

ICE Digest

Winter 2012

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A MESSAGE FROM THE PRESIDENT

Continuing a Focus on Strategy and Delivering Value

By Denise Fandel

I am looking forward to serving as your ICE president this coming year. I am humbled by the support of my colleagues. To follow in the footsteps of the great leaders of ICE's past is an honor, and I look forward to working with the ICE Board of Directors and staff as we continue the work to advance the credentialing industry. I want to thank Cary List for his leadership and service this past year. I am personally grateful he will continue on the board in his role as past president. Cary has continued the tradition of strong leadership that has been a hallmark for our organization.

This is an exciting time for our industry and our organization. We've been very productive this past year. The board and staff have invested time and money to enhance the ICE website so we can ignite and engage the credentialing community in conversations specific to our various missions. The online NCCA accreditation application system will enhance efficiency and customer service. This system is up and running, and we are accepting applications for the January deadline. We are excited for your feedback.

Other strategic focuses identified by the board include recognizing best practice standards, growing the global capacity of member organizations through an enhancement of resources and knowledge, creating more professional development opportunities and creating credible research on the credentialing industry.

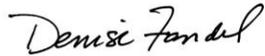
With the board focused on long-term strategy in its Policy Governance™ structure, management is focused on delivering products, programs and services that are relevant to your business:

- **NCCA Standards Revision:** While this is a lengthy and deliberate process, we are looking forward to beginning. There will be an open comment period in which to express your thoughts on revisions.
- **Enhanced C-level Education:** In order to meet the diverse and particular education needs of high-level executives in the credentialing community, ICE is developing a series of workshops designed to meet the executives' challenges in today's environment.
- **Robust ICE Academy:** An annual calendar was created with topical webinars and other educational programming, including a governance workshop (spring), a marketing

course, a Cert 101 online course (great for new hires and board members), and we are developing plans for Cert 201 online course.

- **Expansion of ACAP Accreditation:** The Assessment-based Certificate Accreditation Program is off and running. Applications are being accepted, and this program is anticipated to grow in 2013.
- **R&D Products:** Due to the overwhelming success of the R&D fundraising effort (please know it's never too late to participate!), the R&D Committee will continue to produce products that relate to the business of certification. In addition to the rigorous research agenda, other possible projects include investigation of a professional journal for the credentialing community, grant application process and partnership with a university for research assistance.

I look forward to a strong and healthy 2013 for ICE and our members as well as continuing the pursuit of the board's strategic vision for ICE and the credentialing community.



Denise Fandel

HEADLINE ARTICLES

Public Awareness: Empowering Consumers to Seek Certified Professionals

By Cyndi Miller Murphy, MSN, RN, CAE

Certification is most often intended for public protection and enables consumers to readily identify competent professionals. However, consumers are not always aware of the certifications that exist or that they can seek out certified professionals. Many certification organizations invest resources in promoting their programs to professionals and employers, rather than to the actual “end user” or consumer of the services provided. This may be because consumers represent a very broad target audience that may be difficult and expensive to reach.

Two specialty nursing certification organizations, the National Certification Corporation for the Obstetric, Neonatal and Women’s Healthcare Specialties (NCC) and the Oncology Nursing Certification Corporation (ONCC) have developed cost-effective campaigns to empower consumers with information about certification, while also communicating the value of certification to professionals and employers.

In April 2011, the Certified Financial Planner (CFP) Board launched a large campaign to raise awareness of professional certification that included advertisements in national print publications, online resources and spots on national cable television. Extensive research to determine the campaign’s success has also been included. The entire campaign is estimated to cost about \$36 million. For most certification organizations, a campaign of this magnitude is not possible. However, there are creative and cost-efficient ways to reach consumers, perhaps on a smaller scale, yet still effectively.

The [“Just Ask” campaign](#) developed by NCC uses a television commercial to encourage pregnant women to “just ask” for certified nurses. The ONCC [“Certification Makes a Difference” campaign](#) uses video and print media distributed through certified nurses in healthcare institutions to delineate the value of certification to patients. Both campaigns actively engage certified nurses in the promotion of the message and are intended to reach nurses, employers and consumers. The two programs employed very similar approaches but varied in cost and the extent of the distribution and outreach. Both campaigns first sought to inform the general public about the value of the certified nurse and to empower healthcare consumers to ask for certified nurses. Secondary target audiences were non-certified nurses and employers. Nurses were advised that certification is a major step in their professional development, while employers were reminded that having certified nurses on staff improves consumer confidence.

NCC worked with Shipps and Associates, Inc., to develop strategy and creative concepts for scripting the commercial and with CBS Community Partnerships to produce and air the 30-second commercial in eight major metropolitan viewing areas throughout the country. The commercial features a pregnant woman at home, while a narrator reminds the audience that people seek *certified* public accountants and even *certified* organic fruit, so why not seek out

certified nurses for an even more important reason: obstetric care. The commercial was supplemented by display ads through CBS regional websites and the Amazon website. NCC sent broadcast emails to all constituents with a link to view the commercial on the NCC website and to constituents within the viewing areas with times when the commercial would air. A direct-mail postcard was also sent to constituents and institutions within the viewing demographics to alert them that viewers were going to start “asking” about certification because of the commercial. Social media was also used to promote the campaign.

ONCC worked with Think, Inc. for development of creative concepts, scripting and production of a four-and-a-half minute video and the production of a print brochure for patients and a poster for nurses. The video featured a previous patient (cancer survivor) and his daughter (both played by actors), two certified nurses and a nurse manager (played by themselves). It was set in the home of the cancer survivor and the University of Pittsburgh Hillman Cancer Center inpatient and outpatient facilities. It features the patient and his daughter discussing the care they received and the importance of certification. The nurses and manager discuss the value of certification and maintenance of certification in providing quality patient care. The patient encourages others to always ask if their nurses are certified. ONCC sent broadcast emails to the constituency and other stakeholders announcing the campaign and introduced the video during a major cancer nursing conference.

The video, patient brochures and the poster are distributed in a packet and were sent to a network of about 1,000 oncology certified nurses who are a part of ONCC’s Advocates Program. Packets were also distributed to anyone who made a request, as well as at national conferences where ONCC has a presence. The video is shown for patients in outpatient waiting rooms, physicians’ offices and hospital closed-circuit patient education channels. It is shown for nurses and other healthcare professionals during orientation, staff meetings and certification review courses. The video can also be viewed on ONCC’s website.

NCC and ONCC followed very similar processes for the development of their programs in working with communication companies to translate the concepts into the end products. Though NCC’s program took about two months longer to complete, both projects were finished in less than a year. The vast majority of the time was spent on planning, the development of concepts and drafting of the script. Once the planning was complete, the pace picked up, and both projects were completed within one month of the start of filming. It was important for both organizations to clearly communicate the goals of the project to the communications companies and to dedicate the human resources needed to be available and responsive in order to meet deadlines.

As one would expect, the distribution of NCC’s message was far greater than that of ONCC’s, and the budget was also more substantial. It is estimated that the commercial had about 13 million views when shown in the eight metropolitan viewing areas. Additionally, there were about 12,000 web views. The total budget for the NCC campaign over two years was about \$920,000.

It is not possible to determine how many individuals have viewed the ONCC video because it was distributed to nurses and facilities to show in whatever way they chose. The initial distribution included 1,500 packets, with another 1,000 distributed over the following year. The video on the ONCC website has had more than 3,000 views. The total budget for the ONCC campaign was about \$56,000.

In spite of the variation in costs and distribution, the “Just Ask” and “Certification Makes a Difference” campaigns had similar outcomes. Though it is not possible to know for sure if there is a relationship between the campaigns and increases in total certification applications received, both organizations did experience increases in certification applications following the release of the campaigns. In five of the months following the release of “Just Ask,” NCC saw increases of more than 100 candidates per month. ONCC experienced an overall increase in total initial candidates of 21 percent in the year following the release of “Certification Makes a Difference.” However, as is well known, there are many other factors that may increase the number of candidates in any given year. Both organizations experienced increases in web traffic following the campaigns, which was interpreted, again with caution that many other factors may have contributed to the increases. ONCC experienced a 24 percent increase in website traffic immediately after the release of “Certification Makes a Difference,” and an increase of 68 percent two years later. New visitors to the NCC website increased by about 10 percent, with an 18 percent increase in total web traffic and a 49 percent increase in page views following the release of “Just Ask.” Of great interest to ONCC was a reported 5 percent increase in the percentage of employers that pay the fees for initial certification in the years following the release of the campaign. It is unknown whether public awareness of certification changed due to the campaigns because neither organization used methods to measure public awareness.

Both organizations continue in their efforts to engage and empower consumers to seek certified nurses and hope to work with the broader nursing community in the future for a pooling of resources toward this goal. If we are to be true to our mission in certification of protecting the public, it is our responsibility to educate and empower the public about our certifications and what they mean. This can be done in a variety of ways and with a variety of resources.

Cynthia Miller Murphy, MSN, RN, CAE, is the executive director of the Oncology Nursing Certification Corporation (ONCC), the certifying body for nurses in cancer care. Murphy holds a master’s degree in oncology nursing and is a Certified Association Executive (CAE). She has served as a commissioner and co-chair of the National Commission for Certifying Agencies and has held the offices of secretary/treasurer and president on the Institute for Credentialing Excellence (ICE) Board of Directors. She is currently a member of the ICE Research and Development Committee. Murphy was the 2011 recipient of the ICE Credentialing Industry Leadership Award.

NCCA Standards: A Framework for Building a Quality Certification Program

By Cynthia Allen, MA

ICE 2012 Annual Educational Conference session focused on how to use the standards to develop or improve your certification program.

When developing a new certification program, organizations have the best intentions. They vow to use the “best practices” in the industry to create a legally defensible assessment model and appropriate governance structure. Fortunately, a set of best practices exist in the form of the *NCCA Standards for the Accreditation of Certification Programs* that can serve as the framework for new programs or a tool to evaluate existing ones.

Using a Q&A approach, Janice Moore and Cynthia Allen, SeaCrest Company; Linda Waters, Prometric; and Lois Davis, Vascular Access Certification Corporation, used their combined multi-year experiences in certification program management, test development and the accreditation of certification programs to answer some of the most common questions about starting a program that meets the NCCA requirements. Participants discussed how to avoid common and costly mistakes that can delay the application process.

It is important to note, as it was mentioned during the session at the ICE 2012 Annual Educational Conference, that the panel members are not NCCA commissioners and cannot predict how the commission will evaluate each program application. The presenters used their extensive knowledge of the standards and their experience in the professional certification and accreditation industries to answer the specific questions.

Should a certification body seek accreditation from American National Standards Institute (ANSI), National Commission for Certifying Agencies (NCCA) or the American Board for Specialty Nurse Certification (ABSNC)? Which one is best?

Moore: It depends on the reasons the organization is seeking accreditation. They should answer some questions first. For example, are you competing with another organization, possibly accredited, or a similar credential? Is accreditation mandated by legislation? What is the budget for accreditation? What benefits does earning accreditation afford your organization? Each set of standards is different, and the organization should carefully weigh the pros and cons of each before making a decision.

Davis: The organization should decide for itself by going to each accrediting body’s standards. For us, we have a multidisciplinary health certification, so NCCA fit us the best.

What are the key milestones of a new certification program, keeping the NCCA Standards in mind?

Moore: In terms of the governance or organizational structure, the major milestones might include creating an appropriate (and acceptable) governance structure. Is it a standalone

organization or will it be housed within a parent association? Remember, in addition to having the autonomy to make certification decisions, the governance structure needs to include representation from all stakeholders—this includes certificants and a public member. Another major milestone is developing clear and useable policies that will meet the NCCA Standards. Developing these policies early will give the board and staff a consistent source of procedures and keeps everyone on the same page. They also serve as a valuable orientation tool for new board or staff members. The NCCA Standards provides a list of required policies, such as eligibility requirements, recertification and disciplinary, as a starting point, but the organization should also consider other policies that fit its needs.

Waters: There are also milestones associated with the development of the assessment instrument to consider. The standards provide the direction for how a new certification program should be developed as well as how existing programs can be improved. Use them as roadmap and determine what aspects each program meets and does not meet. Remember, there is flexibility in that there are many acceptable ways to meet a standard based on such factors as the organization’s goals, budget, availability of subject-matter experts (SMEs) and timelines. The standards do not dictate only one way to accomplish the process of developing a program.

If an organization doesn’t follow the requirements of the standards from inception and hit these key milestones, what kind of problems might they encounter?

Waters: The most serious complications it might encounter will result from developing a certification program without completing a job analysis. It may have an “attractive” exam but will fail one of the most significant criteria of any certification program, legal defensibility, without the job analysis.

Moore: Depending on the culture of the organization, it may be difficult to change an established board structure. Individuals can be resistant to change, and the procedures involved with bylaws changes can add more time to the process. Another issue might result from not having the necessary policies in place. For example, if an organization receives complaints or encounters ethical violations before having a robust disciplinary policy in place, it has a serious problem to solve.

Of these problems, which ones take the most time to fix?

Moore: If the organization is willing, anything can be changed, but it does take time. The timing depends on budget and the board or staff’s ability to drive and manage the change process. Other factors, like organizing a membership vote for a bylaws change, transitioning from one type of board structure to another or separating an education program from the certification program can be time consuming.

Waters: The good news is that all of these potential issues can be fixed, but the “fix” is based on timelines, budget, availability of SMEs and organizational commitment. There are plenty of

certification programs that don't make these important investments and may impact the "overall value of certification" from the public perspective. We have much to risk with programs that chose not to meet standards of excellence.

How expensive is accreditation? How should an organization plan its budget for accreditation?

Davis: The costs can definitely add up. Beyond the application and annual maintenance fees, remember that you must also consider personnel expenses or consultants as well as consider additional costs if you have more than one program. I recommend conducting a needs assessment first to determine if you comply with the standards, and then consider how to use your in-house staff or consultant to manage the application process.

What about timelines? How long does it take to get accredited?

Moore: It depends on the status of your program when you make the decision to apply for accreditation. Once you decide to apply, I've seen it take as little as four months or as much as two years to prepare the program and make the changes necessary to be ready to apply for accreditation.

Conducting a needs assessment is a good place to start. This objective review of your program can produce a clear view of where the program stands in terms of compliance with each standard, enabling you to set priorities and develop a realistic timeline and budget for the overall process. Preparing for accreditation is complex; creating a project plan based on the information gathered during the needs assessment is an efficient approach.

Once the application is complete and submitted, it can take a few months or more to go through the accreditation process—again depending on compliance with the standards and the commission's questions on the application. The best thing you can do to streamline this process is to take your time in reviewing your needs and implementing change before you begin the application, and then take the time to make sure that the application is complete before it is submitted. More often than not, rushing to put an application together results in missed details that can cause longer delays during the review process.

We've all heard, and used, the phrase "hindsight is 20/20." Davis and Waters, what do you know now about complying with the NCCA Standards that you wish you knew when your organization first started a certification program?

Davis: How incredibly detailed you need to be and what you need to document. I recommend that you save everything—notes, emails and meeting minutes, for example. I also wish I had realized how many hours it takes to put the application together.

Waters: There is a critical need for constant documentation because you cannot trust your memory. You must codify what happens both for historical purposes but also to clearly

demonstrate that standards are being met. For example, including the demographics of members of volunteer committees to show representation across the industry, documenting all decisions that committees reach, including a summary of the decision-making process and the rationale for the decision. This is especially critical as a program matures.

What questions should organizations ask themselves if they have already started the program development process? What if they are thinking about starting a program?

Davis: When you decide to start a program, consider if accreditation is a goal. If it is, make sure you understand the requirements of the standards so you are developing a program that will comply with them. Think about if there is a need for the credential and if the stakeholders will buy into it. Will there be enough value? Also, consider if you have the necessary personnel, in house or outsourced, to develop and run the program.

Moore: Carefully consider the feasibility of the program and understand what all the potential expenses are and realistically plan for the revenue. It's important to look beyond what it takes to get started and understand what it takes to maintain the program, too.

Waters: I think one of the most important question to ask is, "Does the organization have a realistic expectation for what the commitment is in terms of time and resources—both human capital and costs?"

What is one thing you think is most helpful for our audience members to know?

Davis: Take your time, pay attention to detail, follow the standards and do not be afraid to seek help.

Waters: Accreditation is a journey, not a destination. It is a continual process that requires an organization to make decisions—sometimes tough ones—to assure quality in a rapidly changing world.

Moore: Accreditation is not an all-or-nothing proposition. Working toward compliance with the standards will benefit your organization along the way. Working beyond the standards and looking at best practices and trends will allow the program to continue to improve.

[Cynthia Allen](#) is the president at SeaCrest where she focuses on providing experienced project management and strategy development in the areas of certification and marketing and communications. She has worked with certifying agencies to audit their marketing programs, provide recommendations, develop comprehensive strategies and implement tactics.

[Lois Davis](#) is employed by the Association for Vascular Access (AVA) as the Director of Professional Development and is editor of JAVA, AVA's scientific journal. She is also the program director of the Vascular Access Certification Corporation. Davis' background includes more than 30 years as a registered nurse with more than 20 years involved in vascular access as a clinician,

educator and manager. Davis is a recognized speaker and is involved in various local and national professional organizations.

[Janice Moore](#) has worked with more than 30 certifying agencies to evaluate and improve their programs and successfully guide them toward accreditation. Moore is an expert in association management, accreditation of certification programs and the operational administration of certifying agencies. In addition to preparing certification programs for accreditation, she has been instrumental in the development and implementation of organizational bylaws, policies and procedures, strategic plans, membership programs, annual conferences and other association programs.

[Linda Waters](#), Ph.D., is vice president at Prometric, providing program management to various professional clients. Dr. Waters began her career in testing at Educational Testing Service and joined in 2004. She is a graduate of the University of Delaware with a Ph.D. in Educational Measurement and Statistics.

Know How to Provide Feedback to the Failed Candidate

By Cynthia Noe, RN, MSN

A common problem experienced by certifying bodies is responding appropriately to inquiries from failed candidates seeking assistance prior to retesting. However, credentialing agencies must ensure that the testing process is not compromised in an attempt to provide effective assistance. The challenge is to provide candidates with meaningful feedback without jeopardizing the integrity of the testing process.

Communicating effectively with candidates who fail their credentialing exam is probably one of the more complicated functions for a credentialing organization. On one end, and of paramount importance, is the need to safeguard the mission of the credentialing body: public protection. Organizations invest significant human and capital resources in developing a credentialing process that is not only psychometrically valid and legally defensible, but also achieves a reputation for excellence amongst members of the profession and with stakeholders; so, logically, this should be the primary consideration. On the other end, a failed candidate with effective remediation could become a future certificant; and quite frankly, a certificant who values the credential even more because of the effort put forth in achieving their professional goal.

Based on my experiences as a former critical care nurse, I have come to recognize that candidates who fail their certification exams often communicate this experience very similarly to the family members of patients who have died. Obviously, failing an exam is not at all the same as the loss of life. Death is a permanent condition, and the loss can never be reversed. A failed candidate, on the other hand, certainly has the potential to become certified. However, the feelings failed candidates express as they work through their professional loss is very reminiscent of how those in grief. I can't control what other people say or how they express their emotions, but I can certainly control my own. Since I recognize that the person is going through a process, I can expect certain emotions and prepare an appropriate response. Therefore, it is helpful when communicating with these individuals to ascertain where they are in the stages of grieving in order to respond in a manner that best meets their needs.

Dr. Elizabeth Kubler Ross identified five stages that people experience as they work through grief: denial, anger, bargaining, depression and acceptance.

1. **Denial** – The person experiences disbelief of the findings of the score report. This is often expressed as questioning of the scoring process, so efforts should be focused on confirming that the score is correct as reported.
2. **Anger** – The person experiences and often freely expresses this anger, and agents of the exam often take the brunt of this anger. They may question the validity of the exam or the quality of the preparation material, even though such material is provided by other parties.

3. **Bargaining** – The person may consciously or unconsciously test the limits of the security procedures by requesting to see the exam or discuss specific items. They may try to request amelioration of test fees.
4. **Depression** – The person may see the exam as too difficult or beyond their abilities. Often, candidates of exams for voluntary credentials get stuck here and believe they are incapable of ever achieving their goals.
5. **Acceptance** – The person recognizes their strengths and weaknesses and seeks direction on how to best prepare before retesting.

Each person goes through all of these stages but an individual does not process each stage the same, and the time spent at each stage may vary. The individual needs to process through each step in order until finally accepting the situation.

Ideally, acceptance is the easiest phase to respond but organizations may be contacted by a failed candidate at any of the other stages. Don't lose sight of the fact that even when they are reaching out from an emotional perspective, they are, in fact, reaching out. Recognize this as an opportunity to demonstrate continuing support and to keep them engaged. Below are strategies for support:

Establishing boundaries – I start every communication with “Due to test security and integrity procedures, I can't talk about items on the exam itself. You may have questions that I cannot answer. Please do not think that I am being unhelpful but know that I want to assist you in achieving your goals.” They may test those boundaries, so be prepared to gently remind them.

Listening – Let the person talk. Don't be surprised if it includes his or her academic credentials, professional accomplishments and work experiences. Often times, the emotional response stems from a sense of embarrassment and the fear further judgment by others.

Clarifying – There may be misperceptions or questions that can easily be corrected just by explaining the policies and procedures the organization follows. However, avoid technical or legal jargon and don't get caught in a trap of sounding defensive as this can cause further frustration.

Supporting – Direct them to resources the organization offers candidates. Point to aspects of the score, report where they performed well or any constructive activities they have been doing to prepare. Avoid criticism or judgmental statements. For example, instead of saying “You did very poorly on...” Rephrase it to say “Your best opportunity for improvement is...”

Delaying – There is something to be said for time healing all wounds. It can be difficult to coach someone who is stuck in the denial or anger phases. Say you need to investigate and give a time frame for when you will be in touch. It shows you listened, took the concerns seriously and followed up on the candidate's behalf. However, don't make any promises or set up unrealistic expectations. Above all, be honest. Typically, when you respond, they have processed through several of the steps and will be ready to move forward. If, however, they are still stuck, politely

listen and assist as possible. Make sure they have your contact information and an invitation to contact you when they are ready to retest.

Whether a failed candidate is contacting the testing organization in order to understand a score report or to challenge the testing process, recognizing where the candidate is in their acceptance of the situation can be immensely helpful. It will help you craft an appropriate response that maintains the fidelity to the mission of the credentialing body and provides the candidate with the sense that they are supported should they choose to retest at a future date. Understanding how a person processes life stressors, such as failing a credentialing exam, is a useful skill for a credentialing representative.

With more than 25 years in critical care nursing, Cynthia Noe, RN, MSN, is currently the certification practice specialist for the American Association of Critical-Care Nurses (AACN). Prior to joining AACN, she held roles as a critical care nurse, critical care educator and the organizational facilitator for the integration of evidence based practice for all clinical roles at a community hospital.

The National Certification Corporation's Transition to a Professional Development Certification Maintenance Model

By Fran Byrd, NNP-BC, MPH

The quest for increased patient safety and quality improvement, and the contributing role of the agencies, organizations and institutions representing licensure, accreditation, certification and education, remain at the forefront of current issues in healthcare. For more than a decade, landmark documents— including the 1995 PEW Commission report, *Reforming Health Care Workforce Regulation*, and the Institute of Medicine reports, *To Err is Human: Building a Safer Health System* and *Health Professions Education-A Bridge to Quality*—have served to raise awareness among policymakers, regulators and consumers in both the public and private sector of the need for change across the healthcare delivery system.^[1,2,3]

One concern repeated throughout a number of reports and ongoing in the work of the Citizen Advocacy Center is the need to focus on the issue of how the continuing competency of healthcare providers is assessed and addressed after initial licensing or certification.^[4,5] The professional literature is filled with various approaches both postulated and trialed, and it is clear from the discussions and conclusions that the undertaking of such initiatives is no easy task. There are many elements that contribute to the difficulty of addressing the key question, including where the leadership role for implementation lies and whether development of one common approach is possible given the varying sizes of the populations involved and the resources both financial and manpower required to provide a standardized process across a host of different geographic locations and disciplines.^[6,7,8,9,10] Regardless of the approach, an initiative's success largely depends on an organized plan to communicate and implement the required process changes with attention given to the concerns of those healthcare professionals impacted by changes made to familiar processes.

Background

The National Certification Corporation (NCC), a voluntary, nonprofit national certification organization, has spent more than a decade in discussions about the value and accountabilities demonstrated by a commitment to life-long learning and validation of continuing competence. As a culmination to the years of discussion, detailed review of the professional literature and findings of its own pilot project, NCC undertook development of a new Professional Development Maintenance Program model.

The results of a pilot project completed by NCC in 2007 and involving approximately 1,500 NCC-certified women's healthcare nurse practitioners provided the foundation for the new certification maintenance program. The psychometric recommendations that evolved from the NCC study were reflective of what had previously been stated in a number of studies and literature reviews. The primary conclusion was that the sole use of self-assessed continuing education (CE) as a mechanism for identifying the continuing competency needs of healthcare professionals was not adequate and that some form of third-party evaluation was indicated.^[11,12,13,14]

The Process

As a result, NCC started a transition in 2010 from its existing certification maintenance process, based on constituent self-assessed continuing education accrual, to the new model founded on the results of a third party (NCC)-administered specialty assessment evaluation tool. In the new model, the results of the completed specialty assessment tool generate an individualized learning plan that is used to direct continuing education for a specific certification maintenance cycle.

Separate specialty assessments were developed for each of NCC's six currently administered core certification examinations. Each assessment covers 50 total hours of CE in competency content categories with item groupings distributed and weighted in value to reflect the specific specialty's current examination content. Some content categories are more heavily weighted, as they reflect an area of the current examination with a greater percentage of focus and test items. For example, all specialty assessments include the professional practice category, which represents less than 2 percent of core specialty examination content; therefore, the number of assessment items and the CE weighting would be less for that category than in the more complex content areas such as physiology, pathophysiology and clinical management issues.

There is no grade or pass/fail status tied to the specialty assessment, as it is solely used as an evaluation tool to direct appropriate continuing education for NCC certification maintenance. Individual performance feedback of the specialty assessment results is reported in a Specialty Index Report, which is based on mathematical calculations providing a scaled 1 to 10 conversion related to the type and amount of content within each of the core competency categories on the specialty's assessment. For purposes of establishing the need for a NCC constituent to earn CE in a given core competency content area, ratings of 7.5 or higher have been determined to "meet the standard." An individual does not need to focus continuing education for purposes of NCC certification maintenance in any specialty assessment content areas with ratings of 7.5 or higher. For content areas reflecting specialty index ratings below 7.5, the prescribed number of hours of CE for that specific core competency area will be reflected in the individualized learning plan (education plan).

The results of an individual's specialty index ratings for their assessment's content categories are transferred to create an individualized education plan, which is developed based on the overall weighting of the core competency categories. Most education plans begin with a baseline requirement of between five to 15 hours of CE that can be selected by the constituent from any topic areas related to their certification specialty. If an individual had specialty index ratings of 7.5 in all content categories of the specialty, the education plan requirement would still have a need for 15 hours of continuing education in their choice of specialty-related topics. Individuals with index ratings less than 7.5 in all of their specialty's content areas would have no baseline requirement, as they would be completing CE in all of the core competency categories for the specialty. Although every NCC specialty assessment has a total of 50 hours of CE distributed throughout the core competency categories for the specialty, NCC awards five hours of CE each time an individual is required to complete a specialty assessment tool for their

certification maintenance cycle. Under the Professional Development Maintenance Program, no individual completing a specialty assessment tool will be required to earn more than 45 hours of CE to meet maintenance requirements.

The following examples reflect Inpatient Obstetric Nursing Specialty Index Reports and the associated Education Plans for a 45-CE hour education plan and a 25-CE hour education plan.

[Performance Feedback - Specialty Index Report - 45 hours of CE](#)

[Performance Feedback - Education Plan - 45 hours of CE](#)

[Performance Feedback - Specialty Index Report - 25 hours of CE](#)

[Performance Feedback - Education Plan-25 hours of CE](#)

To date, almost 40 percent of the more than 41,000 individuals who have completed stage 1, stage 2 or both stages of the assessment tool would have fewer CE hours required for maintaining a NCC credential under the new process than the 45 hours of CE required under the previous certification maintenance process.

Use of the specialty assessment evaluation does not threaten an individual's certification status. As with any initiative bringing change, there are individuals who will refuse to participate in the assessment process, and NCC has developed an alternative maintenance process to address this issue. Since this is not the preferred maintenance approach and as an outlier requires additional personnel resources, it is more complex, more costly and does not offer the potential benefits available to those individuals who participate in the Professional Development Maintenance Program. Individuals who opt out of the assessment process will be required to complete the full 50 hours of continuing education in the distribution outlined in the core competency categories of the assessment tool for their specialty. This is necessary for NCC to validate maintenance of an individual's credential. Without the specialty assessment results to determine an individual's actual needs, the only recourse is to require that all knowledge competencies for the specialty be addressed in continuing education activities completed for NCC certification maintenance. Each maintenance cycle is a separate event, and an individual choosing to use alternative maintenance in one cycle may elect to complete the specialty assessment for the next cycle or vice versa. To date, few NCC constituents have chosen to opt out of the specialty assessment evaluation process, as there are no associated benefits.

Conclusion

NCC spent a great deal of time and effort to develop a certification maintenance process that achieves the appropriate evaluation and validation components without subjecting constituents to increased costs, the need for proctored testing sites or an increase in the number of continuing education hours required for certification maintenance. To further reduce

constituent stress, NCC offered a stage 1 orientation phase applicable for NCC-certified individuals with certification maintenance cycle deadlines between June 30, 2010, and Dec. 31, 2013. This phase allows individuals to experience the actual assessment process and to see how their individualized education plan develops from the assessment results without impacting their certification maintenance requirements for stage 1 cycles.

In terms of constituent notification, communication regarding the transition in the certification maintenance process began in January 2010 and has been ongoing using a number of different approaches to provide individual notification to each NCC constituent impacted by the transition. Communication includes a dedicated section on the NCC website homepage and a 20-page brochure with in-depth details about the transition to the Professional Development Maintenance Program model that was mailed to each constituent and is updated and accessible via a link on the NCC website.

There are a number of advantages of the new Professional Development Maintenance Program for the NCC-certified constituent, including:

- No fees charged to access and complete the assessment;
- On-demand availability of the specialty assessment tool with easy accessibility from thousands of personal computer and internet configurations;
- No grade or pass/fail status that would jeopardize an individual's certification status;
- A Specialty Index Report and education plan immediately available upon completion of the assessment and accessible only to the constituent in their personal password protected NCC website account;
- No increase in the maximum number of CE hours required for certification maintenance and the potential for fewer hours of CE than in past cycles; and
- The option to use NCC CE modules that automatically record and code upon successful completion to the appropriate area of the constituents' online maintenance application (use of NCC CE modules is not mandatory for certification maintenance).

From NCC's perspective, the most significant benefits to the NCC-certified constituent are that this model provides personalized direction for continuing education activities supporting certification maintenance as opposed to a "one size fits all" approach, and it validates that the maintenance process for their NCC credential addresses specific knowledge competency needs identified by a third-party process.

NCC continues to monitor the specialty assessment process, and the certifications that are beginning to be maintained under the binding stage 2 education plans. It is anticipated that adjustments to the process and continued development of assessment tools reflecting the knowledge competencies and content of the active core certification examinations will be ongoing. For NCC, demonstration of continued professional development and a commitment to life-long learning are hallmarks of the nationally certified healthcare provider.

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Fran Byrd, NNP-BC, MPH is the director of Strategic Initiatives for the National Certification Corporation (NCC). Her background as a NNP-BC constituent, Neonatal Intensive Care Content Team member and past president of NCC provides multiple perspectives to NCC initiatives, projects and processes. Byrd joined HAB Associates, Inc. (NCC's Chicago-based management firm) in 2008. Her familiarity with NCC's mission and vision provided a smooth transition from a 39-year career in nursing and healthcare administration. She holds degrees in nursing and public health administration from the University of South Carolina.

Who Knows Best? Responding to Stakeholders Needs for New Credentials

By Catherine A. Carter, Bill Ellis and Jacqueline Siano

Drawing upon the experiences of the Board of Pharmacy Specialties, the American Board for Certification in Orthotics, Prosthetics and Pedorthics and 19 other credentialing organizations (through a survey and interviews), our ICE 2012 Annual Educational Conference session, “Who Knows Best? Responding to Stakeholders Needs for New Credentials,” focused on the unique considerations that a sponsor of credentialing programs may encounter when exploring, developing, implementing and managing multiple offerings. We explored considerations such as the drivers behind the exploration of additional certification programs, the decision-making process leading to the go/no go decision, implementation issues and considerations for differentiating the new credential from the existing line of offerings.

Drivers Behind the Exploration of Additional Credentialing Programs

A credentialing organization may decide to explore the addition of new programs to the current line of offerings for many different reasons. Some of the most commonly reported drivers behind this exploration are receiving requests from members or practitioners for a new credential, gaps in the market revealed through a needs or market assessment, potential financial benefits and fulfilling the organization’s credentialing mission. Less frequently reported but still noteworthy considerations are the potential for increasing professionalism in an industry, increasing the global reach of credentials and broadening the types of credentials offered (e.g., role-based, skill-based) through the addition of new programs.

Decision-making

Regardless of why an organization decides to investigate the potential for additional credentialing programs, there will likely be a process by which a go or no go decision is made. In some cases, this is a formal decision-making process, and in other cases, the process is less formal. The process may include additional needs assessment and market analyses, development of a formal proposal and business case (examination of resources required, estimation of ROI), and/or presentations to organizational leadership to facilitate the final go or no go decision.

Outcomes of Implementation

In those cases where the decision-making process leads to the development and implementation of a new program, there may be both beneficial and problematic consequences to this implementation. Some beneficial outcomes include:

- Fulfillment of the unmet market need;
- Increased brand recognition;
- Increased member engagement, event participation and renewal;
- Increased credibility in the industry; and

- The opening of new markets (domestic and international).

Organizations must also consider some of the problematic consequences that may occur. Additional offerings may cause confusion in the market, difficulty keeping up with program administration, cross-cultural issues, a drain on resources or potential confusion around credential maintenance and continuing education (CE).

Differentiating the New Credential(s)

In order to mitigate the potential for confusion and overlap amongst multiple credentialing programs, organizations may implement differentiation methods. Clearly defining the focus of and eligibility for the new credential and providing clear information on the mission and goal of each program is essential to successfully differentiating the new program. Marketing, branding and communication efforts may include use of an organization's website, articles, newsletters, exhibitions at conferences, publications or advertising. Consistent, targeted communication is key to reduce the potential for confusion in the market.

Lessons Learned

Credentialing organizations were asked to share key pieces of advice that may be helpful for other organizations thinking of exploring the addition of new credentials. Some advice is to focus on effective communication with all stakeholders throughout the entire process, encourage board and staff to be open-minded about the final decision, never underestimate the need for strong administrative support, everything takes longer than you think it will and small steps can lead to a big success in the end—it won't happen overnight!

Catherine A. Carter has served as the executive director of the American Board for Certification in Orthotics, Prosthetics and Pedorthics, Inc., (ABC) since 2004. As such, she serves as the chief staff executive for ABC's activities on behalf of more than 13,000 credentialed individuals and 8,000 accredited patient care facilities involved in providing orthotic and prosthetic care.

Bill Ellis assumed the role of executive director for the Board of Pharmacy Specialties on Jan. 1, 2011. He served as the executive vice president for the Pennsylvania Society of Health-Systems Pharmacists from 1986 until 1997 and as the executive director and CEO of the American Pharmacists Association (APhA) Foundation from 1997 until 2010.

Jacqueline Siano currently works as a research director at Professional Examination Service. Siano has worked on a number of large-scale certification projects—many involving a range of complementary initiatives.

Facilitating Veterans' Employment through Credentialing: Understanding Needs and Opportunities

By Lisa Lutz, MPA, President, SOLID, LLC

Editor's Note: Lisa Lutz, president of SOLID, LLC, and Dr. Roy Swift, senior director of Personnel Accreditation Credentialing Programs for the American National Standards Institute (ANSI), presented on this topic at ICE's 2012 Annual Education Conference in Palm Springs, Calif. In addition, ICE has coordinated with Lutz and the Department of Defense on a survey of credentialing agencies to identify steps that the agencies are currently taking to facilitate credentialing of service members and veterans. The results of that survey will be released in early 2013.

With the military drawdown in the Middle East, more than one million United States military Service members are expected to leave the service over the next four years. The majority of them will seek civilian employment. The challenge for these men and women who have devoted years to serving our country will be to find jobs in the civilian workforce. Trends in recent years show that unemployment among veterans, especially those in the 20 to 24 year old age range, is high. Employers indicate a strong desire to hire transitioning service members and veterans, but report difficulty in translating military training and experience to the skills required in the civilian workplace.

Recognizing the need to help employers understand the transferability of military skills and experience to civilian jobs, policymakers at all levels of government are undertaking numerous initiatives to promote the attainment of civilian occupational credentials among active duty service members and veterans. Credentialing agencies can aid in these efforts by adopting best practices to maximize the credit given to military training and experience and otherwise facilitate credentialing. At the same time, serious consideration should be given to the fact that the increased demand for credentials among the large military and veteran populations will likely come with increased scrutiny among policymakers in the quality of credentials offered to military service members and veterans.

Civilian Credentials are Highly Applicable to Service Members and Veterans

Because the military workforce represents a microcosm of the civilian workforce, civilian credentials apply to the vast majority of military occupations. The types of occupations held by service members are very representative of the range of occupations in the civilian work force, including such areas as human resources, food service preparation, electronics, logistics, automotive, information technology and healthcare. Research conducted by the Army and Navy shows that 100 percent of their military occupational specialties can be linked to a civilian credential. Some of these are linked directly to the civilian equivalent job of the military occupation and others are related to an embedded skill set attained through military training and experience. The sheer numbers of military service members (more than 2 million) and veterans under the age of 60 (more than 11 million) speaks to the potential number of individuals who may seek a credential.

Benefits of Promoting Credentialing of Service Members and Veterans are Far Reaching

The benefits of facilitating the credentialing of service members and veterans accrue not just to the service members or veterans themselves, but also to the military services and ultimately to the taxpayer.

Benefits to Service Members – Attainment of civilian credentials by service members and veterans affords them the same benefits that holding a credential has for the general population, including such things as increased prospects for employment, higher pay and promotion opportunities. But credentials have added value for service members and veterans—they demonstrate to civilian employers that the training and skills attained in the military are on par with those gained through more traditional civilian pathways.

Benefits to the Military – The military services also reap the benefits of promoting credentialing during military service. The services are using credentialing to enhance recruiting, professionalize the workforce, promote retention and to facilitate the ability of service members to make a seamless transition to the civilian workforce. This latter goal is particularly important given the current focus on downsizing of the military and the high unemployment rate among veterans.

Benefits to Taxpayers – While there are clearly altruistic reasons for helping service members attain credentials, there are also monetary incentives for doing so. A major incentive is to help reduce the amount of money the government must pay in unemployment compensation. In fiscal year 2011, the Department of Defense spent more than \$900 million in unemployment compensation for ex-service members—up from \$500 million in fiscal year 2006. As the numbers of transitioning service members rise in coming years, the use of credentialing to promote employment of transitioning Service members and veterans can help defray these costs.

In addition to defraying unemployment compensation, facilitating credentialing of service members and veterans through better recognition of the equivalency of military training can also reduce costs that might be incurred if they are required to take duplicative training. The military invests thousands of dollars in providing quality training to individual Service members in order to produce a highly skilled military workforce. When credentialing agencies or academic institutions fail to recognize the equivalency of this training, the service member or veteran may be forced to pursue duplicative education and training through more traditional pathways. This is typically paid for during service through tuition assistance and post-service through the GI Bill and other veterans' benefits programs funded by taxpayers. Greater recognition of military training and experience by credentialing agencies and academia will preclude the need for taxpayers to pay twice for the same training.

Credentialing Agencies Can Adopt Best Practices to Facilitate Credentialing of Service Members and Veterans

Credentialing agencies can do their part to help our deserving service members and veterans attain civilian credentials that maximize credit for their military training and experience and help demonstrate the transferability of the substantial skills they acquire in military service. Some of the key practices credentialing agencies might adopt include:

- **Ensure Quality/Value.** Service members and veterans, like the general public, have a right to know that the credentials they pursue are of high quality and hold value to industry. Just as the influx of veteran students after World War II and the payment of education through the GI Bill were key factors in the growth of higher education accreditation, the increased interest in credentialing of service members and payment of credentialing fees may lead to increased demand for accreditation of credentialing programs. Credentialing agencies that pursue accreditation now will be ahead of the curve should government mandates for accreditation come into play. Evidence of government's interest in assessing the value of credentials is demonstrated in the U.S. Department of Labor's [pilot initiative](#) to collect employer input on the value of credentials.
- **Facilitate Payment of Credentials.** The GI Bill will pay for credential exam fees up to \$2,000 per test. Credentialing agencies should work with the [Department of Veterans Affairs](#) to get their credentials approved for payment through the GI Bill.
- **Provide Maximum Credit for Military Training and Experience** – Credentialing agencies should take steps to assess the equivalency of military training and experience and should explicitly recognize military training in credentialing requirements, when possible.
 - **Utilize existing assessments of military training and experience.** The Army, Navy and Air Force have matched military occupations to civilian credentials, and, for some credentials, conducted detailed gap analyses of these credentials. In addition, the American Council on Education (ACE) makes college credit recommendations for military training and experience. Some websites that might be helpful include:
 - [U.S. Army's Credentialing Opportunities Online \(Army COOL\)](#)
 - [U.S. Navy's Credentialing Opportunities Online \(Navy COOL\)](#)
 - [U.S. Air Force's Credentialing and Education Research Tool \(CERT\)](#)
 - [American Council on Education \(ACE\) Military Guide](#)
 - **Use available service documentation to assess individual service members and veterans' unique qualifications** – credentialing agencies can use standard forms of service documentation to assess an individual's military training and experience. More information on service transcripts and other forms of documentation can be found on the [U.S. Department of Labor's Career One Stop](#) website.

- **Accommodate Military's Unique Needs** – Credentialing agencies can make accommodations for such things as deployments and the geographical dispersion of service members:
 - **Make accommodations for deployments** – Service members who are deployed may have difficulty meeting recertification requirements (e.g., continuing education units) or the period for which their credential is valid may expire while they are deployed. Credentialing agencies can extend recertification requirements for deployed service members.
 - **Ensure exams are widely available** – Service members are often geographically dispersed and need easy access to credential exams and may not be able to take exams that are only offered periodically throughout the year. Credentialing agencies can consider using national testing companies to make their credentials widely available and can offer credential exams on demand.

Lisa Lutz, M.P.A., is president and co-founder of SOLID, LLC, a company that specializes in research and analysis that translates military skills to civilian jobs and credentials. Lutz has performed research in this area for numerous organizations, including the Congressional Commission on Servicemembers and Veterans Transition Assistance, The American Legion and the U.S. Departments of Labor, Defense, Army and Navy. Based on her expertise in this area, she has been appointed by the Secretary of Veterans' Affairs to two advisory committees on which she served for more than seven years. She also serves on the American National Standards Institute's (ANSI) Professional Certification Accreditation Committee (PCAC).

Let the Numbers Do the Talking: Using Surveys to Demonstrate the Benefits of Certification *Dental Assisting National Board, Inc.*

The Dental Assisting National Board, Inc. (DANB), recognized by the American Dental Association as the national certification board for dental assistants, routinely receives requests for dental assistant salary information. These requests come from DANB's stakeholders, which include exam candidates, certificants, dentist employers, educators and state regulators.

"We receive the most requests for salary information from exam candidates," said Johnna Gueorguieva, Ph.D., DANB's director of Testing and Measurement. "They want to know whether earning DANB certification is worth the investment."

This repeated request prompted DANB's first salary survey in 2001. It was initially developed to capture average salaries or hourly wages of DANB certificants and disseminate this information to DANB's stakeholders. However, staff soon realized that they could demonstrate the value of DANB certification by comparing average DANB Certified Dental Assistant (CDA) salaries against the estimated average hourly wage of other dental assistants.

Since 2004, DANB has conducted its salary survey in the first quarter of every other year. It has proved to be an invaluable tool for connecting with DANB's certificants and demonstrating the value of DANB certification—from a financial investment perspective and beyond.

Credentialing organizations should conduct surveys on a regular basis to communicate with their members, certificants and other stakeholders on issues of importance. Using DANB's salary survey as an example, following are some tips for conducting a certificant survey to demonstrate the benefits of certification.

Demonstrate Certification Value

When developing your survey, consider what you are trying to demonstrate with the results.

DANB only sends its biennial salary survey to those who hold a current CDA, DANB's flagship certification. In this way, DANB has been able to demonstrate the value of certification by comparing the average salaries of CDAs with salaries of all dental assistants, using data provided by the U.S. Department of Labor's Bureau of Labor Statistics (BLS) in its *Occupational Outlook Handbook*. Because the BLS estimates that there were 297,200 dental assistants employed in the United States in 2010, and approximately 34,000 of these dental assistants were CDAs in 2010 (about 11 percent), the median or average dental assistant salary cited by BLS can reasonably be interpreted as representing dental assistants who are not DANB certificants. This strategy directly addresses exam candidates' question: "Is DANB certification worth my investment?" Using the salary survey data, DANB is able to demonstrate that earning a DANB certification has financial benefits. (Note: Every DANB salary survey to date has demonstrated that CDAs earn a higher salary than the population of all dental assistants, most of whom are not CDAs.)

By expanding the survey to include questions about issues besides salary—such as employment status, duties performed, length of employment, length of career and others—DANB has been able to demonstrate other benefits of certification. For example, the survey results consistently reveal that CDAs offer high employer loyalty and career longevity. This has helped DANB demonstrate the value of certification to another DANB stakeholder—dentist employers.

DANB exams are recognized or required by 38 states, the District of Columbia, the Department of Veterans Affairs and the U.S. Air Force. While DANB supports one national set of minimum requirements to perform dental assisting tasks, no such standard currently exists.

“The survey results enable us to gauge the motivations for earning a DANB certification,” Gueorguieva said. “It is important to understand the motivations behind obtaining certification in the absence of state requirements.”

DANB’s salary survey also solicits open-ended comments from respondents to either elaborate on a survey question or address a topic that was not covered. Year-to-year comparison studies also help validate any assumptions or reveal new trends.

Identify Issues of Importance

DANB’s decision to conduct a salary survey arose from direct requests for this information. The survey evolved into a tool used to demonstrate the value of DANB certification. As a credentialing organization, what are the issues of importance to your various stakeholder groups in deciding whether to earn, recognize or promote certification? Are they meeting state requirements, earning greater pay, achieving greater patient outcomes and/or receiving employer recognition?

In DANB’s case, the issue of importance—salary information for dental assistants—was not being addressed by any dental assisting membership organization (DANB is a certification board, not a membership organization). Therefore, the path was wide open to establish DANB as an expert on this topic. If you find gaps in your industry, this may provide an opportunity to not only demonstrate certification value but forge your reputation as the leading resource in your field.

Methodology

Once DANB identified the issue of importance for its survey, the next step was developing the survey itself. Fortunately, DANB has experts on staff who develop and analyze DANB’s surveys. DANB uses a stratified random sampling technique in order to survey nationwide. That is, each state is represented proportionally based on the number of current DANB CDAs in the survey. This technique provides for more precise results for the population and helps to minimize any one group from being overrepresented in the population. Moreover, stratified sampling permits DANB to readily look at subgroups during the data analysis (salary by state and region, for example).

“We knew that we needed comparison data,” said Chris McManus, education project manager for the DALE Foundation, DANB’s affiliated nonprofit education and research foundation.

“Because no industry organization captures salary data for dental assistants, DANB designed its survey so that it would be comparable to the BLS’ data, which reflect average hourly earnings for all dental assistants, whether certified or not. This meant capturing salary level at the national, regional and state levels.”

McManus also discovered that the BLS demonstrated hourly wage figures with median values. (The median is a point at which 50 percent of dental assistants earn less and 50 percent earn more.) Therefore, DANB decided to publish median salary figures to provide comparable data.

“The consistency of salary data among the surveys supports the overall conclusion that these results are truly representative of the DANB CDA population,” McManus said.

In general, it’s important to gather data so that you’re comparing apples to apples. Also, to avoid bias, make sure your survey questions do not lead participants to any one answer option. And, if you are not going to use the information provided in the answers, leave out the question. Lastly, it is a good idea to begin the survey with a short introduction that gives participants an estimate of survey completion time and explain that the results will be kept anonymous and confidential.

Leverage the Results

When it comes to demonstrating certification value to certificants or other stakeholder groups, don’t forget the last, and perhaps most vital, step: sharing the results.

“Results from DANB’s salary surveys are disseminated to our communities of interest on a regular basis,” said Cindy Durley, M.Ed., MBA, executive director for DANB and the DALE Foundation. “Throughout the years, we have been able to demonstrate that CDAs earn more, on average, than the population of all dental assistants.”

Besides demonstrating the value of certification, survey results also provide fantastic promotional opportunities. The media love to publish survey results from credible sources. Numbers tell a story. DANB summarizes the results of its salary survey and shares them on its website, in its quarterly newsletter and at dental conferences with marketing materials.

“Our stakeholders now know to come to us for this information,” Durley said. “It not only demonstrates the value of certification, but it has become a valuable tool for prospective employees and employers.”

Today, DANB’s salary survey is one of the most popular content areas on its website and in other distribution channels. DANB recently started distributing the results through a press release to all of its stakeholders and to media all over the world. The results have been extremely positive.

“Sharing survey results is a great way to stay top of mind with your stakeholders as well as the media,” said Jean Iversen, DANB’s Manager of Communications and Public Relations.

“Distributing a press release over the wire helped us reach people who may have never heard of DANB but are considering a career in dental assisting. It has also given us exposure to media outside of the dental industry, such as career and business.”

To see a summary of DANB’s 2012 Salary Survey, visit www.danb.org.

About DANB

Founded in 1948, the Dental Assisting National Board, Inc. (DANB) is recognized by the American Dental Association as the national certification board for dental assistants. Passing DANB’s exams demonstrates a dental assistant’s competency in areas of importance to the health and safety of oral healthcare workers and patients alike. The National Commission for Certifying Agencies (NCCA), a commission of the Institute for Credentialing Excellence (ICE) responsible for accrediting certification programs, has evaluated DANB’s Certified Dental Assistant (CDA) and Certified Orthodontic Assistant (COA) certification exams and found that they meet NCCA’s accreditation standards. Currently, there are more than 35,000 DANB certificants nationwide holding nearly 37,000 DANB certifications.

ICE NEWS

ICE Announces 2013 Board of Directors

The Institute for Credentialing Excellence (ICE) recently announced Denise Fandel, MBA, CAE as board president for the 2013 term. Fandel is executive director of the National Athletic Trainers Association (NATA) Board of Certification (BOC).

“To follow in the footsteps of the great leaders of ICE’s past is an honor,” she said. “I am humbled by the support of my colleagues and look forward to working with the ICE board and staff in continuing the work to advance the credentialing industry.”

Fandel has served in her current position with NATA Board of Certification since 1997. She is a graduate of St. Cloud University, Minn., and received her Master’s Degree from the University of Nebraska at Omaha.

Fandel has a long history of volunteer service with. Most recently, she served on the NCCA Commission (2004-2010) serving as chair for three years. As a requirement of that position, she also served as the NCCA representative on the ICE Board of Directors. She has served on a variety of ICE committees, task forces and working groups during the past 14 years, including the NOCA Seminar/Workshop Committee; NCCA Standards Review Project’s Governance, Purpose and Resources Task Force; the NOCA International Committee and the NOCA Survey Task Force.

Other officers of the 2013 ICE Board of Directors include: President-elect Linda Lysoby, MS, MCHES, CAE (National Commission for Health Education Credentialing); Secretary/Treasurer Ronald G. Havlick (Operating Engineers Certification Program) and Immediate Past President Cary List, CFP, CA (Financial Planning Standards Council).

Elected board members include: Sustaining Member Linda Waters, PhD (Prometric); Joan Campbell, CAE (American Board of Multiple Specialties in Podiatry); and Claudia Zacharias (Board of Certification/Accreditation International).

The Public Member is Rebecca LeBuhn, MA (Citizen Advocacy Center) and Ex Officio Member is Denise Roosendaal, CAE (Institute for Credentialing Excellence).

“With President Fandel’s strong experience in credentialing and the superb leadership skills, I anticipate another successful year for ICE,” said ICE Executive Director Denise Roosendaal.

In addition to the ICE Board of Directors, the National Commission for Certifying Agencies (NCCA) announced the appointment of officers and members to the commission: Chair Donald Balasa, JD, MBA (American Association of Medical Assistants); Co-chair Chad Buckendahl, PhD (Alpine Testing Solutions, Inc.); Elected commissioners Michael Breining, JD (Breining Institute);

Ron Kruzel, CST, MA (National Board of Surgical Technology and Surgical Assisting); Darlene Leuschke (Commission on Para-optometric Certification of the American Optometric Association) and Todd Galati, MA (American Council on Exercise). NCCA Psychometric Appointees include Sandra Neustel, PhD (National Board of Examiners in Optometry); Timothy J. Muckle, PhD (National Board on Certification and Recertification of Nurse Anesthetists) and Brian Bontempo, PhD (Mountain Measurement). The public member is Mary Macomber (retired). The NCCA General Counsel member is Philip O'Neill (Jacobson Holman PLLC).

ICE would like to recognize the service and leadership of all outgoing board members, including Paul Grace, MS, CAE (National Board for Certification in Occupational Therapy) and Jan Wyatt, RN, PhD (Pediatric Nursing Certification Board). The NCCA commissioners would also like to recognize and honor outgoing commissioner Ida Darragh, CPM (North American Registry of Midwives) for her continuous dedication and hard work.

Proposed Bylaws Amendments: Open Comment Period – Dec. 3 – Jan. 18, 2013

ICE is considering changes to its governance structure and election of officers. These proposed changes were discussed at the Annual Business Meeting by ICE President (now immediate-past president) Cary List and again at the member focus group on Nov. 9 in Palm Springs, Calif.

ICE leadership has been moving towards the adoption of Policy Governance™ model (John Carver) concepts for the past several years. This model allows the board to focus on strategy and measurement while giving management the authority to oversee and be accountable for the operations.

Dr. Jim Henderson Honored With ICE Service Award

During the ICE 2012 Annual Educational Conference, ICE presented Dr. Jim Henderson, PhD, with the ICE Service Award, which recognizes an individual who has displayed exemplary service and commitment to the organization, who has been instrumental in facilitating the achievement of the organization's goals and who has demonstrated a history of volunteer service in ICE.

Henderson's commitment to the profession and ICE is nearly unmatched. His long list of volunteer positions speaks volumes about his reputation and character. He began his employment with Castle Worldwide in 1991, and in that year, he made a presentation at the NOCA conference in San Antonio. In the 21 years since then, he has worked at Castle and in ICE to improve professional certification.

Facebook Friends: View Pictures from the ICE 2012 Annual Educational Conference

Just under 500 ICE members and other credentialing professionals attended the ICE 2012 Annual Educational Conference, which was held Nov. 6-9 in sunny Palm Springs, Calif. Attendees represented diverse industries, including those in the arts, fitness, financial, healthcare, legal, transportation, manufacturing and hospitality sectors, as well as credentialing professionals across varying job families such as CEOs, certification program managers, psychometricians and marketing specialists. ICE posted several photo albums on its [Facebook page](#). Be sure to view the albums and tag your friends.