

Importance of Certifications an Individual Term Paper

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Reasons Why Nurses Get Certified

After a registered nurse earns an undergraduate Bachelor of Science in Nursing BSN degree and begins acquiring essential work experience the demand for increased knowledge, paired with the want to provide the utmost best patient care in a specific specialty rises. Nursing certifications recognize those individuals “who demonstrate an advanced knowledge base, along with qualifications and skills within a particular specialty. Certification within nursing continues to advance, playing an essential part within the American Nurses Credentialing Center’s (ANCC’s) Magnet Recognition Program for excellence in nursing services.” (Fritter & Shimp, 2016, p. 8) Given today’s competitive work environment, specialty nursing certifications do not only demonstrate an advanced knowledge, they can be a defining factor in being chosen over other candidates for a competitive position with comparable work experience. In addition, attaining specialty certification may also facilitate an increase in salary or advancement to a preceptor position. Besides the competitive and monetary incentives that certifications offer, in this individual term paper I want to expand on nursing specific peer reviewed morbidity and mortality studies comparing nurses with a certification and those without on patient outcomes.

Specialty Nursing Certifications

Certification is defined by the American Board of Nursing Specialties (ABNS) “as the formal recognition of specialized skills, knowledge, and experience demonstrated by the achievement of standards identified by a nursing specialty to promote optimal health outcomes” (“ABNS,” 2014, para. 1). It’s imperative to note that specialty certification do “not include a legal scope of practice” (Houston, 2014, p. 299). To achieve professional certification “nurses must meet eligibility criteria that may include years and types of work experience, as well as

minimum educational levels, active nursing licenses, and successful completion of a nationally administered examination” (Houston, 2014, p. 300). Registered nurses historically obtained specialty certifications on voluntary basis, career advancement, monetary incentives or contingent with a job offer for a specific position i.e. flight nursing “An advanced certification to include at least one of the following must either be possessed prior to employment or within 1 year of employment. This advanced certification includes the Certified Emergency Nurse CEN, Certified Flight Registered Nurse CFRN, Certified Transport Registered Nurse CTRN or Critical Care Registered Nurse CCRN certification.” (“Penn Medicine Flight Nurse Job Posting,” 2017, para. 1). With personal nursing career goals being aligned with flight critical care transport, I have personally embarked on my certification acquisition. On January 1, 2016, I have successfully attained Certified Emergency Nurse CEN certification from Board of Certification for Emergency Nursing BCEN. (“BCEN CEN Certification,” 2002, para. 4) With CFRN and CTRN certification exams scheduled in May. In my opinion, the most important things that acquiring these certifications is going to offer me is personal growth and learning, critical thinking, good test taking strategy skills, perseverance and pursuit of excellence. Having obtained these certifications, I believe will give me an advantage over a candidate who is anticipating to hired first and having the flight program pay for these certifications. However, besides career opportunities and advancement is there any nursing specific peer reviewed morbidity and mortality studies comparing nurses with a certification and those without on patient outcomes?

Magnet Hospital Mortality Data and its Importance in Obtaining a Certification

In a 2011 study conducted by Deborah Kendall-Gallagher and colleagues, they have discovered that “a 10% increase in hospital proportion of baccalaureate and certified

baccalaureate staff nurses, respectively, decreased the odds of adjusted inpatient 30-day mortality by 6% and 2%.” (Kendall-Gallagher, Aiken, Sloane, & Cimiotti, 2011, p. 188). The researchers concluded that “nursing specialty certification is associated with better patient outcomes; effect on mortality and failure to rescue in general surgery patients is contingent upon baccalaureate education. Clinical relevance shows that investment in a baccalaureate-educated workforce and specialty certification has the potential to improve the quality of care.” (Kendall-Gallagher et al., 2011, p. 188). The significance of this research in accordance with ANCC’s Magnet Recognition Program for excellence in nursing services.

A subsequent 2013 study conducted by Matthew McHugh and colleagues discovered that “patients treated in Magnet hospitals had 14% lower odds of mortality (odds ratio 0.86; 95% confidence interval, 0.76–0.98; P=0.02) and 12% lower odds of failure-to-rescue (odds ratio 0.88; 95% confidence interval, 0.77–1.01; P=0.07) while controlling for nursing factors as well as hospital and patient differences.” (McHugh et al., 2013, p. 382). Given the research shown in these peer reviewed studies, specialty nursing certification with formal Bachelor of Science in Nursing BSN degree is decreasing mortality and improving patient outcomes. This is precisely the reason why specialty nursing certifications are playing an essential part within the ANCC’s Magnet Recognition Program.

Differing Studies on Patient Outcomes in Magnet and Non-Magnet Hospitals

A study conducted by Colleen Goode and colleagues showed very differing data and findings compared to the above two studies. Goode and colleagues demonstrated that “Non-Magnet hospitals had better patient outcomes than Magnet hospitals. Magnet hospitals had slightly better outcomes for pressure ulcers, but infections, postoperative sepsis, and postoperative metabolic derangement outcomes were worse in Magnet hospitals. Magnet

hospitals also had lower staffing numbers.” (Goode, Blegen, Park, Vaughn, & Spetz, 2011, p. 517). Goode and colleagues concluded that these outcomes were due to Magnet hospitals having less total staff and lower RN skill mixture. (Goode et al., 2011). With Magnet hospitals data demonstrating worse infections, postoperative sepsis, metabolic derangement, patient outcomes and having less total staff with lower RN skill mixture as compared to Non-Magnet hospitals is startling and not confluent with the above two studies. With a demand for increased credentials and experience criteria that Magnet hospitals require from a registered nurse to be hired such as having a BSN degree, specialty certifications, work experience etc. it’s not at all surprising that Magnet hospitals have less total staff and lower RN skill mixture. If requirements to obtain employment were not as stringent in Magnet hospital, then there would be better nurse patient ratios and less work demands from each nurse on the unit. Another study by Greta Krapohl and colleagues found that “although a link between certification and nurse sensitive outcomes was not established, the association between workplace empowerment and the proportion of certified nurses on a unit underscores the importance of organizational factors in the promotion of nursing certification.” (Krapohl, Manojlovich, Redman, & Zhang, 2010, p. 490). This study is interesting because it’s saying there is no correlation between certification and nurse sensitive outcomes, however workplace empowerment is important for organizational factors.

Conclusion summary

Specialty certifications may certainly give an applicant an edge in this competitive work environment if all other factors such as a BSN degree and work experience are comparable. Research by Schroeter and colleagues has demonstrated that “certification represents a commitment to the leading edge in health-care and professional standards and indicates to patients, employers, the public and professional licensing bodies that the certified nurse is

qualified, competent and current in a nursing specialty/area of practice.” (Schroeter, Byrne, Klink, Beier, & McAndrew, 2012, p. 36). Having a specialty certification certainly shows personal commitment to continuing education and staying abreast of emerging evidenced based practice EBP and commitment to nursing excellence per ANCC’s recommendations.

However, when it comes to having a specialty certification and patient outcomes the research is conflicting. There is research conducted by Deborah Kendall-Gallagher and colleagues demonstrating that certified baccalaureate staff nurses decreased the odds of adjusted inpatient 30-day mortality by 6% and 2%. (Kendall-Gallagher et al., 2011). Contrasting the above improved mortality study, research conducted by Goode and colleagues showed that Magnet hospitals staffed by certified BSN nurses demonstrated worse infections, postoperative sepsis, metabolic derangement, patient outcomes and having less total staff with lower RN skill mixture as compared to Non-Magnet hospitals. (Goode et al., 2011). Even with divergent research, I strongly believe that increased education and commitment to excellence in the long run will translate to better patient outcomes and improved morbidity and mortality statistics. Obtaining specialty certification shows that the individual nurse is a knowledge worker and is striving for continuing education and commitment to excellence, thus such efforts should be recognized and rewarded by the senior hospital staff and encouraged for the junior staff to undertake.

The skill set that a BSN nurse with specialty certifications brings to the team is evidence based decision making and peer reviewed nursing research to support innovative care models in the patient’s setting. Robust undergraduate nursing education, clinical exposure, work experience and specialty certifications enables to nurse to be a valuable team member!

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