

Certification in Nursing Education: Implications for Nurse Practitioner Faculty

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Abstract

Faculty selected to teach in programs that educate nurse practitioners (NPs) are often excellent clinicians. However, nurse practitioner faculties often have knowledge deficits in areas related to educational pedagogy, theory, and instructional and evaluation methodology. Nurse Practitioner (NP) faculty can develop capabilities as an educator both via formal education or self-study. Achievement of competency as an educator can then be documented by obtaining the Certified Nurse Educator credential offered by the National League for Nursing. This paper presents an overview of the certification program, suggestions for preparation and discusses benefits of holding this certification for the faculty member who teaches in graduate programs that prepare nurse practitioners.

Faculty selected to teach in programs that educate nurse practitioners (NPs) are often excellent clinicians. They may also have experience as outstanding preceptors and possess advanced clinical and/or research degrees that have prepared them as expert researchers, healthcare providers, or both. However, they often have no experience in classroom teaching or knowledge of curriculum development or assessment and measurement. These teachers' abilities to evaluate scholarly work using skills beyond what they learned from their own personal educational experience as students are often underdeveloped.

This is often because historically only programs in the discipline of education focus on the pedagogy of teaching and learning. A lack of knowledge about educational theory and effective teaching strategies can create significant knowledge deficits that hinder the NP faculty member's ability to effectively execute his or her academic teaching role. This then can threaten the quality of education NP students ultimately receive.

Some states have determined that this type of knowledge is a pre-requisite for teaching in nursing. As of 2011, at least six states require documented knowledge or evidence of formal course credit in the areas of adult education, teaching methodology, curriculum development, implementation and evaluation and student evaluation and assessment (Colorado, Minnesota, Mississippi, North Carolina, Utah, Wyoming) for faculty employment (Office of Program Policy Analysis and Government Accountability, 2007).

There are two major ways NP faculty can remedy this problem. The first is to take nurse education courses, optimally in a program which grants a nurse educator certificate to document this achievement. Courses in teaching strategies, learning theory, curriculum development, evaluation, clinical teaching and use of technology in teaching can prepare the novice NP educator with skills which foster growth in the role. Such courses will help him or her become a more effective teacher as well as thoughtfully participate in curriculum and other program discussions (Kohtz, et al., 2008).

Novice NP educators can also develop needed educator competencies through self-directed learning. Attending nursing conferences focused on the education of nurse practitioners such as the annual conference of the National Organization of Nurse Practitioner Faculty (NONPF) is an example. Many colleges and universities also provide educational programming opportunities as part of faculty development. In depth self-study is also possible through reading books and journal articles on nursing education. Preparation for the CNE

examination through reading of NLN identified resources (a sample of which is provided in Table 1) is also a potential mechanism to gain knowledge on topics essential for nurse educators.

Table 1: Selected Resources for Self Study for the Certified Nurse Educator Exam

- National League for Nursing (2011). *Certified nurse educator candidate handbook*. Available from www.nln.org/facultycertification/handbook/cne.pdf
- Godshall, M. (2009). *Certified nurse educator (CNE) review manual*. Wittman-Price, R. (Editor). New York, NY: Springer Publishing Company.
- CNE Exam Secrets Test Prep Team.(2011). *Certified nurse educator exam secrets study guide: CNE test review for the certified nurse educator examination*. Beaumont, TX: Mometrix Media LLC.
- McDonald M. (2007). *The nurse educator's guide to assessing learning outcomes*. (2nd ed.). New York, NY: Jones & Bartlett Publishers.
- Billings, D. & Halstead, J. (2008). *Teaching in nursing: A guide for faculty*. (3rd ed.). Philadelphia, PA: Saunders:Philadelphia,.
- Oermann, M. & Gaberson, K. B. (2009). *Evaluation and testing in nursing education*. (3rd ed.) New York, NY: Springer Publishing Company
- Gaberson, K. & Oermann, M. (2010). *Clinical teaching strategies in nursing*. (3rd ed). New York, NY: Springer Publishing Company.

The History of the Certified Nurse Educator Program

The National League for Nursing (NLN) developed the Certified Nurse Educator (CNE) program in 2005 with the mission to “recognize excellence in the advanced specialty role of the academic nurse educator” (NLN, 2012, p.2). The committee drafted the *Scope of Practice for Nurse Educators* (2005) with the intent to “describe Academic Nursing Education as a specialty area and an advanced nursing practice role” (NLN, 2012, p. 2).

This document provided specific terminology that defined the academic nurse educator’s practice and identified eight areas of essential competence. These competencies form the content outline for the CNE examination. The NLN (2012) currently identifies four main goals of the CNE certification program:

- 1) Distinguish academic nursing education as a specialty area of practice and an advanced nursing practice role within professional nursing.
- 2) Recognize the academic nurse educator’s specialized knowledge, skills, abilities and excellence in practice.
- 3) Strengthen the use of core competencies of nurse educator practice.
- 4) Contribute to nurse educators’ professional development (p. 2).

As of 2010, a total of 2,078 nurse educators have earned the CNE credential (McCumpsey, 2010). Certified Nurse Educators are present in all 50 states and Washington, D.C. (Ortelli, 2008). There are two options for meeting the eligibility criteria to sit for the CNE exam (see Table 2). The CNE examination is offered during specific testing cycles with a range of availability similar to other nursing certification exams.

Table 2: Eligibility Criteria for Certified Nurse Educator Examination

OPTION 1	OPTION 2
Current licensure as a Registered Nurse in the U.S. or U.S. territory	Current licensure as a Registered Nurse in the U.S. or U.S. territory
Masters or doctoral degree with a major emphasis in education OR A masters or doctoral degree that includes nine credit hours or more of graduate level education courses in areas such as curriculum development and evaluation, instructional design, principles of adult learning, assessment and measurement and evaluation, principles of teaching and learning and instructional technology	If masters or doctoral degree without emphasis in education OR formal graduate level courses in education
Two years or more of full-time employment in the academic faculty role (as defined by employed institution) within the last five years	Four or more years of full-time employment in the academic nurse faculty role within the past five years.

NLN, 2012

Discussion**Nurse Practitioner Faculty and the CNE Major Content Areas**

The CNE exam has six content areas:

1) Facilitation of learning; 2) Facilitation of learner development and socialization; 3) Use of assessment and evaluation strategies; 4) Participation in curriculum design and evaluation of program outcomes; 5) Pursuance of continuous quality improvement in the academic nurse educator role; 6) Engagement in scholarship, service, and leadership; 6a) Functioning as a change agent and leader; 6b) Engagement in the scholarship of teaching; and 6c) Functioning effectively within the institutional environment and academic community (NLN, 2012, p.5). Each has relevance to the competencies of the NP educator.

Content area 1: facilitate learning.

This content area comprises the largest percentage of the CNE exam at 25%. The specific competencies of this content area focus on application of evidence-based strategies to educate students. NP faculties apply the essentials of this content area throughout their curriculum, focusing on evidence-based practice and quality improvement (American Academy of Nurse Practitioners, 2010; Institutes of Medicine, 2003). Consequently, NP educators need to model strategies students can use to continuously evaluate their own clinical thinking and evaluation of research findings and other types of clinical evidence. While an NP faculty member may have been exposed to certain teaching methods during his or her own educational experience, the process of developing the appropriate methods based on curricular objectives or competencies are not skills taught in NP programs. Adult learners respond to a variety of learning styles and have varying needs. The NP educator must learn and apply teaching methods that best promote critical thinking and learner maturation.

Content area 2: facilitate learner development and socialization.

The second content area of the CNE examination is to facilitate learner development and socialization. This area pertains to competencies related to the fostering of cognitive, affective, and psychomotor learning and encouraging the professional development of learners (NLN, 2012). NP faculty must engage students in the development of their professional role. In addition, the National Organization of Nurse Practitioner Faculties (NONPF) (2006) has identified professional role development as a specific NP curricular content domain.

Content area 3: use assessment and evaluation strategies.

Nurse educators teaching at all levels of nursing education must rely on valid and reliable assessment and evaluation strategies to measure students' achievement of core curricular content and competencies. Professional programs are unique from other doctoral programs. In addition to earning a degree, graduates complete national certification exams within their population of focus. Consequently, educational preparation in these programs will continue to use the multiple-choice testing format for evaluation of knowledge-based competencies. This could potentially be a very challenging area for the unprepared NP educator, who needs to have a working knowledge of how to design test blueprints, write valid and reliable multiple choice questions, interpret examination performance statistics, and revise examination items correctly. This is also achieved through evaluation of performance in the clinical setting. Educators must have a thorough knowledge about safe and competent practice and should be able to apply professional standards during the clinical evaluation process. They must also be able to critically evaluate level-specific and program-specific outcomes and ensure evaluation methods allow students to demonstrate appropriate mastery of these outcomes.

Content area 4: participate in curriculum design and evaluation of program outcomes.

Nurse educators must be leaders in curriculum design and actively participate in program development, management, and evaluation; they must also demonstrate an ability to engage in continuous quality improvement to ensure that students meet professional practice standards (NLN, 2012; CCNE, 2009). This includes, developing an outcomes based curriculum that is congruent with the university/college mission and departmental goals centered on standards such as American Association of Colleges of Nursing Masters (2011) or Doctoral Essentials (2006) or National Organization of Nurse Practitioner Faculties Nurse Practitioner Core Competencies (2011).

Content area 5: pursue continuous quality improvement in the academic nurse role.

Content area five on the CNE examination assesses the educator's knowledge about ways to further the growth of his or her academic career and the need to pursue lifelong learning as the infrastructure to that pursuit (NLN, 2012). The concepts of lifelong learning and acquisition of new knowledge to promote professional development is certainly not foreign to NP educators.

As clinical experts who are board-certified nationally, continued clinical mastery is emphasized as a hallmark of maintaining NP competence and is a mandate for NP certification renewal. These requirements include continuing experience in providing care for patients as a practicing NP and completion of continuing education. Continuing education can either come from approved continuing education providers or graduate coursework at accredited universities. Other scholarly activities, such as publications/presentations and clinical preceptorship can also be used towards certification renewal.

The same is true for Certified Nurse Educators. Thus, gaining competence in nursing education is also essential to the success of NP faculty. The CNE must also demonstrate ongoing competence in the educator role through a combination of employment as an educator in the academic setting and completion of continuing education in the core competency areas (NLN, 2011). NP educators may view the maintenance of dual certification as both an NP and CNE as a difficult and time-consuming challenge. However, it is important to note that at least some of the professional development activities required for certification renewal can be applied to the renewal of both the CNE and NP credential. For example, the continuing education units (CEUs) earned from attending a professional development conference focused on NP education can partially fulfill CEU requirements for both CNE and NP recertification.

Content Area 6: Engage in Scholarship, Service, and Leadership***Part A: function as a change agent and leader.***

The first subsection of content area six is focused on functioning as a change agent and leader. Specifically, this pertains to the educator's ability to act as an exemplary faculty member and promote positive changes within and beyond his or her nursing program. Advocating for cultural sensitivity, bringing a creative perspective to the educator role, and evaluating the organizational effectiveness in nursing education are all aspects of this subsection (NLN, 2012). NP faculties are active participants in the nursing program, school or department of nursing, and university. NP faculty should be active leaders on the forefront of clinical practice; they should be publishing papers relevant to NP practice, curricular or practice models, or research in academic journals and textbooks (NTFQNE, 2008). Active participation in professional organizations such as NONPF (which focuses on NP education) is also an example.

This criterion of the CNE exam also emphasizes the importance of effective mentoring. Mentoring is critical for new faculty and NP faculty with lesser experience, and is recommended by the NLN (2006) in their position statement. This is a worthy goal and frequently touted as an important component of orientation programs for new faculty (Billings & Kowalski, 2008; Hawkins & Fontenot, 2009). Unfortunately, the literature is scarce on how often this actually occurs in the real world for novice faculty members in NP programs.

Part B: engage in the scholarship of teaching.

Bender and Gray (1999) describe the scholarship of teaching as reciprocal. NP educators develop the ability to use feedback from students to improve their approaches to content delivery and constantly work to better the methods they use to ensure student attainment of knowledge. The scholarship of teaching allows educators to test new teaching styles and provides evidence for unique approaches to instruction. It is one way in which NP educators improve the quality of their instruction and their institution's NP program. An essential mandate of engaging in the scholarship of teaching is keeping abreast on the current teaching-learning literature (Spath, 2007). Just as nurse clinicians must maintain currency on new and emerging practice paradigms, nurse educators cannot possibly maintain their competency in the educator role if they are not perpetually consulting the most up-to-date data about effective teaching. Preparing for the CNE exam through either formal course work or self-study and developing a strong foundational knowledge of the teaching-learning literature can be a basis on which to begin building the scholarship of teaching. In addition, the integration of current clinical practice and teaching expertise is the ideal for NP educators and a scholarly approach to evaluating this contribution to the realm of teaching is needed (Glanville & Houde, 2004).

Part C: functioning effectively within the institutional environment and academic community.

In order for NP faculties to truly have competency in the educator role, they must be actively involved in the governance of their NP program, department, school or college of nursing, and institution. In institutions of higher learning, this is accomplished through NP educators' service on various committees related to admission, progression, and graduation of NP students. NP educators should establish partnerships with key leaders within their institution in order to demonstrate the nursing program's commitment and contribution to the institution's overall mission, institutional environment and academic community.

Specific examples of how NP faculties facilitate learning in accordance with the content listed under this competency are found within Criterion V in the *Criteria for Evaluation of Nurse Practitioner Programs* (NTFQNE, 2008). Table 3 provides examples of specific NTFQNE (2008) criteria and their congruence with this content area of the CNE examination.

Table 3. Examples of Congruency between NTQFPNE Criteria and CNE Content Area 6.C*

<u>NTQFNPE Section</u>	<u>Example(s)</u>
I, III, V	Identifies the need for teaching strategies that will prepare students to not only provide safe and cost effective care to patients, but successfully pass the constantly updated NP certification examination as well.
II	Mandates that NP faculty have a direct role in student admission, progression, and graduation.
III.A	Addresses leadership of NP faculty in promoting change
III.B	Addresses the requirement that NP faculty prepares students for their professional NP role through a clear didactic and clinical curriculum consistent with the NP role
III.C(1)	Discusses the necessity of NP faculty to ensure program and professional standards are met through student completion of rigorous coursework and passing of national board certification examination(s).
IV.B, IV.B(3)	Addresses the importance and necessity of clinical resources that support the NP educational experience.
I.B, V.A(3)	Addresses the importance of leadership within the NP program.
V.A(3), VI.A(2).	Mandates at a minimum annual evaluation of each course within the NP curriculum (section [VI.A(1)]).

*NTFQNP, 2008

Summary and Conclusions

Professional growth is essential for NP educators. While NP competence is often defined through a clinical focus, the competency of NP faculties extends beyond this. NPs who work in educational settings need to also grow in their role as educators. One way to effectively demonstrate competence and ongoing growth in this role is through acquiring the knowledge and experience required to become a Certified Nurse Educator. As demonstrated in this article, the essential elements of the certification program include educational competencies that are important for nurse educators that teach within masters and doctoral NP programs as well.

In conclusion, obtaining the CNE credential is an ideal professional goal for all academic nurse educators. The

knowledge acquisition required in preparation of attaining the CNE credential provides educators an excellent opportunity to develop their knowledge base in education and demonstrate their commitment to quality NP education to their students, colleagues, and the profession.

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