ABNS 2020 NURSING SPECIALTY CERTIFICATION BOARD RESEARCH STUDY

Executive Report – September 2020

Prepared by Dorsey Communications LLC



ABNS 2020 Nursing Specialty Certification Board Research Study

About ABNS

Founded in 1991, the American Board of Nursing Specialties (ABNS) is a not-for-profit membership organization governed by an elected group of representatives. With a mission to promote the value of specialty nursing certification, ABNS is focused on improving patient outcomes and consumer protection by promoting specialty nursing certification. ABNS serves as a forum for nursing credentialing organizations to connect and dialogue about the specific issues that certified nurses and those seeking certification face. ABNS also serves as a locus for collaboration on a variety of initiatives.

ABNS members consist of specialty nursing organizations that certify registered nurses (*regular members*), as well as organizations who have an interest in the promotion of specialty certification (*affiliate members*). Regular members are eligible for office and committee assignments, with affiliate members enjoying other benefits of membership. ABNS' *public members* are appointed by the ABNS board of directors and serve as representatives of healthcare consumers to both ABNS and the Accreditation Board for Specialty Nursing Certification, Inc. (ABSNC).

At the time of the study, ABNS had 31 nursing specialty board members, which represent over 920,000 certified LPNs, RNs and APRNs. ABNS provides informal and formal professional networking opportunities among members and with multidisciplinary certification experts, holds regular meetings and educational events on a variety of credentialing topics, and offers members the opportunity to collaborate with other certifying organizations on campaigns a single organization might not have the capacity to accomplish.

Among the opportunities that ABNS affords its members is the opportunity to participate in the identification of a national research agenda leading to <u>collaborative research initiatives</u> with other member organizations. ABNS maintains an extensive bibliography of published literature on a variety of nursing certification topics; the 2019-2020 edition of the *ABNS Nursing Certification Bibliography* is available here. In 2020, ABNS identified assessing the current state of public awareness and perceptions about nursing specialty certification and defining the scope of specialty certification organizations and credentials as high-priority research areas. As a result, the inaugural ABNS Nursing Specialty Certification Board Research Study was commissioned.

Overview

In early 2020, ABNS decided to conduct research to describe the scope of nursing specialty certification with a focus on certifications offered to RNs and/or APRNs by U.S.-based certifying bodies. To ABNS's knowledge, no such research had been conducted, making this study the first of its kind. Dorsey Communications LLC was retained to partner with ABNS to identify U.S-based certification boards, develop the survey instrument, conduct the survey, compile the data, and develop reporting documents and communications assets.

Once the certification boards were selected for participation, the research design relied on an original online survey to collect the data. While it was beyond the scope of this inaugural survey to poll every certification board identified, every attempt was made to include certification boards representing the 59 nursing specialty and subspecialty areas identified as part of this research project. The survey, conducted in May/June 2020¹, was sent to a total of 56 certification boards; 44 responded, including 30 of ABNS's 31 member boards, for an overall response rate of 79% (and 97% of ABNS member boards).

¹The survey was conducted during the COVID-19 pandemic; as such, ABNS is especially grateful to every participant.

Research Purpose & Goals

The purpose of the ABNS research was to describe, for the first time, the magnitude and scope of specialty nursing certification programs available to RNs and APRNs. The goals of the project included collecting and/or compiling the following baseline information:

- a listing of nursing specialties and subspecialties,
- a listing of the U.S.-based specialty certification boards and the specialty certifications/ credentials they offer to RNs and/or APRNs,
- select descriptive information about each certification program/credential, and
- estimated size of the specialty board certified nurse workforce and subsets thereof.

While certification boards and certification programs based outside the U.S. were not included in the scope of work, data on certification programs offered by U.S.-based boards for which nurses practicing outside the U.S. are eligible was collected and reported.

The baseline data and nursing specialty certification industry-wide collaboration resulting from this inaugural survey is intended to form the basis of an annual or bi-annual survey that ABNS, as the voice of specialty certification, will conduct, publish and publicize as part of its mission to promote the value of nursing specialty certification. The data will allow ABNS, nursing specialty certification boards, and other stakeholders to (a) track the growth and evolution of specialty board certification and contribute to the understanding of specialty nursing, and (b) foster awareness, credibility and value of, and support advocacy for, specialty board certification for RNs and APRNs. It is hoped the survey will also contribute to awareness of the value, benefits and impact of specialty nursing certification, and also support communications around patient and consumer awareness of the high quality of care delivered by specialty certified RNs and APRNs across all of medicine.

The major data points intended to be determined from this study included: the number of U.S.-based nursing specialty certifying bodies, the number of specialty certification programs available to RNs and APRNs and the specialty/subspecialty focus of nurses holding those credentials, and the number of board certified RNs and APRNs.

For each specialty certification program/credential, the following research questions were prioritized:

- Name of credential and/or acronym
- How many certificants (in total and broken down by number of RN and APRN holders)
- Is certification program accredited, and if so, by which accreditation body?
- Is the certification program Magnet®-accepted?
- Are nurses who practice outside the U.S. eligible to apply?
- Nurses in which specialties most commonly hold each credential?

Because historical information is a key piece of telling the specialty nursing certification story, respondents were also asked to provide:

- Founding date of certification board
- Launch dates of each credential

In order to keep the survey brief, additional or more detailed questions on eligibility/prerequisites, the cost of certification and recertification, frequency and mode(s) of recertification, and other aspects of the certification programs were not included and may be the subject of future industry-wide research. ABNS' voluntary annual member survey does include surveying members about this more detailed information.

Survey Development & Methodology

In spring 2020, an ABNS-branded online survey was developed and designed using the SurveyMonkey platform, along with a personalized, ABNS-branded pre-survey invitation letter originating from ABNS, as well as reminder emails to be distributed through SurveyMonkey.

In the absence of a full list of nursing certification organizations, organizations offering specialty certifications to RNs and/or APRNs were identified using the following primary sources:

- List of ABNS member boards
- List of <u>ABSNC accredited programs</u>
- List of NCCA accredited programs in Nursing category
- List of ANSI accredited programs
- List of Magnet-accredited programs (dated 3/26/2020)

A combined list of U.S.-based organizations was reviewed by ABNS, with 55 boards selected to participate. (A 56th board, the result of a recent reorganization, was identified during the survey period.)

Upon discovering no official nursing specialty/subspecialty list was being maintained by the nursing industry, such a list was created using the following sources, in part thanks to resources suggested by the American Nurses Association (ANA):

- Nursing Organizations Alliance member roster (per ANA recommendation)
- State Boards of Nursing specialty lists
- American Board of Medical Specialties (ABMS) list of medical specialties and subspecialties
- Specialties reflected in nursing specialty certifying bodies and their certification program names

In early May, an ABNS-branded, pre-survey "heads-up" email was sent under the ABNS president's signature. On May 18, the survey link was first sent out to 55 certification boards via the SurveyMonkey platform, with multiple submissions received that same day. A 56th organization interested in participating was identified during the initial outreach period, and survey responses continued to come in through the public due date of June 12, and thereafter. While the survey was scheduled to fully close out on June 30, the window was extended to July 21, in part due to the coronavirus pandemic. In total, 44 board responded, including 30 of 31 ABNS member boards, resulting in a 79% response rate. This very high response rate, as well as direct comments from participants expressing the need for this research, suggest the industry welcomes and values this research.

Throughout the entire survey window, respondents with questions or technical issues received day-of-request live or email support from Dorsey Communications. During the invitation and response period, invitees sent email notes, commented during phone calls, and included comments in the final survey field expressing the need for this research and appreciation for being included.

Survey Timeline

A major strategy of the research design was to ensure multiple touch points originating from multiple sources (ABNS, Survey Monkey and Dorsey Communications) over a two-month period to create interest, ensure the survey invitation reached all invitees, and promote the highest response rate.

May 8	"Survey is coming" email from ABNS president via ABNS email address	
May 18	First distribution of ABNS-branded survey via SurveyMonkey	
May 21	Reach out to "non-opens" (from Dorsey Communication's email address with ABNS branding)	
May 29	Friendly reminder to non-responders via SurveyMonkey; personal phone calls to "non-opens"	
June 5	Reminder email to non-responders via SurveyMonkey	
June 10	3 rd /final reminder email to non-responders via SurveyMonkey	
June 12	Published Survey due date	
June 15	Individual email follow-up with non-responders from ABNS president('s BCEN email with ABNS branding)	
June 17	Phone calls to select non-responders from ABNS president and Dorsey Communications	
June 18-30	Continued follow-up, with additional responses received	
June 30	Originally scheduled survey close-out date	
July 21*	Actual Survey close-out date	

^{*}The survey instrument was left open until July 21, in part due to the pandemic, to allow for additional responders.

Survey Data Highlights & Key Findings

Historical Information + Certifying Bodies and Their Credentials

All respondents provided their board's founding date as well as the introduction date for each credential. While the complete list of organization founding dates and credential launch dates is included in the full data set, the first boards founded and the earliest credentials offered are shown below, followed by the number of certifying bodies, the number of credentials, and select eligibility data:

First certification boards:

1956	National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA)	
	(first for APRNs)	
1971	American Holistic Nurses Credentialing Corporation (AHNCC)	
	(first for RNs)	

Earliest certifications offered for APRNs:

1956	Certified Registered Nurse Anesthetist (CRNA)
1971	Certified Nurse Midwife (CNM)
1974	Pediatric Primary Care Nurse Practitioner (PPCNP-BC)

Earliest certifications offered for RNs:

1972	Certified Urological Registered Nurse (CURN)
1973	Certified Occupational Health Nurse (COHN)
1974	Gerontological Nursing Certification (RN-BC)
1974	Psychiatric-Mental Health Nursing Certification (RN-BC)

Certification Boards:

Number of boards/certifying bodies invited to participate	56
Number of boards participating	44
Overall response rate	78.57 % (44/56)
Number of ABNS member participants	30 (68.18%)
Number of non-ABNS member participants	14 (31.82%)
ABNS member participation rate	97% (30/31)

Credentials (certification programs):

Total number of credentials	148
Eligibility:	
Both RNs and APRNs	76 (51.35%)
RNs only	29 (19.59%)
APRNs only	43 (29.05%), of which 24 are for APRN
	initial licensure
Total number of credentials for which RNs are eligible	105 (70.95%)
Total number of credentials for which APRNs are eligible	119 (80.41%)
Credentials available to nurses practicing outside of U.S.	127 (85.81%)

Total Number of Specialty Certified RNs & APRNs

Respondents were also asked to provide both the total number of unique RNs and/or APRNs holding each credential as well as the numbers for only RNs and only APRNs. Because not all of the participating organizations collect and/or were able to report credential holder population by RN vs. APRN status, only the grand total number of unique RN and/or APRN certificants is being reported.

Number of Specialty Certified Nurses:

Total Number of Unique Certified RNs & APRNs by	1,013,362+ ²
organization	

²One organization reported their total number of unique certificants as being over the round number they reported. Despite that, this is the otherwise-specific total. This number does not account for nurses who hold certifications from multiple organizations.

Accreditation of Certification Programs + Magnet® Status

Survey participants were also asked to provide specific (ABSNC, NCCA or both) accreditation and Magnet status for each credential, as shown below:

Accreditation & Magnet® Status:

	<u></u>
Accredited certification programs	106 (71.62%)
Accredited by:	
ABSNC	67 (63.21%)
NCCA	53 (50%)
Both	14 (14.21%)
Magnet-accepted certification programs	84 (56.76%)
None of the above	42 (28.38%)

Specialties

As previously described, since no official list of nursing specialites was identified, a work product of this research project was the creation of a nursing specialty/subspecialty list. Using the sources described above, an expansive list of nursing specialty and subspecialty categories was compiled, and ABNS combined and/or culled those options down to 59. An "Adult" category was purposefully not included in the specialty list as it was felt that this option might dilute the ability to identify clinical/professional specialty areas.

While it was beyond the scope of this project to identify how many credentials are available and/or relevant to each of those specialty areas, to create baseline data about the specialty credentials RNs and APRNs tend to hold in various specialties, respondents were asked to identify which specialty areas characterize the majority of their certificants. Specifically, respondents were asked—for each credential they offer—to select up to 3 specialties/subspecialties from the list of 59 options that best characterize the primary practice focus of the nurses who hold that credential.

Based on all of the responses to this question, 53 out of the 59 specialty/subspecialty options were selected at least once.

Specialty/Subspecialties among top primary practice	53 (out of 59 options)
focus areas of nurses holding respondents' credentials:	

In terms of the most-selected specialties, *Critical Care* was selected the most often, with it being chosen for 27 of the 148 credentials. The top 10 most-selected specialities followed by the complete tally of specialty selections are shown below:

Top 10 selected specialties:

Critical Care – 27	Disease-Specific (e.g., MS) – 11	
Pediatrics – 17	Emergency – 11	
Neonatal Care – 13	Hospice & Palliative Care – 10	
Medical-Surgical – 12	Ambulatory Care – 9	
Wound, Ostomy & Continence – 12	Cardiac Care – 9	

All specialty/subspecialty selections:

Critical Care – 27	Perianesthesia Care – 5	Legal Consulting – 2
Pediatrics – 17	Perioperative Care – 5	Managed Care – 2
Neonatal Care – 13	Women's Health/Gender-Related – 5	Midwifery – 2
Medical-Surgical – 12	Correctional Care – 4	Urology – 2
Wound, Ostomy & Continence – 12	Neurology/Neuroscience – 4	Anesthesiology – 1
Disease-Specific (e.g., MS) – 11	Occupational Health – 4	Diabetes – 1
Emergency – 11	Orthopaedics – 4	Gastroenterology – 1
Hospice & Palliative Care – 10	Rehabilitation – 4	Healthcare Quality – 1
Ambulatory Care – 9	School Nursing – 4	Informatics – 1
Cardiac Care – 9	Developmental Disabilities – 3	Pain Management – 1
Case Management – 8	Home Health – 3	Public Health/Infection
Hematology/Oncology – 8	Infectious Disease – 3	Control/Epidemiology – 1
Psychiatric-Mental Health/Behavioral	Nephrology – 3	Radiology – 1
Health – 8	Professional Development/Clinical	Transplant – 1
Leadership – 7	Education – 3	Bariatric Care – 0
Trauma – 7	Addiction – 2	Disaster Management – 0
Flight/Transport – 6	Dermatology – 2	Genetics – 0
Long-Term Care – 6	Ear/Nose/Throat – 2	Ophthalmology – 0
Family Practice/Internal Medicine – 5	Forensics/Sexual Assault – 2	Plastic Surgery – 0
Geriatrics – 5	HIV/AIDS Care – 2	Research – 0
Holistic Care/Faith Community – 5	Infusion – 2	

Successes and Limitations

Two major successes of the study are:

- First broad study of nursing specialty certification organizations
- High response rate of 79%

Limitations of this inaugural study include:

- Non-participation left some major specialty areas not represented or under-represented
- Varying data collection/reporting capacities of organizations meant number of unique RN certificants vs. number of unique APRN certificants could not be reported
- Scope of project limited number of invited organizations
- Pandemic limited capacity of organizations to respond
- Collection dates of various data points varied among organizations and also within certifying boards varied (i.e., some data was current as of CY end; other was current as of survey date)
- Survey instructions did not specify whether or not to include retired (aka, for renewal only) certifications

Conclusion

This research project, and in particular, the inaugural ABNS Nursing Specialty Certification Board Survey, offer important baseline and benchmark data and information for defining, measuring, evaluating and tracking specialty nursing certification. Based on the responses received from the 44 participating certifying bodies, which identified 148 specialty credentials—72% of which are accredited and 86% of which are offered to nurses practicing both inside and outside the U.S.—that validate nursing excellence in at least 53 nursing specialty and subspecialty areas, RNs and APRNs around the world have a wide range of high quality nursing specialty certifications to choose from. As a result, the over 1.01 million RNs and APRNs identified by the participating organizations as holding one or more specialty credentials are delivering the highest levels of care, advancing specialty nursing practice, and contributing to improved patient outcomes around the globe every day. Further, whether they already hold a specialty credential or not, with at least 105 credentials available to RNs and at least 119 credentials available to APRNs, nurses have a wide range of choices as they progress through their careers and choose to build and deepen their specialty knowledge, skills, and experience.

APPENDIX A – Participating Certification Boards

(ABNS members appear in boldface)

- 1. Academic Nurse Educator Certification Program (NLN's) (ANECP)
- 2. Addictions Nursing Certification Board (ANCB)
- 3. American Academy of Nurse Practitioners National Certification Board (AAPNCB)
- 4. American Association of Critical-Care Nurses Credentialing Corporation (AACNCC)
- 5. American Board of Certification for Gastroenterology Nurses (ABCGN)
- 6. American Board of Neuroscience Nursing (ABNN)
- 7. American Board for Occupational Health Nurses (ABOHN)
- 8. American Board of Perianesthesia Nursing Certification, Inc. (ABPANC)
- 9. American Holistic Nurses Credentialing Corporation (AHNCC)
- 10. American Legal Nurse Consultants Certification Board (ALNCCB)
- 11. American Midwifery Certification Board (AMCB)
- 12. American Nurses Credentialing Center (ANCC)
- 13. American Organization for Nursing Leadership Credentialing Center (AONL-CC)
- 14. Board of Certification for Emergency Nursing (BCEN)
- 15. Certification Board for Diabetes Care and Education (CBDCE)
- 16. Certification Board of Infection Control and Epidemiology, Inc. (CBIC)
- 17. Certification Board for Urologic Nurses and Associates (CBUNA)
- 18. Certified Nurse Life Care Planners (CNLCP)
- 19. Commission for Case Manager Certification (CCMC)
- 20. Commission for Forensic Nursing Certification (CFNC)
- 21. Commission on Nursing Certification (CNC)
- 22. Competency and Credentialing Institute (CCI)
- 23. Dermatology Nursing Certification Board (DNCB)
- 24. Dermatology Nurse Practitioner Certification Board (DNPCB)
- 25. Developmental Disabilities Nurses Association (DDNA)
- 26. HIV/AIDS Nursing Certification Board (HANCB)
- 27. Hospice and Palliative Credentialing Center (HPCC)
- 28. Infusion Nurses Certification Corporation (INCC)
- 29. Medical-Surgical Nursing Certification Board (MSNCB)
- 30. Multiple Sclerosis Nursing International Certification Board (MSNICB)
- 31. National Assistant at Surgery Certification (NASC)
- 32. National Asthma Education Certification Board (NAECB)
- 33. National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA)
- 34. National Board for Case Management (for <u>ACMA</u>) (<u>NBCM</u>)
- 35. National Board for Certification of School Nurses (NBCSN)
- 36. National Certification Corporation for the Obstetric, Gynecologic and Neonatal Specialties (NCC)
- 37. National Commission on Correctional Healthcare (NCCHC)
- 38. Nephrology Nursing Certification Commission (NNCC)
- 39. Oncology Nursing Certification Corporation (ONCC)
- 40. Orthopaedic Nurses Certification Board (ONCB)
- 41. Pediatric Nursing Certification Board (PNCB)
- 42. Radiologic Nursing Certification Board (RNCB)
- 43. Rehabilitation Nursing Certification Board (RNCB)
- 44. Wound Ostomy and Continence Nursing Certification Board (WOCNCB)

APPENDIX B – Invited Certification Boards

(ABNS members appear in boldface; *asterisk indicates non-participants)

- 1. Academic Nurse Educator Certification Program (NLN's) (ANECP)
- 2. Addictions Nursing Certification Board (ANCB)
- 3. American Academy of Nurse Practitioners National Certification Board (AAPNCB)
- 4. American Association of Critical-Care Nurses Credentialing Corporation (AACNCC)
- 5. American Association of Heart Failure Nurses (AAHFN)*
- 6. American Board of Cardiovascular Medicine (ABCM)*
- 7. American Board of Certification for Gastroenterology Nurses (ABCGN)
- 8. American Board of Neuroscience Nursing (ABNN)
- 9. American Board for Occupational Health Nurses (ABOHN)
- 10. American Board of Perianesthesia Nursing Certification, Inc. (ABPANC)
- 11. American Board for Transplant Certification (ABTC)*
- 12. American Holistic Nurses Credentialing Corporation (AHNCC)
- 13. American Legal Nurse Consultants Certification Board (ALNCCB)
- 14. American Midwifery Certification Board (AMCB)
- 15. American Nurses Credentialing Center (ANCC)
- 16. American Organization for Nursing Leadership Credentialing Center (AONL-CC)
- 17. American Society for Metabolic & Bariatric Surgery (ASMBS)*
- 18. Association for Diabetes Care and Education Specialists (ADCES)*
- 19. Board of Certification for Emergency Nursing (BCEN)
- 20. Certification Board for Diabetes Care and Education (CBDCE)
- 21. Certification Board of Infection Control and Epidemiology, Inc. (CBIC)
- 22. Certification Board for Urologic Nurses and Associates (CBUNA)
- 23. Certified Nurse Life Care Planners (CNLCP)
- 24. Commission for Case Manager Certification (CCMC)
- 25. Commission for Forensic Nursing Certification (CFNC)
- 26. Commission on Nursing Certification (CNC)
- 27. Competency and Credentialing Institute (CCI)
- 28. Dermatology Nursing Certification Board (DNCB)
- 29. Dermatology Nurse Practitioner Certification Board (DNPCB)
- 30. Developmental Disabilities Nurses Association (DDNA)
- 31. HIV/AIDS Nursing Certification Board (HANCB)
- 32. Hospice and Palliative Credentialing Center (HPCC)
- 33. Infusion Nurses Certification Corporation (INCC)
- 34. Medical-Surgical Nursing Certification Board (MSNCB)
- 35. Multiple Sclerosis Nursing International Certification Board (MSNICB)
- 36. National Alliance of Wound Care and Ostomy (NAWCCB)*
- 37. National Assistant at Surgery Certification (NASC)
- 38. National Association of Directors of Nursing Administration in Long Term Care (NADONA)*
- 39. National Association for Healthcare Quality (NAHQ)*
- 40. National Asthma Education Certification Board (NAECB)
- 41. National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA)
- 42. National Board for Case Management (for ACMA) (NBCM)
- 43. National Board for Certification of School Nurses (NBCSN)
- 44. National Certifying Board for Ophthalmic Registered Nurses (NCBORN)*
- 45. National Certifying Board of Otorhinolaryngology and Head-Neck Nurses (NCBOHN)*

- 46. National Certification Corporation for the Obstetric, Gynecologic and Neonatal Specialties (NCC)
- 47. National Commission on Correctional Healthcare (NCCHC)
- 48. Nephrology Nursing Certification Commission (NNCC)
- 49. Oncology Nursing Certification Corporation (ONCC)
- 50. Orthopaedic Nurses Certification Board (ONCB)
- 51. Pediatric Nursing Certification Board (PNCB)
- 52. Plastic Surgical Nursing Certification Board (PSNCB)*
- 53. Radiologic Nursing Certification Board (RNCB)
- 54. Rehabilitation Nursing Certification Board (RNCB)
- 55. Transcultural Nursing Certification Commission (TCNS)*
- 56. Wound Ostomy and Continence Nursing Certification Board (WOCNCB)