

Successful strategies for improving nurse certification rates

Nurses share how they boosted certification in their hospital.

By Patricia Kelly Rosier, MS, RN, ACNS-BC; Michelle Dupont, MSN, RN, CCRN, SCRNI; and Judybeth Crowell, MSN, RN, CRNI

MANY NURSES are aware of the benefits of American Nurses Credentialing Center (ANCC) specialty certification, but more of them should be encouraged to obtain it. Certification provides opportunities for knowledge validation and professional growth that positively impacts patients. The nursing research council at Berkshire Medical Center in Pittsfield, Massachusetts, wanted to help increase the number of certified nurses in the organization. Based on survey results that provided insight into nurse-perceived value of and barriers to certification, the council developed strategies to encourage and promote certification.

The study

The study, which was approved by our institutional review board, used the perceived value of certification and the barriers tools from McLaughlin's 2015 study.

The descriptive study design was developed to survey a convenience sample of RNs employed by the medical center. We sent email invitations, with a link to the survey, to all RNs. The survey included the perceived value of certification tool, which measures nurses' agreement with certification value statements on a Likert scale. Nurses also were asked to indicate if any of the items on a "barriers to certification" list would prevent them from certifying or recertifying. In addition, we asked for information about current and past certification. We analyzed data using descriptive statistics.

The survey response rate was 32% (273 RNs completed the survey). Agreement that a statement was of value (agreed or strongly agreed) exceeded 70% for all statements. The lowest ranking statement was "increases salary." Within the barriers to certification list, 56 respondents wrote in additional barriers, which were grouped into themes of



knowledge, compensation/cost, and time. (See *Values and barriers*.)

Strategies

We used the survey results to design strategies to increase certification rates. The leading values were intrinsic (for example, personal satisfaction), so they were more difficult for us to address. Several of the barriers cited weren't "true" barriers; for example, staff weren't aware of available assistance. Four of the top five barriers were addressed by increasing knowledge of resources. The fifth barrier, perceived lack of institutional support, couldn't be addressed by increasing knowledge; leadership had to make their support of certification more visible.

Existing resources. Barriers related to knowledge were the most frequent write-in responses, making it apparent that education about organizational benefits and resources was needed. To increase awareness of existing resources, we shared information each month about certification with links to various nursing organizations as well as benefits available through the hospital, such as tuition reimbursement, paid education days that can be applied to attend certification review, and continuing education courses. Specialty unit bulletin boards have been developed with resources specific to that area of practice.

Certification checklist. The survey results indicated that many RNs didn't know how to begin the certification process, so we developed a certification checklist. (Visit americannursetoday.com/?p=57466 to access a certification checklist.)

Study groups and mentors. Scheduling study groups is a challenge because of busy schedules, so we instituted study partners as an alternative. A mentor works with the study partners to provide support and guidance. In addition, the clinical development department offers a lending library of certification review books and is available to assist and guide nurses through the certification process.

Certification Day. During Certification Day, in addition to a central display, activities were available for all shifts and taken to the nursing units. We conducted interviews with experienced, respected certified nurses about their certification experience, and the local American Association of Critical-Care Nurses (AACN) chapter offered two scholarships to AACN's National Teaching Institute, which were awarded by lottery to direct care staff who were AACN members. In addition, the critical care unit nursing director encouraged nurses who were on maternity or medical leave and couldn't attend Certification Day to begin studying for the critical care RN certification exam, which resulted in a nurse obtaining certification.

Regular reminders. We strive to maintain aware-



Nurses rated the values of and barriers to certification.

Top 5 values of certification

1. Validates specialized knowledge
2. Provides personal satisfaction
3. Enhances feeling of personal accomplishment
4. Provides professional challenge
5. Indicates professional growth

Top 5 barriers to certification

1. Inadequate compensation for certification
2. Lack of institutional reward
3. Cost of the exam
4. No time for continuing education
5. Lack of institutional support

ness of certification with reminders, updates, and conversations. Each of the nursing councils now include certification as a regular meeting agenda item. During the meetings, nurses with various certifications are asked to describe the certification process and why certification is important to them. In our experience, we've found that peer-to-peer discussions are more effective than messages from leadership.

Contract negotiations. The barrier of inadequate compensation for certification has been referred to our collective bargaining unit for consideration during the next round of contract negotiations. We also took this concern to administration, suggesting that they propose an increase in compensation for certification.

Outcomes

Since conducting the study and the focused efforts around Certification Day, we've seen an increased interest in certification and requests for information. Compared to previous years, this year, several more nurses have successfully completed certification. Many study partners are actively preparing for certifications, and at least a dozen nurses are currently planning to take their certification exam. We anticipate that the increase in certification will continue. ★

The authors work at Berkshire Medical Center in Pittsfield, Massachusetts. Patricia Kelly Rosier is a surgical clinical nurse specialist, Michelle Dupont is a clinical educator, and Judybeth Crowell is a clinical manager.

Selected reference

McLaughlin A, Fetzter SJ. The perceived value of certification by Magnet® and non-Magnet nurses. *J Nurs Adm.* 2015;45(4):194-9.