

ABNS

American Board of Nursing Specialties

American Board of Nursing Specialties
Specialty Nursing Certification:
Nurses' Perceptions, Values and Behaviors

December 2006

Introduction

The American Board of Nursing Specialties (ABNS) was incorporated in 1991 to create uniformity in nursing certification and to increase public awareness of the value of certification. The ABNS organizational structure has two components – a Membership Assembly and an Accreditation Council. There are 28 specialty nursing certification organization regular members, 1 associate member, and 12 affiliate members of ABNS. The activities of ABNS are directed toward achieving its mission, “to promote the value of specialty nursing certification to all its stakeholders.”¹

To support its mission, ABNS has undertaken a strategic plan that focuses on promoting the value of specialty nursing certification in a variety of ways, including serving as the authoritative voice and resource for specialty nursing certification, supporting accreditation of quality nursing certification programs, and promoting research activities to advance knowledge regarding specialty nursing certification. In 2005, the organization approved a position statement on “The Value of Specialty Certification.”²

In 2003, after completing a process that identified research priorities among organizational members, the ABNS Research Committee chose to undertake a study that would validate nurses’ perceptions, values and behaviors related to certification. This national study broke new ground by surveying a sample of certified nurses, noncertified nurses and a sub-sample of nurse managers across 20 different specialty nursing certification organizations³ using

¹ American Board of Nursing Specialties at www.nursingcertification.org/vision.htm

² Available at www.nursingcertification.org/pdf/value_certification.pdf

³ Participating organizations included: American Academy of Nurse Practitioners, American Association of Nurse Life Care Planners, American Board for Occupational Health Nurses, American Board of Neuroscience Nursing, American Board of Perianesthesia Nursing Certification, Inc., American Legal Nurse Consultant Certification Board, American Nurses Credentialing Center, Board of Certification for Emergency Nursing, Certifying Board of Gastroenterology Nurses and Associates, Competency & Credentialing Institute, Infusion Nurses Certification Corporation, National Board for Certification of Hospice and Palliative Nurses, National Board for Certification of School Nurses, National Certification Board for Diabetes Education, Nephrology Nursing Certification

a web-based survey that included the 18-item PVCT - Perceived Value of Certification Tool[®]. The study also sought to address a variety of ABNS member-generated research priorities by exploring nurse managers' perceptions of the value of certification, challenges and barriers to certification, benefits and rewards to nurses who are certified, the impact of certification on lost workdays, and the impact of certification on nurse retention. From a sample of 94,768 nurses, 11,427 responses were obtained from the on-line survey for a return rate of 12.1%. Of the respondents, 8,615 (75%) identified themselves as certified nurses, and 2,812 (25%) were noncertified nurses. A total of 1,608 respondents (14%) held the position of Nurse Manager. Of the nurse manager respondents, 77.3% (N=1,243) were certified.⁴

This white paper will focus specifically on the value of specialty nursing certification, beginning with a brief overview of the literature on this topic. A snapshot of the study sample is given with specific demographic data highlighted. Nurse and nurse manager perceptions of the value of certification are shared. With an understanding that there is value to nursing specialty certification, incentives and barriers to certification will be examined. Finally, conclusions are drawn and suggestions are made for future activities that support enhancing the value of certification.

The Value of Certification

In 2001, the Competency and Credentialing Institute (formerly known as the Certification Board Perioperative Nurses) conducted a study to determine the value of certification among their constituent groups. The research resulted in the development of an 18-item PVCT - Perceived

Commission, Oncology Nursing Certification Corporation, Orthopaedic Nurses Certification Board, Pediatric Nursing Certification Board, Rehabilitation Nursing Certification Board, and Wound, Ostomy and Continence Nursing Certification Board.

⁴ American Board of Nursing Specialties (ABNS) Value of Certification Survey Executive Summary 2006. www.nursingcertification.org/pdf/executive_summary.pdf.

Value of Certification Tool[®] that has demonstrated excellent reliability and validity.⁵ The PVCT incorporates 18 certification-related value statements, utilizing a five-point Likert scale response (labeled *strongly agree*, *agree*, *disagree*, *strongly disagree*, and *no opinion*). The value statements are grouped or classified according to two factors – intrinsic and extrinsic rewards for certification.^{6,7} *Intrinsic rewards* are motivators internal to an individual and linked to personal development and self-concept values, while *extrinsic rewards* are external to an individual and are defined by others.⁵

Subsequently, a series of studies using the PVCT has been undertaken by others.⁸ These studies have sampled certified and noncertified perioperative nurses, managers, and administrators. Consistently, the studies have shown that certification is valued regardless of certification status or work role. Certification is perceived as influencing accountability, accomplishment, growth, and specialized knowledge, as well as a level of recognition among employers, peers, and consumers.^{6,7} In a 2002 survey, nurse managers expressed a preference for hiring certified nurses because certified nurses have a proven knowledge base and documented experience in a given specialty.⁹

With the decision to undertake a study that further examines the value of certification, the ABNS Value of Specialty Nursing Certification study became the first multi-organizational survey to utilize the PVCT. The ABNS study sought to measure the perceived value of

⁵ Byrne M, Valentine W, Carter S. (2004). The value of certification – A research journey. *AORN Journal*; 79:825-35.

⁶ Berlin Sechrist Associates. (2003). Value of certification survey phase IV, non-certificants, certificants and administrators, report of study findings. Competency & Credentialing Institute.

⁷ Sechrist KR, Berlin LE. (2006). Psychometric analysis of the perceived value of certification tool[®]. *Journal of Professional Nursing*, 22:248-52.

⁸ A bibliography on the Value of Certification can be found in Appendix 1.

⁹ Stromberg MF, Niebuhr B, Prevost S, Fabrey L, Muenzen P, Spence C, Towers J, Valentine W. (2005). Specialty certification more than a title. *Nursing Management*. 36(5): 36-46.

certification among certified nurses, noncertified nurses, and nurse managers in a variety of nursing specialties.

Sample Characteristics

To provide an overview of nurse sample demographics, a quick “snapshot” of a typical survey respondent is given. The respondent was female (92%); a staff nurse (32%) with a Baccalaureate degree (43%). She works in an acute care hospital (49%) and has 23 years of nursing experience; Certification is voluntary for her practice (68%).

Two demographic categories, salary and greeting used with patients/clients, reflect more specifically on the value that respondents placed on certification. The salary of nurses is normally distributed, indicating the majority of the respondents earn between \$40,000 and \$79,999 annually. Table 1 presents the salary ranges.

Table 1. Survey Respondents’ Salary Ranges by Percent

Salary Range	Percent
Under \$10,000	0.7%
\$10,000 - \$19,999	0.8%
\$20,000 - \$29,999	1.9%
\$30,000 - \$39,999	5.5%
\$40,000 - \$49,999	13.4%
\$50,000 - \$59,999	21.3%
\$60,000 - \$69,999	22.0%
\$70,000 - \$79,999	15.4%
\$80,000 - \$89,999	9.4%
\$90,000 - \$99,999	4.4%
\$100,000 or more	5.1%

Another indicator of the value placed on certification may be the frequency with which nurses introduce themselves to patients/clients using their certification credential. It is interesting to note that most nurses introduce themselves with their first names only. Over one-third (38.6%) communicate their RN status, and close to one-half (44.3%) of the nurses use their

title. However, only 4.6% of the nurses in this study indicated that they identify their certification when introducing themselves to patients and/or families. Table 2 displays this data.

Table 2. Greeting Used with Patients and/or Families

Greeting	Percent
First Name	87.8%
Last Name	31.9%
RN Status	38.6%
Title (e.g. staff nurse, nurse manager)	44.3%
Certification status	4.6%
Not applicable, I do not see patients	5.9%

Perceived Value of Certification

Certified and noncertified nurses' responses to the PVCT were compared to the total sample's responses. The PVCT response is presented as a mean value. For each statement, the ratings ranged from 1 = Strongly Agree to 4 = Strongly Disagree. Lower mean values (moving toward 1) equate to higher levels of agreement with the value statement. Higher mean values (moving toward 4) equate to lower levels of agreement with the value statement.

Certified nurses had higher level of agreement with each PVCT statement than non-certified nurses. However, both certified and non-certified nurses indicate a high level of agreement on most of the value statements on certified practice. Mean values of 1.00 – 2.00 reflect strong agreement or agreement on the value statement. Only statements with a mean value over 2.00 indicate movement away from a positive response toward a response of “disagree” on the statement.

Certified nurses indicate agreement or strong agreement with 16 of the value statements. For two statements, “Certification increases consumer confidence” and “Certification increases salary”, certified nurses have less positive perceptions. In comparison, the non-certified nurses agree or strongly agree with 12 of the value statements. For six of the value statements, non-

certified nurses have less positive perceptions of certification (a mean value over 2.00). These results indicate that respondents perceive certification to result in higher levels of intrinsic rewards than extrinsic rewards, which is supported by previous studies⁶. Table 3 displays these responses in order of agreement within the intrinsic and extrinsic value statement categories.

Table 3. Mean Values of PVCT Statements for Total Sample and Comparison of Certified Nurses and Non-Certified Nurses

PVCT Value Statements	Mean Value		
	Total Sample (N=11,427)	Certified Nurses (N=8,615)	Not Certified (N=2,812)
Intrinsic Factors			
Enhances feeling of personal accomplishment	1.26	1.21	1.42
Provides personal satisfaction	1.31	1.25	1.50
Provides professional challenge	1.40	1.35	1.55
Enhances professional credibility	1.41	1.34	1.64
Provides evidence of professional commitment	1.41	1.32	1.71
Indicates professional growth	1.41	1.35	1.63
Validates specialized knowledge	1.43	1.36	1.63
Indicates attainment of a practice standard	1.60	1.51	1.86
Enhances personal confidence in clinical abilities	1.66	1.60	1.86
Provides evidence of accountability	1.72	1.62	2.05
Indicates level of clinical competence	1.86	1.76	2.15
Enhances professional autonomy	1.90	1.82	2.13
Extrinsic Factors			
Promotes recognition from peers	1.69	1.61	1.90
Increases marketability	1.75	1.68	1.94
Promotes recognition from other health professionals	1.82	1.77	2.00
Promotes recognition from employers	1.94	1.88	2.12
Increases consumer confidence	2.16	2.11	2.33
Increases salary	2.67	2.62	2.83

Responses of nurse managers and non-managers were also compared and shown in relation to the total sample's responses. As noted above, the PVCT response is presented as a mean value. For each statement the rating was 1 = Strongly Agree to 4 = Strongly Disagree. A lower mean value (moving toward 1) equates to higher levels of agreement with the value statement. A higher mean value (moving toward 4) equates to less agreement with the value

statement. Both managers and non-managers indicate a high level of agreement with most of the value statements on certified practice. Mean values of 1.00 – 2.00 reflect strong agreement or agreement on the value statement. Similarly, both managers and non-managers agree or strongly agree with 16 of the value statements on certification. Only two value statements: “Certification increases consumer confidence” and “Certification increases salary” did not receive mean response indicating agreement or strong agreement from nurse managers or non-managers. Table 4 displays these responses in order of agreement within the intrinsic and extrinsic value statement categories.

Table 4. Mean Values of PVCT Statements for Total Sample and Comparison of Nurse Managers and Non-Managers

PVCT Value Statements	Mean Value		
	Total Sample (N=11,427)	Nurse Managers (N=1,068)	Not Managers (N=10,359)
Intrinsic Factors			
Enhances feeling of personal accomplishment	1.26	1.19	1.27
Provides personal satisfaction	1.31	1.24	1.32
Provides professional challenge	1.40	1.32	1.43
Enhances professional credibility	1.41	1.32	1.42
Provides evidence of professional commitment	1.41	1.34	1.42
Indicates professional growth	1.41	1.32	1.43
Validates specialized knowledge	1.43	1.37	1.44
Indicates attainment of a practice standard	1.60	1.54	1.61
Enhances personal confidence in clinical abilities	1.66	1.55	1.68
Provides evidence of accountability	1.72	1.62	1.74
Enhances professional autonomy	1.86	1.78	1.91
Indicates level of clinical competence	1.90	1.78	1.87
Extrinsic Factors			
Promotes recognition from peers	1.69	1.57	1.70
Increases marketability	1.75	1.64	1.76
Promotes recognition from other health professionals	1.82	1.69	1.84
Promotes recognition from employers	1.94	1.84	1.96
Increases consumer confidence	2.16	2.05	2.18
Increases salary	2.67	2.57	2.68

When the nurse manager data set is compared to the certified nurse data set, nurse managers have higher levels of agreement with all of the 18 value statements. Of special interest, the nurse managers have the highest agreement with the extrinsic value factors of any group. Expressing high levels of agreement with the value of certification, nurse managers hold an influential role in promoting certification to the nursing staff and recognizing those who are certified.

From these data, it can be concluded that certified nurses, non-certified nurses, nurse managers, and non-managers across a variety of specialty nursing organizations perceive a high value associated with certified practice. Only one statement - "Certification increases salary" - did not receive overall agreement from the respondents.

Incentives for Certification

A special focus of the ABNS Value of Specialty Nursing Certification study was the value statement, "Certification promotes recognition from employers." While many employers have some type of recognition program for certified nurses, this extrinsic value statement was not rated as high in perceived value as many of the other value statements. To further explore employer recognition of certification, one survey question addressed the ways that employers did provide recognition. The top three methods for recognition were: 1) reimbursement for examination fees; 2) listing certification credential(s) on nametag and/or business card; and 3) reimbursement for continuing education. Interestingly, only 18.6% of study participants noted that their facilities offer an increase in salary for certification. A greater percentage (21.4%) indicated their facilities offer no incentives at all for certification.

Table 5 lists recognition methods for certification by the frequency with which each incentive was noted by respondents. Respondents were both certified and noncertified; this

response refers to incentives offered by an employer. Survey participants were asked to select as many methods for recognition as applied to their work setting.

Table 5. Incentives Offered by Employers to Recognize Certification

Incentives	Count (number of times incentive cited)
Reimbursement for examination fees	4,437
Listing of certification credential(s) on nametag and/or business card	3,951
Reimbursement for continuing education	3,671
Paid time off for attending continuing education classes	3,239
Recognition as an expert in my field by my colleagues	2,899
Reimbursement for recertification fees	2,857
No Incentive	2,448
An increase in salary (including annual bonus)	2,128
Paid time off for taking examination	1,817
Advancement on the nursing clinical/career ladder	1,797
Publication of names in institutional newsletter or other relevant literature	1,451
Plaque displayed listing certified nurses	1,154
A one-time bonus, other than salary	1,049
Retention in the position held at the time	696
Annual recognition event, i.e., breakfast, luncheon	441
Promotion to a higher level position	393

As noted in the PVCT data, certification is perceived to provide many intrinsic benefits and rewards. Respondents also indicated that certification resulted in higher levels of intrinsic rewards than extrinsic rewards. Focusing on one of the extrinsic rewards – “Recognition from Employers” – highlights the positive steps employers are taking to recognize certification

Barriers to Certification

While recognition for certification may encourage nurses to become certified and remain certified, it is equally important to explore barriers that nurses face in becoming certified and in maintaining certification. The Value of Specialty Nursing Certification study examined barriers

to certification for nurses who have never been certified and for nurses who have allowed their certification to lapse.

When asked, “What barriers have prevented you from being certified?”, study respondents who had never been certified listed cost of examination, lack of institutional reward, and lack of institutional support as the top three reasons. Only 178 of these nurses (1.5%) indicated that certification was of no interest or value to them. Table 6 lists the barriers to certification for those who had never been certified by the frequency with which a barrier was noted by the respondents. Survey participants were asked to select as many barriers as applied.

Table 6. Barriers to Certification for Nurses who had Never Been Certified

Barriers	Count (number of times incentive cited)
Cost of examination	1205
Lack of institutional reward	1184
Lack of institutional support	979
Lack of access to preparation courses or materials	636
Discomfort with test-taking process	581
It costs too much to maintain credential	554
Lack of access to examination site	452
Lack of access to or availability of continuing education	298
I did not pass the exam when I took it	187
No desire/no interest in certification	178
Not relevant to my practice	144

Nurses who were once certified, but did not maintain their certification, were asked to indicate their reasons. For many, nurses appropriately did not maintain a certification when they left specialty practice. For others, lack of rewards and recognition for certification impacted the decision not to recertify. Table 7 lists the barriers to certification for those who had been certified and let the certification lapse by the frequency a barrier was noted by the respondents. Survey participants were asked to select as many barriers as applied.

Table 7. Barriers to Certification for Nurses whose Certification Lapsed

Reasons	Count (number of times incentive cited)
No longer practice in the specialty	446
Inadequate or no compensation for certification	437
Inadequate recognition for certification	370
Fee for renewal	351
Cost of continuing education	213
Personal circumstances	198
No time for continuing education	144
No access to continuing education	77

An examination of the incentives for certification paired with the barriers to certification points out the importance of recognition and rewards in encouraging certification. Many nurses indicate a lack of extrinsic rewards as the reason for not obtaining or maintaining certification. However, ratings on the PCVT suggest that many nurses find the intrinsic rewards of certification enough for certification. What is not known is the amount or level of intrinsic and extrinsic rewards needed to solidify nurses' decisions to certify. Based on the identified barriers, it appears that an increase in the levels of employer recognition might encourage more nurses to certify. Another trend that may encourage certification is the growing interest in the Magnet designation offered by the ANCC Magnet Recognition Program[®]. The magnet program has increased interest among hospital leaders to recruit and retain certified nurses, resulting in employers reducing barriers and promoting efforts of nurses to obtain certification.

Promoting the Value of Specialty Nursing Certification

The ABNS Value of Specialty Nursing Certification Survey provided an unprecedented examination of nurses' perceptions, values, and behaviors related to nursing specialty certification. With over 11,000 nurse respondents across 20 specialty nursing certification organizations that represented 36 different certification credentials, this study clearly

documented the perceived value of certification among certified and non-certified nurses and nurse managers. Among the top perceived values, certification is perceived to enhance feelings of personal accomplishment, provide personal satisfaction and a professional challenge, enhance professional credibility, and provide evidence of professional commitment. Nurse managers' ratings also indicate a high value placed on nursing certification. Managers are in an excellent position to support nurses in obtaining and maintaining specialty certification.

Many nurses pursue certification for the important intrinsic values it brings. However, it is also incumbent on health care organizations to reduce barriers and offer recognition for certification as a worthwhile accomplishment. Employers and managers are encouraged to engage nurses in a dialogue to determine strategies to overcome identified barriers and offer appropriate incentives to certification. Nursing specialty organizations and boards of certification also play an important role in offering incentives and reducing the barriers identified in this study.

As an accepted method to validate that nurses have the knowledge, skills, and abilities fundamental to accomplishing their role functions, certification is a valued professional accomplishment. Partnering in a multi-organizational research study, nursing specialty certification organizations have taken a bold step by validating the value of certified practice among nurses and managers. In addition, insights were gained in regard to the incentives offered by recognizing certification and the barriers faced in obtaining and maintaining certification credentials. Additional research is needed to further explore ways to increase the perceived value of the extrinsic components of certification and to identify additional strategies to reduce barriers to certification.

Acknowledgements

Citation

American Board of Nursing Specialties. (2006). *Specialty Nursing Certification: Nurses' Perceptions, Values and Behaviors*.

Special thanks to the AORN Foundation for partial funding of this research.

ABNS Research Committee

Melissa Biel, MSN, DPA, RN, Research Committee Liaison

Larry Fabrey, PhD

Judy Lentz, MSN, RN, NHA

Patricia Muenzen, MA

James Penny, PhD

Tancy Stanbery, MSED

Kathryn Schroeter, PhD, RN, CNOR

Jan Towers, PhD, NP-C, CRNP, FAANP

Judy Verger, PhD, RN, CCRN, CRNP

Chief Executive Officer

Bonnie Niebuhr, MS, RN, CAE

Appendix 1. Value of Certification Bibliography

American Board of Nursing Specialties. (2006). Executive Summary – Value of Certification Study. www.nursingcertification.org/pdf/executive_summary.pdf.

Berlin Sechrist Associates. (2003). Value of certification survey phase IV, non-certificants, certificants and administrators, report of study findings. Competency & Credentialing Institute.

Byrne M, Valentine W, Carter S. (2004). The value of certification – A research journey. AORN Journal, 79:825-35.

Gaberson KB, Schroeter K, Killen AR, Valentine W. (2003). The perceived value of certification by certified perioperative nurses. Nursing Outlook, 51:272-6.

Piazza IM, Donahue M, Dykes PC, Griffin MQ, Fitzpatrick J. (2006). Differences in the perceptions of empowerment among nationally certified and noncertified nurses. Journal of Nursing Administration, 36: 277-83.

Sechrist KR, Berlin LE. (2006). Psychometric analysis of the perceived value of certification tool[©]. Journal of Professional Nursing, 22:248-52.

Sechrist KR, Valentine W, Berlin, LE. (2006). Perceived value of certification among certified, noncertified, and administrative perioperative nurses. Journal of Professional Nursing, 22: 242-47.

Stromberg MF, Niebuhr B, Prevost S, Fabrey L, Muenzen P, Spence C, Towers J, Valentine W. (2005). Specialty certification more than a title. Nursing Management, 36(5): 36-46.