

2010

Nursing Specialty Certification Organizations' Clinical Practice Requirements for Certification and Recertification

A Review of Entry Level Certification Programs

American Board of Nursing Specialties

Sponsored by the Pediatric Nursing Certification Board



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Background

Certification is defined by the American Board of Nursing Specialties (ABNS) as the formal recognition of specialized knowledge, skills, and experience demonstrated by achievement of standards identified by a nursing specialty to promote optimal health outcomes.¹ Nursing specialty certification is recognized as an accepted method to validate that nurses have the knowledge, skills and abilities that are fundamental to accomplishing their job functions. To practice as a Registered Nurse, states offer nursing licensure, which indicates a minimal professional practice standard. Certification builds on nursing licensure and denotes a high level of knowledge *and* experience in a specialty area of nursing practice, with the intent to provide expert and safe care to support protection of the public..

Nursing certification organizations establish eligibility requirements for their certification exams based on standards of practice within the specialty, validation of the critical tasks and responsibilities through benchmarking research among nurse specialists, and professional judgment of subject matter experts serving on certification boards and committees. Qualifications for eligibility to sit for specialty certification have frequently included recognition of the important role that direct clinical practice plays in exam readiness. However, for those programs that certify nurses employed in direct care (not including advanced practice) there is no established standard for clinical practice eligibility for certification and/or recertification within the field of nursing specialty certification. ABNS, with generous support from the Pediatric Nursing Certification Board (PNCB), has undertaken a review of practice requirements for certification and recertification eligibility among ABNS member organizations that certify nurses in direct practice roles. Through a compilation of resources including review of the literature,

¹ <http://www.nursingcertification.org/>

Internet search, examination of specialty nursing certification and recertification requirements, inspection of State Boards of Nursing and the National Council of State Boards of Nursing (NCSBN) websites, efforts were made to determine current thinking on clinical practice requirements for nurses.

Nursing Practice

An historical overview of the nursing profession indicates that nursing practice has evolved over time with the inclusion of skills and role responsibilities shared by other health professions. Within the last 50 years, nursing has made an effort to more clearly define nursing practice by what it is not. Nursing has successfully moved away from housekeeping and clerical tasks, delegating these jobs to unlicensed personnel. Other areas of practice that were once considered part of the nurse's role, such as physical therapy, nutrition, social work, and hospital administration,, have developed into separate occupations.²

The issue of competence and continued competence is a priority within nursing regulatory bodies, professional associations and certification agencies and can be directly tied to nursing practice. Initial licensure as a Registered Nurse indicates that those nurses who meet the licensure requirements are competent to practice. The NCSBN Model Rules include a standard that supervised clinical practice shall occur to develop skills in clinical judgment, management and care of groups of clients, and delegation to and supervision of other care providers. No specific clinical practice hours are required; rather the clinical experience should be of sufficient hours to meet the standard.³ Individual State Boards of Nursing may have established minimum requirements for clinical experience hours. In a 2009 Profile of Member Boards, the NCSBN

² Jacox, A., (1997). "Determinants of Who Does What in Health Care." *Online Journal of Issues in Nursing*. Vol. 2, No. 4, Manuscript 1. Available: www.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/TableofContents/Vol21997/No4Dec97/DeterminantsofWhoDoesWhatinHealthCare.aspx

³ https://www.ncsbn.org/Model_Nursing_Practice_Act_December09_final.pdf. See chapter 9, page 56.

presents data on states that do and do not have specific clinical practice requirements for RN Diploma, Associate and Baccalaureate programs.⁴ The Profile results indicate that the majority of states have not established minimum clinical practice experience hours for basic licensure.

Individual nurses, employers and certification organizations also hold some accountability for assurance of competency. The American Nurses Association in a 2008 position statement on *Professional Role Competence* states:

The public has a right to expect registered nurses to demonstrate professional competence throughout their careers. ANA believes the registered nurse is individually responsible and accountable for maintaining professional competence. The ANA further believes that it is the nursing profession's responsibility to shape and guide any process for assuring nurse competence. Regulatory agencies define minimal standards for regulation of practice to protect the public. The employer is responsible and accountable to provide an environment conducive to competent practice. Assurance of competence is the shared responsibility of the profession, individual nurses, professional organizations, credentialing and certification entities, regulatory agencies, employers, and other key stakeholders.

To ensure nursing competence, the National Council of State Boards of Nursing (NCSBN) is exploring the development of more rigorous criteria for ongoing licensure beyond simply paying a fee and avoiding disciplinary action. "Licensure maintenance" activities would provide the public with credible evidence that nurses have current knowledge and have the ability to practice safely.⁵ Based on a 2003 study that showed work experience contributed more to competence than continuing education, mentoring or self-study⁶, the NCSBN adopted Model Nursing Administrative Rules that recommend practice hours be required as a component of continuing competency for license renewal. The NCSBN states the purpose for requiring practice hours for license renewal is to promote currency of practice for licensed nurses. The

⁴ [https://www.ncsbn.org/2009_Member_Board_Profiles\(1\).pdf](https://www.ncsbn.org/2009_Member_Board_Profiles(1).pdf). See questions 227-232, pages 89-90.

⁵ www.ncsbn.org/Continued_Comp_Paper_TestingServices.pdf

⁶ Smith, J. (2003). Research Brief, volume 6: *Evaluating the efficacy of continuing education mandates*. Chicago: NCSBN.

suggested requirement is 960 hours of nursing practice that is satisfactory to the Board in the three year period preceding relicensure. Satisfactory practice hours may include clinical practice, nursing education, research and performance of other activities as determined by the Board.⁷

In a NCSBN 2009 review of nursing continuing competence requirements by state, there were 14 states that have instituted a minimum practice option as a continuing competency activity.⁸ For example, in South Dakota the nurse must provide verification of employment in nursing for a minimum of 140 hours in any 12-month period during the previous 6 years, or total accumulation of 480 hours during the previous 6 years.⁹ Appendix 1 outlines these states' clinical practice requirements for relicensure.

Defining Clinical Practice

In this review, definitions of clinical practice for licensed nursing practice, specialty nursing certification and recertification were examined to identify the components considered as clinical practice. The findings reveal uniformity among the definitions of clinical practice. Practice is defined most commonly by these organizations as employment as a Registered Nurse in clinical, supervisory, administrative, education or research capacities.¹⁰ Many of the definitions further differentiate between direct and indirect patient care. Direct care involves “hands on” care of patients and indirect care includes those nursing roles that influence patients and nurses through management, teaching, research or consultation. Overall the definitions clearly indicate that nurses who have a direct or an indirect patient care role are considered to be

⁷ www.ncsbn.org/Model_Nursing_Act_and_Rules.pdf. See page 57 for License Renewal Practice Hours.

⁸ AK, AZ, DE, MA, NE, NH, ND, OR, SC, SD, TN, UT, VT, WV

⁹ NCSBN. (2009). Member Board Profiles. [www.ncsbn.org/2009_Member_Board_Profiles\(1\).pdf](http://www.ncsbn.org/2009_Member_Board_Profiles(1).pdf)

¹⁰ For a discussion of a membership organization's and certifying organization's views of the clinical practice requirement see: Hooper, V.D. (2007). Diversity in Practice. *Journal of PeriAnesthesia Nursing*, 22(1), 1-4. Smith, A.B. & Niebuhr, B. (2007). Letters to the Editor. *Journal of PeriAnesthesia Nursing*, 22(3), 158-159.

engaging in clinical practice.

From this review, no organizations were identified that expressly limit practice to the direct hands on care of a patient; all definitions include a variety of nursing roles that interact with patients/families at some level, or include supervision of nurses and/or students who interact directly with patients/families. The AACN Certification Corporation and ABPANC clinical practice definitions are the most rigorously focused on direct patient care. They allow nurses in a variety of roles (e.g. managers, educators, researchers) to obtain clinical practice hours only if they are interacting with patients and families or they are involved directly with nurses who are at the bedside. Definitions of clinical practice from 12 specialty certification organizations and 4 Boards of Nursing are documented in Appendix 2.

Clinical Practice for Certification and/or Recertification Eligibility

Within nursing there is an ongoing effort to define competence¹¹, however, no specific criteria currently exist that address clinical practice requirements for ensuring competence. And subsequently, no universally agreed upon clinical practice eligibility requirement for specialty certification and/or recertification exists within specialty certification. Applicable to determining a clinical practice requirement, a national benchmarking study was undertaken among licensing and certifying organizations to identify current practice on licensure and certification renewal, and to investigate assessment of competence. Participating organizations were asked if employment in the profession was required for renewal (in this survey, employment was indicative of current practice in the field). Of the respondents, 58.6% (194)

¹¹ See: Whittaker, S., Smolenski, M. and Carson, W. (June 30, 2000). "Assuring Continued Competence - Policy Questions and Approaches: How Should the Profession Respond?" *Online Journal of Issues in Nursing*. Vol 5 No. 3. Available

www.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/TableofContents/Volume52000/No3Sept00/ArticlePreviousTopic/ContinuedCompetence.aspx

www.cc-institute.org/tt07_reading.aspx

www.cc-institute.org/docs_upload/competence_lit_review.pdf

indicated that they had no employment requirement. Only 25 organizations, out of 331 responding (7.6%), indicated that full time employment was required and 39 organizations (11.8%) noted part time employment in the profession was acceptable. Of those organizations that required employment, 56.4% stated 500 hours or fewer a year were acceptable; 20.5% required 501-1,000 hours a year; 12.8% required 1,001 – 1,500 hours; and 10.3% required 1,501 hours to full time.¹²

To determine the requirements for clinical practice in nursing specialty certification programs, a review of ABNS member organizations' certification and recertification criteria was completed. For this review, 22 organizations' certification programs were examined.¹³ Many organizations offer a number of certification options, but only one program per organization was selected for review: a program that represents entry level practice in the specialty profession. No advanced practice programs or programs that do not certify direct clinical practitioners were reviewed (i.e. programs that certify managers, educators, nurse lawyers, etc. were not considered). Programs were categorized according to their certification and recertification requirements for clinical practice hours. Additionally, the organizations that hold ABSNC (formerly known as the ABNS Accreditation Council) accreditation were identified. These results can be found in Appendix 3.

Clinical Practice Hours Required for Certification

Eighteen nursing certification organizations (82% of the sample) require clinical practice hours for certification eligibility. There is a considerable amount of variability among the organizations in regard to the number of hours and the time periods in which hours can be

¹² Henderson, J. (2008). Benchmarking study: Renewal requirements for professional licensure and certification. Available at: www.credentialingexcellence.org/PublicationsandResources/Publications/tabid/77/Default.aspx.

¹³ Information was retrieved from the organizations' websites and may not accurately capture recent changes in eligibility requirements.

earned. To reduce the variability to enable comparison, when possible, the number of hours required for certification and recertification were divided by the number of years allowed to earn the hours to see a per year average of clinical practice hours. It is important to note that the yearly average is being used only as a comparison since the majority of the organizations do not specify how many hours must be earned per year, essentially creating considerable flexibility for nurses to accrue their clinical practice hours. Table 1 displays the initial certification clinical practice requirement in hours, the number of years allowed to accrue the eligible hours and the average per year hours.

Table 1. Comparison of Initial Certification Clinical Practice Hours among Nursing Specialty Certification Organizations that Require Hours for Certification

Organization	Practice Hours Required	Time Period for Accrual	Average Hours per Year
CCI	2400	2 years	1200 per year
NCC	2000	2 years	1000 per year
ABPANC	1800	2 years	900 per year
PNCB	1800	2 years	900 per year
AACN Cert. Corp.	1750	2 years	875 per year
ABNN	4160	5 years	832 per year
ABCGN	4000	5 years	800 per year
INCC	1600	2 years	800 per year
MSNCB	2000	3 years	667 per year
ANCC	2000	3 years	667 per year
ONCC	1000	2.5 years	400 per year
ONCB	1000	3 years	333 per year
WOCNCB	1500	5 years	300 per year
NCBDE	1000	4 years	250 per year
ASMBS	24 months of practice	4 years	Not Applicable
NAWCCB	2 years FT or 4 years PT	5 years	Not Applicable
NNCC	2 years of practice	3 years	Not Applicable
RNCB	2 years of practice OR 1 year of practice and 1 year of advanced study in nursing	5 years	Not Applicable

The time periods for accrual of clinical practice hours range from 2 to 5 years. CCI has the highest average per year requirement with 1,200 hours and NCBDE has the lowest average number of clinical practice hours required at 250 per year. We were not able to determine average hours per year for the ASMBS, NAWCCB, NNCC and RNCB certification programs because their clinical practice requirements are documented in months or years and not hours.

Clinical Practice Hours Optional for Certification

There are four organizations (18% of the sample) that do not require clinical practice hours for initial certification, however, they do recommend clinical experience: ABOHN, BCEN, NBCHPN, and NBCSN. Table 2 outlines the recommendations for clinical practice hours for these organizations.

Table 2. Comparison of Initial Certification Clinical Practice Hours among Nursing Specialty Certification Organizations where Hours are Not Required for Certification

Organization	Practice Hours	Time Period for Accrual	Average Hours per Year
ABOHN	3,000 Optional	5 years	600 per year
BCEN	2 years of practice is recommended	2 years	Not Applicable
NBCHPN	2 years of practice is recommended	2 years	Not Applicable
NBCSN	Current employment in the field but no specific clinical hours requirement	Not Applicable	Not Applicable

Clinical Practice Hours Required for Recertification

Thirteen of the 22 organizations (59% of the sample) require clinical practice hours for recertification. ABOHN is the only organization that does not require clinical practice hours for initial certification but does have a clinical practice requirement for recertification. Four organizations, ABCGN, ABNN, RNCB and ONCC have the same practice requirement for recertification as for initial certification. All others have fewer hours required for recertification when compared to certification. The time period for renewal ranges from 2.5 years to 5 years. ABNN requires the highest per year average of clinical practice hours for recertification: 832 per year. While CCI has the highest average required number of clinical practice hours for certification, they require the least average number of clinical practice hours for recertification: 100 per year. Table 3 outlines the clinical practice requirements for recertification.

Table 3. Comparison of Recertification Clinical Practice Hours among Nursing Specialty Certification Organizations that Require Hours for Recertification

Organization	Practice Hours Required	Time Period for Accrual	Average Hours per Year
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ABNN	4160	5 years	832 per year
ABCGN	4000	5 years	800 per year
ABOHN	3000	5 years	600 per year
ABPANC	1200	3 years	400 per year
ONCC	1000	2.5 years	400 per year
INCC	1000	3 years	333 per year
NNCC	1000	3 years	333 per year
MSNCB	1000	5 years	200 per year
NCBDE	1000	5 years	200 per year
ONCB	1000	5 years	200 per year
AACN Cert. Corp.	432	3 years	144 per year
CCI	500	5 years	100 per year
RNCB	2 years of rehabilitation nursing experience	5 years	Not Applicable

There are nine organizations (41% of the sample) that do not have a clinical practice requirement for recertification. Table 4 lists these organizations. ANCC¹⁴ and PNCB offer clinical practice hours as an option for recertification, in addition to professional development, continuing education and/or certification exam retest. PNCB is the only organization, among all the nursing specialty certification organizations examined, that requires an annual credential renewal. Three organizations (BCEN, NBCHPN, and NBCSN) have no clinical practice hours requirement for certification or recertification.

Table 4. Nursing Specialty Certification Organizations that Do Not Require Clinical Practice Hours for Recertification

Organization	Practice Hours	Time Period for Accrual	Average Hours per Year
PNCB	200 Optional	1 year	200 per year
ANCC	1000 Optional	5 years	200 per year
ASMBS			None Required
BCEN			None Required
NAWCCB			None Required
NBCHPN			None Required
NBCSN			Current employment in school health but no specific clinic hour requirement
NCC			None Required
WOCNCB			None Required

¹⁴ This may not represent every ANCC certification program. The Cardiac Vascular Nursing specialty certification program was examined for this review.

Table 5 compares the certification and recertification shared criteria for clinical practice hours (required and optional).

Table 5. Comparison of Certification and Recertification Criteria for Required and Optional Clinical Practice Hours among Nursing Specialty Certification Organizations

Comparison Data	Certification (N=19)	Recertification (N=15)
Clinical practice hours - Range (lowest to highest)	1,000 – 4,160 hours	200 – 4,160 hours
Clinical practice hours - Mean (average)	2,000 hours	1,499 hours
Clinical practice hours - Mode (most frequent)	1,000, 2,000 hours	1,000 hours
Time period for accrual of hours - Range (lowest to highest)	2 – 5 years	1 – 5 years
Time period for accrual of hours - Mean (average)	3 years	4 years
Time period for accrual of hours - Mode (most frequent)	2 years	5 years
Average hours per year - Range (lowest to highest)	250 – 1,200 hours	100 – 832 hours
Average hours per year - Mean (average)	709 hours	426 hours
Average hours per year - Mode (most frequent)	900, 800, 667 hours	200 hours

Summary of Findings

The findings from this review indicate that clinical practice is acknowledged as a necessary indicator of continuing competency among Registered Nurses. As a result of this understanding, a trend is growing among RN licensing boards and certifying organizations that requires nurses to accrue clinical practice hours as a component of relicensure, certification and/or recertification. Clinical practice is commonly defined as direct “hands on” care of patients, and indirect care provided by managers, educators, researchers or consultants that influences and/or impacts patients, families or nurses.

There is descriptive evidence that clinical practice hours are required by a majority of nursing specialty certification organizations for certification (82% of organizations reviewed) and recertification (59% of organizations reviewed). Clinical practice hours for certification are optional for one organization (4%), and two organizations (9%) have clinical practice as an option for recertification. Three organizations (13%) have no certification requirement for clinical practice hours, and seven organizations (32%) have no practice requirement for recertification. While most organizations examined in this study consider clinical practice hours

in their eligibility criteria, there are currently no established standards for the number of hours required for certification or recertification, or the time period in which the hours can be accrued. Nevertheless, there are noted commonalities that can serve as a basis for developing criteria for clinical practice hours.

Appendix 1. States with a Clinical Practice Minimum Requirement for Renewal of RN License

State	Minimum Practice Requirement
Alaska	Two of the following three are required for license renewal: 30 contact hours, OR 30 hours professional nursing activities, OR 320 hours nursing employment .
Arizona	The Board requires licensees to practice in some manner for at least 960 hours every 5 years, either as an employee or volunteer, to renew or obtain licensure. This equates to 24 weeks of full-time practice every 5 years.
Delaware	1,000 hours in the past five years <i>or</i> 400 hours in the past two years
Maryland	1,000 hours in 5 years
Nebraska	500 hours in 5 years
New Hampshire	400 hours active in practice in 4 years
North Dakota	400 hours in 4 years
Oregon	960 hours in 5 years
South Carolina	Demonstration of competency for renewal of an active RN license biennially requires documented evidence of at least one of the following requirements during the licensure period: 1. Completion of thirty contact hours from a continuing education provider recognized by the board; 2. Maintenance of certification or re-certification by a national certifying body recognized by the board; 3. Completion of an academic program of study in nursing or a related field recognized by the board; or 4. Verification of competency and the number of hours practiced as evidenced by employer certification on a form approved by the Board
South Dakota	480 hours in 6 years
Tennessee	Mandatory continuing competency is required in Tennessee. In order to maintain continued competence, the board requires the nurse to have practiced in nursing in the last five (5) years and additionally, the Board sets out standards of competence and requirements to maintain competence.
Utah	Renewal of an RN license requires one of the following every 2 years: 30 contact hours, OR 200 practice hours and 15 contact hours, OR 400 practice hours.
Vermont	400 hours in 2 years OR 960 hours in 5 years
West Virginia	200 hours in 2 years

Sources: National Council of State Boards of Nursing, Member Board Profiles; State Boards of Nursing Websites

Appendix 2. Definitions of Clinical Practice from a Sample of Specialty Certification Organizations and Boards of Nursing

Organization	Clinical Practice Definition
AACN CertCorp	Direct bedside care of acutely and/or critically ill patients. Nurses serving as manager, educator (in-service or academic), APRN or preceptor may apply their hours spent supervising nursing students or nurses at the bedside. Nurses in these roles must be actively involved in caring for patients at the bedside.
ABCGN	Employed in clinical, supervisory, administrative, teaching/education or research capacities in an institutional or private practice setting. Full time industry nurses, whose focus is at least 40% clinical practice, education or research, are eligible.
ABNN	<u>Direct</u> neuroscience nursing practice is defined as involvement in the nursing process in a clinical setting where the nursing actions and judgments are focused on a particular individual, family or group of individuals where there is continuing professional responsibility and accountability for the outcomes of these actions. <u>Indirect</u> neuroscience nursing practice is defined as involvement that includes time spent in clinical supervision of students and/or staff, research or consultation. Neuroscience nursing experience is not limited to clinical practice. Consultants, researchers, administrators, or educators also qualify.
ABPANC	Direct experience is defined as having bedside interaction with the patient and/or family in some capacity and participating actively in the individual patient experience. The candidate does not need to be technically employed in a direct care (staff nurse, for example) position. If the candidate's role (e.g., educator, manager, Clinical Nurse Specialist) involves bedside interaction with the patient and/or family in some capacity, those hours count toward meeting the experience requirement.
CCI	Perioperative practice as a registered nurse in an administrative, teaching, research, or general staff capacity, either full- or part-time.
INCC	Nurses involved in assessing, planning, implementing and evaluating the care and needs of patients and clients who require infusion therapy in the course of their care. Direct clinical bedside experience is not required. Nursing experience may be in the areas of nursing education, administration, research or clinical practice within the infusion specialty.
NAWCCB	Active involvement in the care of wound care patients, or in management, education or research directly related to wound care.
NCBDE	<u>Definition of Professional Practice</u> Practice means actively employed for compensation, providing a direct or indirect professional contribution to the care and self-management education of people with diabetes. <u>What is Included in this Definition</u> This definition is intended to be as inclusive as possible of positions currently held by CDEs, including program development, program management, public health/community surveillance, diabetes related research, clinical roles in diabetes industry, case management, professional education, consultant roles to industry or other providers, or others. <u>What is NOT Included</u> Employment in the manufacture, direct sales, or distribution of diabetes-related products or services in pharmaceutical or other diabetes-related industries, public health screenings, jobs unrelated to diabetes, and participation in diabetes camp will not meet the practice requirement, nor will preceptorship/mentor or other volunteer hours of any kind.
NNCC	Experience as a registered nurse in a clinical staff (to include advance practice), administrative, teaching, or research capacity.
ONCB	The ONCB accepts, but does not limit the practitioner to orthopaedic experience in the

	areas of administration, adult care, clinic, critical care, education, emergency room, home health care, long-term care, medical-surgical nursing, office practice, oncology, operating room, and pediatrics.
ONCC	Nursing experience may be in clinical practice, nursing administration, education, research or consultation.
PNCB	Pediatric nursing experience includes direct patient care, teaching, administration, clinical research, or consultation in pediatric nursing.
Arizona	<p>“Practice” is interpreted liberally. Any job or position that requires or recommends an RN or LPN license would meet the criteria as will any activity performed as an employee or volunteer that is within the legal scope of nursing practice. In addition to bedside nursing, such activities as teaching nursing, supervising care, consulting, clinical experience in a nursing program, serving as a volunteer with a nursing organization or volunteering in health screenings will also qualify as practice. In most instances, caring for family members would not qualify.</p> <p>www.azbn.gov/Documents/faqs/FAQ - Practice Requirement. PDF</p>
Kentucky	<p>“Direct patient care” can be defined by the obvious components of “hands on” care but would include other activities related to patient care such as obtaining or giving report, charting, communicating with physicians, etc. Nurses can be involved in direct patient care without ever touching the patient. The Board has examined the concept of direct patient care and has expanded the interpretation of “any component of direct patient care” to include nursing practice experiences that influence and/or impact direct patient care. An example would be a nurse that works in a supervisory capacity.</p> <p>http://kbn.ky.gov/NR/rdonlyres/26911C33-4636-44B7-838A-FEC6A842C30F/0/handout_internship.pdf</p>
Louisiana	Nursing Practice — the performance, with or without compensation, by an individual licensed by the board as a registered nurse, of functions requiring specialized knowledge and skill derived from the biological, physical, and behavioral sciences, and which includes, but is not limited to, direct patient care, supervision, teaching, administration, and other positions which require use of nursing knowledge, judgment, and skill. www.lsb.state.la.us/documents/rules/fullrules.pdf
Nebraska	<p>For purposes of licensure (meeting the 500 hour practice requirement in past 5 years) by endorsement, renewal and reinstatement, the practice of nursing means those activities requiring judgment and skill based upon a systematized body of nursing knowledge. Nursing care provided for immediate family members does not qualify as nursing practice. Examples of nursing practice include:</p> <ul style="list-style-type: none"> • Providing "hands on" care; • Teaching consumers self-care and adaptation to disease; • Teaching consumers prevention of illness and injury; • Providing comfort and support to dying patients and their families; • Coordinating care and assisting patients and their families to identify and obtain necessary resources such as home care services, medical equipment, nursing home placement, etc.; • Counseling patients and families; • Supervising unlicensed persons whom assist nurses to provide care; • Administering care from simple first aid to complex technical services; • Administering medications and treatments as prescribed by other health care providers; • Conducting nursing research; • Teaching the practice of nursing; • Providing health care advice via electronic communication; • Consulting. <p>http://www.hhs.state.ne.us/crl/nursing/rn-lpn/practice.htm</p>

Sources: Certification Organization and State Boards of Nursing Websites

**Appendix 3. Nursing Specialty Certification Organizations’
Clinical Practice Requirements for Certification and Recertification
Entry Level, Clinical Practice Programs**

Clinical Practice Eligibility for Certification and Recertification - REQUIRED				
Organization	Credential	Certification Hours	Recertification Hours	Notes
AACN Certification Corporation	CCRN	1,750 practice hours are required in direct bedside care of acutely and/or critically ill patients during the previous 2 years, with 875 of those hours accrued in the most recent year preceding application. Eligible hours are those spent caring for the patient population (adult, pediatric or neonatal) of the exam being applied for. Nurses serving as manager, educator (in-service or academic), APRN or preceptor may apply their hours spent supervising nursing students or nurses at the bedside. Nurses in these roles must be actively involved in caring for patients at the bedside.	Must complete 432 hours of direct bedside care of acutely and/or critically ill patients within the 3 year certification period, with 144 of those hours in the 12 month period prior to the scheduled renewal date. Eligible hours are those spent caring for the patient population (adult, pediatric, neonatal) in which certification is held.	To verify clinical practice eligibility, applicants must provide the name and address of a professional associate. Hours of eligibility may be verified during random audit. Candidates must also sign an honor statement documenting their clinical practice hours.
ABCGN*	CGRN	Candidates must be employed in clinical, supervisory, administrative, teaching/education or research capacities in an institutional or private practice setting for a minimum of 2 years full time or the part-time equivalent of 4,000 hours in the last 5 years in GI/endoscopy. Full time industry nurses, whose focus is at least 40% clinical practice, education or research, are eligible. Those whose focus is sales are not.	Candidates must be employed in clinical, supervisory, administrative, teaching/education or research capacities in an institutional or private practice setting for a minimum of 2 years full time or the part-time equivalent of 4,000 hours in the last 5 years in GI/endoscopy. Full time industry nurses, whose focus is at least 40% clinical practice, education or research, are eligible. Those whose focus is sales are not.	
ABNN	CNRN	The candidate must have at least 2 years' full-time (or	A recertifying CNRN must meet the following	

* **Bolded organizations are ABSNC accredited**

		<p>4,160 hours) experience in either direct or indirect neuroscience nursing practice the last 5 years.</p> <p>Direct neuroscience nursing practice is defined as involvement in the nursing process in a clinical setting where the nursing actions and judgments are focused on a particular individual, family or group of individuals where there is continuing professional responsibility and accountability for the outcomes of these actions.</p> <p>Indirect neuroscience nursing practice is defined as involvement that includes time spent in clinical supervision of students and/or staff, research or consultation.</p> <p>Neuroscience nursing experience is not limited to clinical practice. Consultants, researchers, administrators, or educators also qualify to sit for the exam, provided they meet the above requirements.</p>	<p>requirements in neuroscience nursing practice* hours over the last five years, depending on which recertification option is chosen.</p> <p>Option 1—Recertification by Exam: 4,160 practice hours (the equivalent of 2 years' full-time work)</p> <p>Option 2—Recertification by CE (full-time): 4,160 practice hours (the equivalent of 2 years' full-time work)</p> <p>Option 3—Recertification by CE (part-time): 2,500 practice hours (the equivalent of 2 years' part-time work)</p> <p>*Neuroscience nursing practice includes clinical practice, consultation, research, administration, or education in the neuroscience field.</p>	
ABPANC	CPAN	<p>Minimum of 1,800 hours of direct perianesthesia clinical experience as a Registered Nurse during the two (2) years prior to application.</p> <p>Direct experience is defined as having bedside interaction with the patient and/or family in some capacity and participating actively in the individual patient experience. The candidate does not need to be technically employed in a direct care (staff nurse, for example) position. If the candidate's role (e.g., educator, manager, Clinical Nurse Specialist) involves</p>	<p>A minimum of 1,200 hours of perianesthesia nursing practice during three year period of certification.</p> <p>This requirement of direct, hands-on care of patients does not apply to those seeking recertification if working as a manager, educator or researcher in the perianesthesia environment.</p>	<p>ASPAN changed the eligibility to require direct hands on care in 2007.</p>

		bedside interaction with the patient and/or family in some capacity, those hours count toward meeting the experience requirement.		
CCI	CNOR	<p>Must have completed a minimum of two years and 2,400 hours of perioperative practice as a registered nurse in an administrative, teaching, research, or general staff capacity, either full- or part-time.</p> <p>Must be currently employed in surgical nursing, either full- or part-time, at the time of application.</p>	Starting in 2010, CNOR applicants for recertification must be currently certified as a CNOR, You must have been employed as a part-time or full-time registered nurse at some time within the two years immediately prior to application. This employment must be in surgical nursing and can be in an administrative, teaching, research, or general staff capacity. Applicants must have worked a minimum of 500 hours in perioperative nursing within the 5 year recertification cycle.	CCI lists positions that are and are not eligible for CNOR certification www.cc-institute.org/cert_cnor_about_elig.aspx Recertification www.cc-institute.org/cert_cnrc_about_elig.aspx
INCC	CRNI	<p>The minimum requirement for clinical practice is 1,600 hours within the two years prior to the date of application. Candidates should be involved in assessing, planning, implementing and evaluating the care and needs of patients and clients who require infusion therapy in the course of their care.</p> <p>1,600 hours of direct clinical bedside care is not a prerequisite; registered nurses functioning as educators, administrators or researchers in the infusion nursing practice are eligible.</p>	A minimum of 1,000 hours of experience in infusion therapy, as a RN within the past three years. 1,000 hours of direct clinical bedside experience is not required. Nursing experience may be in the areas of nursing education, administration, research or clinical practice within the infusion specialty. A Clinical Practice Documentation form is included within the recertification application forms.	Certification candidates must sign a clinical practice documentation and affirmation form.
MSNCB	CMSRN	Have accrued a minimum of 2,000 hours within the past three (3) years of practice in an adult medical-surgical setting.	Have accrued a minimum of 1,000 hours of practice over the last five (5) years in an adult medical-surgical setting. RN students in a nursing baccalaureate, master's, or doctoral degree program can waive the employment eligibility requirement by submitting documentation	

			signed by a school official, verifying full-time status and matriculation. Academic courses must be biopsychosocial content and must be offered by an accredited educational institution.	
NCBDE		<p>Minimum of two (2) years to the day of professional practice experience in the discipline under which the individual is applying for certification (examples: if an individual applies for certification as a registered nurse, 2 years experience working as a registered nurse is required; if an individual applies as a registered dietitian, 2 years experience working as a registered dietitian is required).</p> <p><u>AND</u> Minimum of 1,000 hours of DSME experience with a minimum of 40% of those hours (400 hours) accrued in the most recent year preceding application.</p> <p>In meeting the hourly requirement, professional practice experience is defined as employment for compensation as a diabetes educator in the United States or its territories within the past four (4) years. Employment for compensation means to hold a job in which one is actively engaged in DSME and for which paid income is comparable to other diabetes educators in the same area or region of the country.</p>	<p>The NCBDE Board of Directors has approved a practice requirement for renewal of certification. Beginning with CDEs whose credentials will expire 12/31/2010, individuals will need to document a minimum of 1,000 hours of professional practice experience during the five-year certification cycle, in addition to either taking the Certification Examination or renewing by continuing education. The professional practice requirement for renewal of certification, however, is <u>not</u> the same as that required for initial certification. NCBDE recognizes that diabetes education is an evolving specialty and that experienced CDEs often assume roles other than the practice of diabetes self-management education required for initial certification.</p> <p><u>Definition of Professional Practice</u> For purposes of recertification, practice means actively employed for compensation, providing a direct or indirect professional contribution to the care and self-management education of people with diabetes.</p> <p><u>What is Included in this Definition</u> This definition is intended to be as inclusive as possible of positions currently held by CDEs,</p>	

			<p>including program development, program management, public health/community surveillance, diabetes related research, clinical roles in diabetes industry, case management, professional education, consultant roles to industry or other providers, or others.</p> <p><u>What is NOT Included</u> Employment in the manufacture, direct sales, or distribution of diabetes-related products or services in pharmaceutical or other diabetes-related industries, public health screenings, jobs unrelated to diabetes, and participation in diabetes camp will not meet the practice requirement, nor will preceptorship/mentor or other volunteer hours of any kind.</p> <p><u>The 1000 hours of professional practice experience requirement must:</u> Be completed during the five year certification cycle, between January 1 following the year of initial certification and/or recertification, and the date of application for renewal, either by examination or continuing education There is no requirement about how or when this must be accomplished, e.g., to complete 200 hours per year each of the five years, or to be practicing at the time of application.</p> <p><u>For Those Unable to Meet the Practice Requirement</u> For CDEs who wish to maintain certification status but do not or cannot meet the practice requirement, there is only one renewal option. That method requires both successful</p>	
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			<p>completion of the Certification Examination and the 75 clock hours of continuing education requirement. During the five year period that certification is valid, if a CDE has practiced less than the required 1000 hours, has taken employment unrelated to diabetes care and education, is on leave from employment or has retired, but still wishes to maintain certification as a diabetes educator, the requirements to hold a current, active unrestricted license or registration for the same discipline held at the time of initial certification and to demonstrate knowledge of current standards and practices by passing the examination and documenting relevant continuing education activities are required. No exceptions will be available.</p>	
<p>NNCC</p>	<p>CNN</p>	<p>The applicant must have a minimum of two years of nephrology nursing experience as a registered nurse in a clinical staff (to include advance practice), administrative, teaching, or research capacity, within three years prior to submitting this application.</p> <p>The applicant must have spent at least fifty percent of employment hours in nephrology nursing.</p>	<p>Applicant must have at least two year's experience in nephrology nursing as a registered nurse during the last three years.</p> <p>Fifty percent of employment hours must have been in nephrology nursing. A minimum of 1,000 hours in 3 years, 50% of which must be in nephrology nursing.</p> <p>Certificants pursuing a baccalaureate degree in nursing and wishing to waive the work requirement must verify full time student status. Documentation must be on letterhead, signed by a school official, verifying matriculation and must be submitted with the recertification application. Only certificants pursuing a</p>	

			baccalaureate degree in nursing full time will be eligible to waive the work requirement and this exception will be approved for only one recertification period.	
ONCC	OCN	<p>Minimum of one year of experience as an RN within the three years prior to application.</p> <p>Nursing experience may be in clinical practice, nursing administration, education, research or consultation.</p> <p>And minimum of 1,000 hours of adult oncology nursing practice within the 2 ½ years (30 months) prior to application.</p>	<p>Minimum of one year of experience as an RN within the three years prior to application.</p> <p>Minimum of 1,000 hours of adult oncology nursing practice within the 2 ½ years (30 months) prior to application.</p> <p>Oncology nursing practice may be in clinical practice, administration, education, research or consultation.</p>	
RNCB	CRRN	<p>Completion of at least one of the following at the time of application:</p> <p>Within the five years preceding the examination, completion of two years of practice as a registered professional nurse in rehabilitation nursing;</p> <p>OR</p> <p>Within the five years preceding the examination, completion of one year of practice as a registered professional nurse in rehabilitation nursing and one year of advanced study (beyond baccalaureate) in nursing.</p>	At least two years of rehabilitation nursing experience as an RN within the previous 5 years	

Clinical Practice Eligibility for Certification and Recertification - OPTIONAL				
Organization	Credential	Certification Hours	Recertification Hours	Notes
ABOHN	COHN-S	3,000 hours in occupational health in the past five years; OR Completion of a certificate program in occupational health nursing for academic credit; OR Completion of a graduate level of education with a concentration in occupational health.	3,000 hours of occupational health nursing practice in 5 years. Occupational health nursing experience means actively engaged in occupational health nursing for compensation. Completed graduate degrees or baccalaureate completion programs may be considered for a portion of the experience requirement.	Recertification requires practice hours but for certification it is optional.
ANCC	Cardiac Vascular Nursing	2,000 hours of clinical practice in the specialty being tested in the past three years.	A minimum of 1,000 practice hours in certification specialty practice is required and can be through an employer or as a volunteer. Practice hours must be completed within the 5 years preceding the application. ANCC also offers an option for recertification if the applicant does not have clinical practice hours. The applicant may submit professional development requirements and pass the certification test.	Initial certification requires practice hours but ANCC offers a recertification option for those who don't have the clinical practice hours.
PNCB	CPN	Documentation of 1,800 hours of pediatric clinical practice within the past 24 month period as an RN in a pediatric nursing specialty. Pediatric nursing experience includes direct patient care, teaching, administration, clinical research, or consultation in pediatric nursing.	Recertification has two options: 5 Contact Hours and 200 Clinical Practice Hours. Clinical practice hours are work or volunteer hours that involve the direct "hands-on" assessment or clinical management of pediatric patients. OR 10 contact hours or 1 academic credit	Annual renewal and once in every 7-year cycle certificants must complete a Standards Assessment Exam (SAE). Certification has required clinical practice but it is optional for recertification.

Clinical Practice Eligibility for Certification and Recertification – NOT REQUIRED				
Organization	Credential	Certification Hours	Recertification Hours	Notes
ASMBS	CBN	A minimum of 24 months of nursing care within the preceding 4 years of morbidly obese and Bariatric surgery patients predominately in the Bariatric surgery process (pre, peri, post-operative and follow up care).	Recertification can occur by retesting or through Continuing Education hours.	Clinical practice required for certification but not for recertification.
BCEN	CEN	No clinical practice requirement. Two years of practice experience in related specialty is recommended.	Recertification can occur by retesting, internet based testing to measure competency and provide an educational experience, or through Continuing Education hours.	
NAWCCB	WCC	Documentation of active involvement in the care of wound care patients, or in management, education or research directly related to wound care while actively licensed for at least two (2) years full-time/four (4) years part-time within the past five (5) years.	No clinical practice requirements for recertification.	Clinical practice required for certification but not for recertification.
NBCHPN	CHPN	NBCHPN recommends that candidates have at least two years of experience in hospice and palliative nursing practice to consider themselves eligible for certification. The NBCHPN recognizes that individuals learn at different rates and through different mechanisms, and therefore, will admit any licensed RN who considers herself/himself to be prepared to take the exam.	Recertification can occur through exam or by accumulating points through various professional development activities.	
NBCSN	NCSN	Must be currently employed in school health services or school health related services. Registered Nurses not employed directly in school health services or school health related services may be eligible to take the certification examination if they: Have previously worked in school nursing within the past three years, OR	Current employment in school health or related services. 75 hours of continuing education related to school nursing practice. Academic courses taken within the framework of a curriculum that lead to an academic degree in nursing or any academic course relevant to nursing practice. An academic course taken for credit may	

		Are employed as faculty of a university or other accredited school of nursing and are engaged in teaching school nursing related curriculum and supervising students in the school setting.	be used to meet NBCSN requirements if a grade of “C” or better or “pass” on a pass/fail system is achieved. Each individual academic credit, from an accredited institution of high learning is considered as ten (10) contact hours. Miscellaneous activities with various credits granted such as: submission of 15 items for exam; Precepting Student Nurses; Professional Activities (Officer position on national or state school nurse organizations or health related community boards); Participation in two-day NBCSN Item Review; Presentation of Professional Education topic; Original Article Published in Professional Journal.	
NCC	Maternal Newborn Nursing	<ul style="list-style-type: none"> • 24 months specialty experience as a U.S. or Canadian RN comprised of a minimum of 2000 hours • Employment in the specialty sometime in the last 24 months • Both practice time and hours must be met. This is NOT an either/or criterion. 	No clinical practice required for recertification.	Clinical practice required for certification but not for recertification.
ONCB	ONC	Have a minimum of 1,000 hours of work experience as an RN in orthopaedic nursing practice within the past three years. The ONCB accepts, but does not limit the practitioner to orthopaedic experience in the areas of administration, adult care, clinic, critical care, education, emergency room, home health care, long-term care, medical-surgical nursing, office practice, oncology, operating room, and pediatrics.	Recertification by continuing education does not require work experience hours.	Clinical practice required for certification but not for recertification.
WOCNCB	CWOCN	Fulfill ONE of the following	No clinical practice	Clinical

		requirements: <ul style="list-style-type: none"> • Accredited Education Program Pathway • Experiential Pathway Have 1,500 clinical experience hours over the last five years within each specialty for which certification is sought. At least 375 of those hours must be completed within the year prior to certification application.	requirements for recertification.	practice required for certification but not for recertification.
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