each ability level. This can help certifying organizations select appropriate items to optimize measurement at selected candidate ability levels. It is also possible, with the use of ICCs, to compute the probability of individual candidates responding correctly to each item. These probabilities can then be used to estimate the SEM for any candidate at any ability level. Item response models also provide a method for determining whether candidates are responding to items in a consistent manner. This can provide information as to whether individual candidates fit a particular group of test items or not and can reveal unusual response patterns.

CRITERIA

The certifying organization must calculate or obtain measures or indices of reliability, standard error of measurement, and decision consistency for each certification examination administered.

<p>DOCUMENTATION – The candidate must: (For all test forms administered during the past 2 years, report information at test form level)</p>	<p>Narrative (Cite Tab or Appendix for Specific Supporting Documentation)</p>
<p>9.1 Describe the examination format (multiple-choice, essay, etc.) and total number of test questions.</p>	
<p>9.2 Provide data that describe the reliability indices calculated and the characteristics of the test takers on which they are calculated (e.g. first-time candidates, all candidates). Discuss any reliability estimates below 0.80.</p>	

<p>DOCUMENTATION – The candidate must: (For all test forms administered during the past 2 years, report information at test form level)</p>	<p>Narrative (Cite Tab or Appendix for Specific Supporting Documentation)</p>
<p>9.3 Provide data documenting the internal consistency reliability index of the test scores, the standard error of measurement (SEM) and decision consistency.</p>	
<p>9.4 Provide data documenting the reliability indices of subtests within the test, if calculated.</p>	
<p>9.5 If item response theory is used, report and plot the item and test information functions.</p>	
<p>9.6 If administering a performance based or practical exam assessment method in which skills are assessed by observers:</p> <ol style="list-style-type: none"> a. Identify the method by which this assessment is scored; b. If performance assessments are required, describe the format and criteria for passing; c. Provide a copy of the policy or procedure that describes the training of observers; d. Report the inter-rater reliability estimate of observers and the method used to determine this estimate; e. Provide analysis of results across candidates and scoring criteria to include reliability statistics, and documentation of measurement error, provide justification for the use of the method to determine reliability of the performance assessment. 	

**STANDARD 10
TEST ADMINISTRATION**

The certification examination(s) is administered in a manner that minimizes construct-irrelevant variance (measurement error).

RATIONALE

To fairly measure the candidate's performance on an examination and minimize construct irrelevant variance, standardized testing conditions must be maintained.

Test administration procedures must minimize circumstances not relevant to the knowledge, skills, and abilities being measured. Procedures should be established to maintain candidate's comfort, a quiet environment, accessibility, and proctor performance. The procedures for test administration must be consistent regarding time limits of the test, breaks during the test and equitable treatment of all candidates during the test. Every effort must be made to ensure comparable testing conditions for all candidates, and to maintain the overall integrity and security of the examination while accurately testing the knowledge, skills, and abilities of candidates. Certification examinations should be administered frequently enough to be accessible to the candidate pool, without compromising the psychometric soundness of the examination.

Failing candidates should be given the opportunity to take the test again at a future date and should be informed of the procedure for doing so. The test for repeating candidates should be equivalent to the test for first time candidates. Repeating candidates should be expected to meet the same standards as first time candidates and should not be identified as repeaters at the test administration.

CRITERIA

The certifying organization has policies and procedures that assure that certification examination(s) are administered in a fair, non-discriminating, and standardized manner.

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
10.1 Submit a copy of : <ul style="list-style-type: none"> a. the proctor training manual (including the chief proctor and all others); b. a policy regarding the maintenance of standardized testing conditions; and c. a policy regarding handling testing irregularities. 	
10.2 Provide documentation showing the frequency of administration of each exam.	
10.3 Provide documentation showing the frequency of administration of each exam form along with guidelines governing the frequency of item reuse/readministration on multiple active forms of an exam.	

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
10.4 Submit the policy on retaking the exam after failure of the exam.	
10.5 Provide evidence that exam forms and exam items administered to candidates repeating the test are not overexposed and thus not valid for the intended purpose (e.g. repeating candidates given equivalent but different forms, sufficient time elapses between administrations, cite security measures taken)	
10.6 If a performance assessment is administered, provide documentation of standards for administration and evaluation and the mechanism for insuring compliance with these standards. Such mechanisms may include announced and unannounced site visits, routine use of videotaping and/or digital recording of the examination in order to create a record for confirmation of compliance and review of a candidate’s performance.	

STANDARD 11

TEST SECURITY

Procedures are in place to maximize the security of all certification examination materials.

RATIONALE

The integrity of the certification examination program is based on the fair and impartial assessment of the candidate in the most standardized and secure manner possible.

Any breaches in the security of the test itself or the test administration process may have severe adverse effects on the certification examination program, the profession and the public. For these reasons, certification examination programs must implement secure processes relative to all aspects of testing, including general security measures, security during test development, and security during test administration.

General security measures include procedures promoting the security of test materials and assuring inventory control of all testing materials. Documentation of where and when test items and test forms are transported, who handles the materials, and how test materials are destroyed, must be maintained. This information is important to ensure the integrity of the examination materials. For items and tests stored on or administered by computers, appropriate access controls and accounting procedures must be implemented.

In the test development process, security measures must be enforced with anyone entrusted with test items or copies of tests, including test development committees, board members, certifying organization staff, and testing agency staff. Examinations should never be left unguarded during committee meetings. When items have been reviewed or modified, all copies must be returned in a secure manner, inspected for completeness and integrity, and either destroyed or stored in a secure location. Board members, item writers and reviewers, and test development committees must maintain strict confidentiality of examination materials as evidenced by signed confidentiality and intellectual property ownership statements.

During test administration, anyone with access to the examination is required to follow important security procedures. For test administrators, this involves careful monitoring of the test forms before, during, and after the examination. If for any reason a test booklet cannot be accounted for, and cannot be found, or test security is suspected to be breached, discarding the test form, and the test questions within that form, may be necessary.

Test administrators must verify that the exact number of examinations shipped has been received. The testing materials must be kept in a secure location that is accessible only by the test center supervisor until the day of the examination. Once the test forms are taken to the testing center, the booklets are never left unguarded. Under no circumstances are the seals on the test booklets to be broken by anyone other than the candidates taking the test. Prior to test administration, candidates must show valid proof of identity before they are allowed access to secure test materials. Adherence to this process ensures that attempts at impersonation will be thwarted.

Once identification is accomplished, candidates must be monitored to ensure that no unauthorized materials are taken into the testing room. The integrity of the test requires that candidates be precluded from duplicating or recording any part of the examination by copying, photographing, or any other means. Randomly assigning seating, separating candidates, and using table dividers decreases the chance of any irregular behavior.

When the examination is completed, all materials must be collected from the candidates before they leave the testing room. Test forms and answer sheets must be checked to ensure that the materials are the same as those given to the candidates at the beginning of the test. Test forms, answer sheets, and accompanying reports must be returned immediately via secure mail. Finally, procedures must be in place to guide the test site supervisor should an emergency situation arise (e.g. power failure or a physical threat requiring evacuation of candidates during test administration). Both

the safety of candidates and the security of the examination are of paramount importance and require appropriate action by the test site personnel. All reports of irregularities at test sites must be thoroughly investigated by the certifying organization.

CRITERIA

The certifying organization has policies and procedures for the protection of the security of all test materials during every aspect of test development and administration.

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
<p>11.1 Submit policies and procedures addressing:</p> <ul style="list-style-type: none"> a. Security of individual test items and test forms b. Shipping of tests, testing materials (e.g. exhibits, candidate rosters) and answer sheets to and from content experts, vendors and administration sites c. Proctor hiring, training and monitoring (e.g. non-disclosure agreements, unannounced visits, evaluation of test scores by test sites) d. Admission and seating of candidates e. Measures to minimize irregular behavior and irregular incidents f. Handling of incidents of suspected irregular behavior or incidents g. Security measures employed by computer testing center vendors and staff, where applicable 	
<p>11.2 Submit sample security/confidentiality and intellectual property ownership agreements signed by item writers, test developers, proctors, test vendor representatives, and board members.</p>	
<p>11.3 If practice examinations are offered, submit the documentation that establishes that any practice examination does not compromise the security of the certification examination.</p>	

STANDARD 12

PASSING SCORES

Passing scores for the certification examination(s) are set in a manner that is fair to all candidates, using criterion referenced methods and equating and scaling procedures that are psychometrically sound.

RATIONALE

Establishing the passing score on a certification examination is based on the assumption that it is possible to reasonably estimate a point at which the tasks (competencies), knowledge and skills demonstrated by the examination are correlated with the ability to practice at the level stated by the certifying organization (e.g. at the beginning proficient level). This act of "standard setting" is a direct reflection of the philosophy of the certifying organization. The process used to identify the passing score should coincide with the basic approach taken to construct and evaluate the examination (e.g. classical measurement or item response theory). The format of test delivery (e.g. paper and pencil as opposed to computer based testing) may have a significant influence on the method used to establish the passing score.

Following the construction of a quality examination (through careful item development based on a blueprint driven by the RDS/job analysis), establishing the passing score on any examination includes asking experts in the field to make judgments. Experts should be representative of the breadth of the specialty and demographics of the target population of candidates, and should be supported in making the judgments by psychometric consultation. The panel of experts selected to perform the standard-setting study should be large enough to be representative of the stakeholder groups comprising the profession and to generate reliable and accurate passing estimates.

Normative standard setting that compares candidates' performance to determine the passing score is not **permitted**. Furthermore, setting a passing score based primarily on the percentage of candidates who pass is also not permitted. Typically, certifying organizations use criterion-referenced standard setting methods that fall into two broad categories: those based on the evaluation of test content and those based on judgments of expected or observed candidates. Some examples include the Angoff method, Jaeger method, Direct Standard Setting Method, Nedelsky Method and the contrasting groups method. It may be necessary to make adjustments to some aspect of the standard setting process after the procedures have been completed. However, this should be done in a well-reasoned, methodical, and psychometrically sound fashion. Certifying organizations should also periodically validate the outcomes of standard setting for their examination.

Certifying organizations should be able to demonstrate that there is some rational connection between the passing point and the purpose of the examination. Procedures used in the standard setting process should be fully and accurately documented.

When different forms of a test are used, it is likely that the difficulty level of these forms will vary. Equating is a statistical procedure that enables certifying organizations to detect and correct for changes in test difficulty, differences in candidate ability or both. Classical measurement theory indicates equating is conducted by maintaining a subset of test items, referred to as equating items, which will appear on all forms of the test for which scores are to be comparable. Equating items should be representative of the test blueprint and statistical properties of the entire test. As a result, the relative difficulty levels of various test forms can also be determined. If the difficulty level varies, the passing score or individual scores must be adjusted appropriately. Using IRT methodologies, the goal of the equating process is to place all parameter estimates from different groups of candidates on a common scale. Using the common scale, the same passing score can be applied to different groups of candidates. Methods may also be available for pre-equating examination scores.

Certifying organizations should establish equating procedures with the highest practical level of precision when scores on different test forms or examinations given over time are intended to be comparable. Assuring equitable difficulty levels is especially critical when a certifying organization is considering a change in the examination format.

Scaling is the process of associating numbers with the performance of candidates on an examination. When properly used in combination with sound equating procedures, scaling produces scores on different forms of an examination that can be placed on the same score scale. Score reports and other test descriptions should provide a clear explanation of the meaning and intended interpretation of score scales, as well as any limitations.

CRITERIA

The certifying organization demonstrates that fair and psychometrically sound methods are used to establish passing scores. The certifying organization has established equating and scaling procedures with the highest practical level of precision when scores on different test forms are intended to be comparable. When more than one testing methodology is implemented for a given examination (e.g. paper and pencil and computer based testing), the certifying organization has data supporting the equivalence of the different methods. A new passing score study is conducted following each job analysis/ RDS/, when there are changes in examination characteristics such as length (number of items) and timing (duration) and when there are changes to program eligibility requirements.

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
12.1 Describe the criterion-referenced standard setting method(s) used to set the passing score (e.g. meeting minutes, reports).	
12.2 Identify the individuals responsible for establishing the passing score, including evidence of their content expertise, demographics, position, employer and credentials, and geographic representation, years of experience, and other characteristics representative of the test candidate population.	
12.3 Describe the process for selecting individuals participating in setting the passing score and the procedure used to train them to apply the passing score methods/procedures.	
12.4 When a new examination form is developed provide a report of the new passing score study. If one was not conducted, provide information and data on the method of equating used.	
12.5 Provide a description of the method used by the certifying organization to adopt the passing score for test forms. Describe the role of the testing vendor and certification board in this process. Provide information on the process used to evaluate the passing scores derived from each expert's ratings (e.g., identification of outliers) and the overall passing score. Include	

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
<p>information relating to adjustments made to the raw passing score and the rationale behind these adjustments. Provide information on classification accuracy (e.g., decision consistency) resulting from the application of the approved passing score to test results.</p>	
<p>12.6 For those certifying organizations administering performance based assessment methods in which skills are assessed by observers, provide a copy of the policy and procedure that describes the method for determining an individual has failed the test and how the minimal skill level thresholds were established.</p>	

**STANDARD 13
RECERTIFICATION AND CONTINUING COMPETENCE**

The certifying organization has a recertification program in place that requires certificants to maintain current knowledge and to provide documentation showing how competence in the specialty is maintained and measured, or both, over time.

RATIONALE

Recertification is an important component of validating and maintaining continuing competence. Competence includes both cognition and behaviors. Continuing competence can be defined as the ongoing ability to integrate and apply the knowledge, skills, judgment and values to practice safely, effectively, and ethically in a designated role.

Licensure is another component of this process. The primary role of licensing bodies is protection of the public health, welfare, and safety. Licensure assures a broad range of general knowledge and validates general nursing education. Specialty certification seeks to validate a minimal standard of knowledge at a higher level, but in a narrower domain. In both licensing and certification, the cognitive domain is the most readily and accurately measured.

The philosophy of ABSNC is that organizations that offer certification need to periodically reassess the certification and recertification process and continue to improve upon methods of evaluating certificants’ competence.

Certification and recertification should be time limited and no longer than five years. Recertification seeks to assure the public that the certificant has maintained a level of knowledge and continuing competence in the specialty. There are many factors that may be assessed as part of an ongoing recertification process. Licensure, continuing education, and performance assessment are some examples. The recertification process should be comprehensive and assess the same areas as initial certification, such as clinical experience, professional status, clinical performance, and professional integrity. Recertification models, including a multimodal approach should encourage individuals to continue those activities essential to the maintenance of knowledge and continuing competence required for their level of practice and certification in their specialty. Recertification programs must be well defined and clearly communicated to their stakeholders.

CRITERIA

The certifying organization has a recertification program in place that requires certificants to demonstrate those activities that support the maintenance, measurement or enhancement of knowledge and continuing competence in the nursing specialty.

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
13.1 Submit the catalog, application or other materials that describe the recertification program, eligibility requirements and rationale for the program requirements.	
13.2 Provide documentation showing how the recertification program requirements contribute to maintaining current knowledge and competence in the specialty (e.g. job analysis/ RDS/, accredited CE providers,	

<p>credible providers of continuing education in nursing such as hospitals or other healthcare organizations, research).</p>	
<p>13.3 Describe the rationale for recertification requirements.</p>	
<p>13.4 Describe audit procedures used to ensure authenticity and accuracy of information provided by certificants seeking to maintain certification.</p>	

**STANDARD 14
COMMUNICATIONS**

The certifying organization provides information that clearly describes the certification and recertification process to candidates, certificants, and other stakeholders.

RATIONALE

Public disclosure of policies and procedures regarding the certification and recertification process helps the certifying organization earn the respect, confidence, and trust of the public and the nursing profession. Failure to inform candidates and other stakeholders of the certification process may reduce the certifying organization's credibility, lead to unfair practices, and adversely affect individuals. Procedures for reporting test results should permit sharing of meaningful information while minimizing the potential for misuse of information and compromising candidate confidentiality.

CRITERIA

The certifying organization fully informs candidates and other stakeholders about the application, testing and test results reporting process, promptly reports test results, informs candidates of their due process rights, discloses information on certification, recertification and other activities, and provides responsive customer service.

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
14.1 Provide a copy of published material that informs candidates of the procedures used in test development, administration, scoring, reporting of results, and maintenance of records.	
14.2 Provide a copy of the document(s) through which the test blueprints and sample test items are distributed to all candidates, certificants, and other stakeholders.	
14.3 Submit policies and procedures regarding the reporting of test results to all candidates, certificants, and other stakeholders.	
14.4 Provide evidence that feedback is provided to all failing candidates on their area(s) of performance on the test (e.g. score report for failing candidates).	
14.5 Provide documentation of the process for annual reporting of certification activities including number of candidates, number passed, number failed, and number recertified (e.g. organization newsletter, website, press releases)	
14.6 Submit the policy and procedure that describes the process through which stakeholders such as employers and the public can verify certification status.	

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
14.7 Submit the policies and procedures, or describe how a candidate/certificant's file is updated (e.g. what data is updated, when is the file updated, etc.)	
14.8 If certifying APRNs, describe the process for reporting certification testing results to schools of nursing and licensing boards.	

**STANDARD 15
CONFIDENTIALITY**

The certifying organization assures that confidential information about candidates and certificants is protected.

RATIONALE

Confidentiality of sensitive information should be a primary objective the certifying organization. While the sharing of aggregate information can be justified, the results should be purged of names and of precise scores to protect the rights of individual candidates. Candidates should understand prior to seeking certification what candidate information will be strictly confidential and what may become public information. Because there are times when sensitive confidential information will be shared (e.g. Board meetings, committee meetings, test development committee), the certifying organization will have mechanisms in place to protect the confidentiality of individual candidates/certificants.

Individual candidate scores may be reported to educational institutions only if a release has been signed by the candidate. Candidates must have the right to refuse to sign the release without penalty (e.g. signing a release may not be a condition of taking the examination.) In other words, individual candidate scores are not released without the candidate’s approval.

CRITERIA

The certifying organization maintains confidentiality of candidate and certificant information and clearly identifies categories of information available to the public and those that are held confidential. The certifying organization has taken measures to protect confidential information regarding all candidates and certificants.

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
15.1 Submit the policy/procedure describing how access to candidate/certificant records and confidential information is secured and limited.	
15.2 Describe how electronic and paper data files and records are maintained for candidates and certificants from initial application through recertification (e.g. secure areas, the transfer of electronic data and records to other organizations such as testing agencies or electronic testing centers, if applicable).	
15.3 Submit the policy, procedure(s) and forms addressing the following: a. release and use of candidate and certificant information; b. minimum number of candidates required to release aggregated candidate data and rationale for decision on the minimum number; c. Candidate consent forms authorizing release of individual certification test scores to schools or other third parties (e.g. eligibility to test, retest, etc.)	

15.4 Describe the process for authenticating identity (e.g. access code, password)	
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**STANDARD 16
APPEALS**

The certifying organization has an appeal process in place for candidates/certificants who have been denied access to an examination or renewal of certification or who have had certification revoked.

RATIONALE

Policies, procedures, and candidate eligibility criteria are guidelines to assure that a consistent minimum standard for certification is achieved. As such, there are instances where disagreement on interpretation or application of these criteria may occur.

A reasonable system of due process for appeals assures individuals that their concerns will be heard in a forum that is fair and objective. Appeals should be handled in a manner that is clear, concise, fair, and expeditious. The appeal process should be clearly delineated and the responsibilities of the appellant and the certifying organization should be clearly documented.

CRITERIA

The certifying organization provides evidence that an equitable and expeditious process exists for nurses seeking an amendment of a decision to deny access to initial certification, deny recertification, or to revoke active certification.

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
16.1 Submit the policies and procedures related to appeals.	
16.2 Submit documents that are provided to candidates/certificants and stakeholders regarding the appeal process.	

**STANDARD 17
MISREPRESENTATION AND NONCOMPLIANCE**

The certifying organization has a mechanism in place to respond to instances of misrepresentation and noncompliance with eligibility criteria or the certifying organization’s policies; this mechanism includes reporting cases of misrepresentation and noncompliance to appropriate authorities.

RATIONALE

Maintenance of and adherence to the certifying organization’s policies for conduct and ethics are paramount to protect the public and the integrity of the credential. Certifying organizations shall clearly articulate and publish the professional standards to which candidates/certificants are held. Alleged violations of certification rules require investigation and disciplinary action as appropriate. Common examples of violations include falsification of eligibility information, fraud, misrepresentation, or cheating on the test.

The disciplinary process is not necessarily punitive. It should be evaluative in nature and afford due process. The process of discipline should begin with an objective investigation. A preponderance of evidence that substantiates misrepresentation/noncompliance with the certifying organization’s rules is necessary to afford due process and protect the rights of candidates/certificants. The review process should be initiated when the certifying organization receives notification that a candidate/certificant is not complying with the rules of that organization. The investigative process requires sufficient time and attention to ensure that the rights of candidates/certificants are protected. The process should not, however, be unduly prolonged so as to create an undue burden for the candidate/certificant being investigated.

There are many models of discipline that certifying organizations may adopt. The certifying organization should choose a model with the assistance and review of an attorney knowledgeable about disciplinary matters to assure the protection of the rights of candidates/certificants and the certifying organization.

In addition, certifying organizations demonstrate the value of their credential(s) by undertaking the necessary efforts and expense of seeking a federally registered certification mark of these credential(s).

CRITERIA

When notified that a candidate/certificant may not meet eligibility criteria or may not be in compliance with the certifying organization’s policies, the certifying organization conducts an investigation and if applicable, takes disciplinary action in a timely manner that affords candidates and certificants their defined rights and responsibilities.

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
17.1 Submit policy and procedure for reporting instances of misrepresentation and noncompliance (e.g. non-certificants who present themselves as being certified) to the proper authorities (Boards of Nursing, law enforcement, public health agencies, and employers.)	
17.2 If initially seeking accreditation, provide data on the number of cases of misrepresentation and noncompliance investigated and the outcome of each for the past 2 years, if applicable. If seeking reaccreditation, provide data for the most recent 5 year period of accreditation.	

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
17.3 Submit all policies and procedures related to disciplinary actions, including grounds for discipline, the disciplinary procedure, and applicable sanctions, including revocation of certification.	
17.4 If initially seeking accreditation, provide data on the number of cases of disciplinary actions taken for the past 2 years, if applicable. If seeking reaccreditation, provide data for the most recent 5-year period of accreditation.	
17.5 Submit documentation related to the federally registered certification mark of the certification credential(s), status of application if in the process, or explain why the credential cannot be federally registered.	

STANDARD 18
QUALITY IMPROVEMENT

The certifying organization shall have an internal audit and management review system in place including provisions for continuous corrective and preventive actions for quality improvement.

RATIONALE

A quality improvement process contributes to the long-term success and viability of a certification program and has implications for improving the certification process. Certifying organizations must address increasing demands for quality products and services, consumer satisfaction, and cost controls. The purpose of quality improvement within certifying organizations is to provide a structure and process in order to provide high quality services to candidates and certificants.

CRITERIA

There is a defined and active system in place for quality improvement.

DOCUMENTATION – The candidate must:	Narrative (Cite Tab or Appendix for Specific Supporting Documentation)
<p>18.1 Submit the following documentation related to the certifying organization’s quality improvement system:</p> <ul style="list-style-type: none"> a. customer service standards; b. the frequency and process for review/revision of all policies and procedures; c. a description of the internal review panels used to establish quality assurance procedures, including composition of these groups (title or area of expertise), procedures used for review and frequency of review; d. how adherence to established Q&A policies and procedures is ensured; e. which describes the audit and management review system(s) in place, describe the feedback mechanisms, and give at least one example(s) of how the system has improved the process or corrected mistakes and errors; f. minutes of meetings and/or routine reporting mechanism for quality improvement activities. 	

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