

**Continued Professional Certification Program (CPC)  
July 17, 2014**

The purpose of this document is to describe the association between the CPC Core Modules and the CPC Examination and to outline the accreditation standards that address the evaluation and recognition of the Core Modules.

**1. The Association Between the CPC Core Modules and the CPC Examination**

**A. Overview**

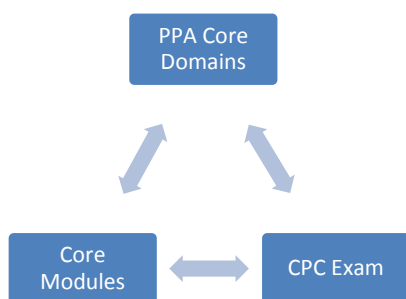
In 2008, the NBCRNA conducted a Professional Practice Analysis (PPA), targeting all NBCRNA-Certified Registered Nurse Anesthetists (CRNAs) who had been or who were eligible for recertification. The PPA was focused on the practice of nurse anesthesia at a level that is more advanced than that expected for initial certification. NBCRNA's practice analysis study was an integral part of ensuring that its CPC Program has practice-related validity and that the aspects of nurse anesthesia addressed by the CPC Program are essential, regardless of practice setting, patients, and conditions.

The content areas were identified through a very deliberate process that began with the PPA and included involvement of committees and subject matter experts. The CPC Core Module and CPC Examination components were both established using the same core domains developed from the 2008 PPA: airway management, applied clinical pharmacology, human physiology and pathophysiology, and anesthesia equipment and technology.

The CPC Module subcommittee developed the instructional goals and objectives as part of the educational requirement using the four core domains identified from the PPA. The instructional goals, instructional objectives, and performance objectives were developed using standard and well-established processes of instructional design, which included the use of subject matter experts and consultants with expertise in instructional design to create blueprints for module development. Additionally, the core domains identified through the 2008 PPA were cross-walked to the instructional goals, instructional objectives, and performance objectives to ensure consistency in terms of content validity.

The CPC Examination subcommittee developed the test blueprint (also known as the content outline) using the same four core domains used by the CPC Module subcommittee: airway management, applied clinical pharmacology, human physiology and pathophysiology, and anesthesia equipment and technology. The examination content will be developed and referenced from standard anesthesia texts.

One of the strengths of the CPC Program is that the four Core Modules are linked to the content outline of the CPC Examination. Completion of the Core Modules as a requirement of the CPC Program represents an opportunity to accelerate the adoption of evolving evidence-based knowledge (evidence that informs practice) from the literature and to reduce the historical lag time that has existed between the discovery of new information and the implementation of that knowledge at the patient level. The diagram below relates how the CPC Core Module and Examination components are directly linked to the PPA.



### B. A Rationale for the Relationship Between the Core Modules and the Examination and an Example

From a practical perspective, the Core Modules address new information (evidence that informs practice) that may not yet be found in standard texts. The assessment portion of the Core Modules is linked to specific content in the Core Module instructional program. The nurse anesthetist will have an opportunity to assess their level of understanding of this new information well before it is reflected in the CPC Examination. It is likely, however, that there also will be review information embedded in the instructional program of the Core Modules that will be found in standard texts and therefore will have a more direct link to the CPC Examination.

The modules provide a structured approach for nurse anesthetists to stay abreast of current evidence that ultimately complements the content of the CPC Examination. Due to the slow and deliberative examination development process, it will take time for new evidence to translate into standard texts, and to be available to be used to develop certification examinations. The Core Modules provide the nurse anesthetist with a mechanism to become familiar with new evidence that informs their immediate practice, and provides them with a preliminary and ongoing exposure to content that will likely move into standard texts within 5 years and subsequently likely present on the CPC Examination.

**Example:** An example of how the Core Modules and CPC Examination are related is presented below: Airway Fire (Performance Objective 1.3.1.2): There are relatively new recommendations from the Anesthesia Patient Safety Foundation (APSF) on the topic of surgical fire safety. Because these recommendations were developed within the 5 years prior to a Core Module release date, developers of a Core Module that includes Airway Fire would be expected to address these new recommendations in their educational program. By 2020, the new content on surgical fire safety would most likely be found in standard texts and the content may be included in the CPC Examination.

Anesthesia practice is complex and the CPC Program has been designed to allow a variety of approaches to learning and assessment. The complementary nature of the Core Modules and CPC Examination is one example of the multimodal nature of the CPC Program.

### 2. Accreditation Standards that Address the Evaluation and Recognition of the Core Modules

As the credentialing organization, NBCRNA must provide oversight of the CPC Program requirements because they are the basis for awarding ongoing certification. The process includes the evaluation and recognition of each CE vendor Core Module submission. The rationale for this oversight is defined by established standards of our accrediting bodies, the National Commission for Certifying Agencies (NCCA)

and the American Board for Specialty Nursing Certification (ABSNC). The standards that speak to this required oversight are noted below. Specific language within the standards germane to evaluation and recognition of the core models is highlighted in yellow for emphasis.

#### A. NCCA Standards

1. NCCA Standard 19: The certification program must require periodic recertification and establish, publish, apply, and periodically review policies and procedures for recertification.
  - i. The goals of recertification can differ for different organizations. Examples might include: to assess core knowledge and skills; to assess knowledge and skills in specific areas of practice; to encourage continued professional development; to ensure maintenance of competence; to promote lifelong learning; etc.
  - ii. An organization's recertification policy should clearly state the purpose of recertification.
2. NCCA Standard 20: The certification program must demonstrate that its recertification requirements measure or enhance the continued competence of certificants.
  - i. If the purpose is to enhance continued competence of certificants, then the certification program must demonstrate how the policy contributes to professional development of the individual certificant. Documentation must include the applicant's rationale for how the method(s) supports the professional development and enhances the competence of the certificant (e.g. how an enhancement method is related to an individual certificant's needs assessment; how the applicant evaluates the quality and relevance of the competency enhancement methods; whether the enhancement method includes a mechanism, such as a post-test, to assess whether certificant knowledge and/or practical skills have been enhanced.)

#### B. ABSNC Standards

1. Standard 3 on Organizational Autonomy: The certifying organization must be sufficiently independent from the specialty membership association to ensure integrity of the certification process, to maintain clear lines of accountability, and to prevent undue influence on the part of vested interests. All decisions relating to certification are the sole responsibility of the certifying organization not subject to approval by any other entity.
2. Standard 13: Recertification and Continuing Competence: The certifying organization has a recertification program in place that requires certificants to maintain current knowledge and to provide documentation showing how competence in the specialty is maintained and/or measured over time.
  - i. The certifying organization has a recertification program in place that requires certificants to demonstrate those activities that support the maintenance, measurement and/or enhancement of knowledge and continuing competence in the nursing specialty.
  - ii. Provide documentation showing how the recertification or continuing certification program requirements contribute to maintaining current knowledge and competence

in the specialty (e.g., practice analysis, credible providers of continuing education in nursing such as hospitals or other healthcare organizations, research). Provide a description of how the recertification program protects the public and population in which the certificants serve.

**C. NBCRNA Evaluation and Recognition Process**

In order to comply with NCCA and ABSNC standards, the NBCRNA process for the evaluation and recognition of the Core Modules will include, but is not limited to, review of the following information submitted by the CE vendor:

1. A crosswalk showing how the module content covers the NBCRNA established instructional goals, instructional objectives, and performance objectives.
2. A description of the process for providing evidence of content validity.
3. Examples of how the NBCRNA instructional goals, instructional objectives, and performance objectives were coded to the assessment.
4. Various assessment reports, such as reliability of the assessment, process used to review item statistics for the assessment, and other.