Increasing the Number of Faculty With CNE® Certification: A Statewide Initiative

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Abstract

This article describes outcomes of a statewide initiative to increase the number of faculty with the National League for Nursing's Certified Nurse Educator (CNE®) credential. After offering CNE preparation workshops and creating a certification award, data were collected on perceived workshop effectiveness, readiness to test, certification pass rates, and characteristics of award recipients. The number of certified faculty increased by 92.3 percent, representing 24 of 28 nursing programs. Maryland faculty were awarded $625,000 through the Academic Nurse Educator Certification award.

KEY WORDS Academic Educator Certification – Advanced Certification – Credentialing – Credentialing Research – Nursing Education

In the early 2000s, the National League for Nursing (NLN) established nursing education as a specialty, articulating evidence-based competencies for the academic nurse educator role. The NLN subsequently developed a certification exam to provide external validation of specialized knowledge and skills (Poindexter et al., 2019). However, certification is a voluntary process with motivators and barriers for pursuit. Intrinsic motivators include personal accomplishment and empowerment, validation of knowledge, and job satisfaction; extrinsic rewards include greater earning potential and better job opportunities (Barbé & Kimble, 2018). Lindell et al. (2020) noted that despite a favorable view of certification, some faculty still needed extrinsic motivation, including recognition, institutional support, and financial incentives. Documented barriers to pursuing certification include lack of time because of academic workload and costs (Barbé & Kimble, 2018), uncertainty about eligibility, personal preparation burden, test anxiety, lack of financial reimbursement, and the professional development required to maintain the credential (Lindell et al., 2020).

Little is known about the variables associated with first-time success on the Certified Nurse Educator (CNE®) examination. Ortelli (2016) found a relationship between full-time teaching experience and first-time success exam among nearly 2,700 educators, with each year of experience leading to a 1.05 greater chance of passing. In a study of 390 first-time unsuccessful attempts, Lundeen (2018) found a relationship between highest degree and exam success, underscoring the role that faculty development, experience, and doctoral degree completion play in successful first-time CNE examination results. Strategies facilitating first-time exam success include creating timelines, formal direction from nursing education leadership, and personal faculty investment. Taking a review course also promoted success as it provided focused study on exam content and test-taking tips to help reduce test anxiety (Garrison et al., 2018).

CNE certification is a mark of excellence that demonstrates expertise in the role of educator. This article describes the development of the Academic Nurse Educator Certification (ANEC) program, an initiative to grow the number of nurse faculty holding the CNE credential in Maryland, and reports outcome data for 2018 to 2021. Institutional review board approval was not needed for this exempt project. The ANEC program was begun in 2018 to increase the number of full-time nurse faculty with the CNE credential.

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STATE RECOGNITION OF TEACHING EXCELLENCE

In 1986, the Maryland Health Services Cost Review Commission implemented programs to address cyclical nursing shortages. The Nurse Support Program II (NSP II) was established in May 2005 to increase Maryland's academic capacity to educate nurses (Code of Maryland, Education Article § 11-405, 2016). The Maryland Higher Education Commission administers the program with institutional grants and faculty-focused initiatives.

In 2014, leaders of Maryland's 28 nursing programs and NSP II staff set a statewide goal to double the number of faculty holding the CNE credential. Initially, several schools were given funding to host NLN CNE preparation workshops. Results were disappointing, with limited attendance and few faculty earning the CNE credential. Satisfaction with the workshops was mixed because of variability in presenters and workshop oversight between schools.

In spring 2017, NSP II staff met with the Maryland Council of Deans and Directors of Nursing Programs for guidance on future CNE workshops. The group agreed unanimously that the CNE was a valuable and respected credential, that increasing the statewide percentage of CNE-certified faculty was a worthy goal, and that a centralized NSP II staff-managed process for future workshops would improve outcomes. NSP II staff forged a relationship with the NLN to develop a contract for personalized delivery of workshops in Maryland. NLN staff arranged for the speaker, and NSP II staff recruited attendees, managed logistics, and tracked participants.

From January 2018 to April 2021, 10 workshops were held at three different Maryland locations and virtually, with a total of 367 participants. All workshops were presented in person or through a virtual platform hosted by the NLN with a nationally recognized leader and a focus on the NLN nurse educator competencies (NLN, 2020). Sessions were limited to 40 participants who pledged to take the certification examination. At the conclusion of each workshop, participants were sent an 11-item, anonymous, online survey. The majority of the participants had not previously attempted the CNE exam and were full-time faculty at community colleges and universities. Satisfaction with the workshop speaker and confidence for taking the CNE exam were high.

In spring 2019, the NSP II staff presented preliminary data about workshop attendance and exam completion to the Maryland Council of Deans and Directors of Nursing Programs. It was reported that more than 60 percent of attendees had not attempted the CNE exam despite pledging to do so within 6 to 12 months of the workshop. Reasons given were the expense of the examination and the need for future professional development to maintain the credential. Although deans and directors valued the credential, recognition or financial incentives were inconsistent.

Discussion led to development of the ANEC award to recognize faculty who achieved or renewed the CNE. The award of $5,000 could be expended over a period of up to five years for allowable expenses, including costs of certification preparation, registration for the examination, professional development, and continuing education to maintain credentials (NSP II, 2020). A nomination process was developed wherein candidates submitted a copy of their CNE examination score sheet or certificate, RN license, a paragraph describing how they prepared for the CNE exam, and a short letter of nomination from their program dean/chair/director.

OUTCOMES

Since centralization of the CNE workshop using the same presenter and inception of the ANEC award, 88 faculty achieved the CNE credential for the first time and 37 renewed the credential, for a total of 125 full-time faculty. Maryland's CNE pass rate was 87.5 percent, compared to the national pass rate of 72 percent (L. Simmons, personal communication, March 30, 2020). All 125 CNE-certified faculty from 24 of the 28 nursing programs in Maryland received the ANEC award, totaling $625,000. The diversity of faculty, inclusive of ethnic, racial, and gender underrepresented groups, was 22 out of 125 faculty (17.6 percent). NSP II provided a letter of award recognition, delivered $5,000 to each institution in the name of the awarded faculty, and a CNE honor cord for faculty's academic regalia.

Maryland's initiative to recognize excellence in teaching is evidence of outstanding collaboration among educators and state policy makers. This forward-thinking and exceptional leadership was recently recognized by the NLN, with Maryland the first state to develop an award to recognize faculty and provide financial support for achieving and maintaining the CNE credential (L. Simmons, personal communication, March 30, 2020). Using a multipronged approach, appealing to intrinsic and extrinsic motivators, and being responsive to feedback have been foundational to the program's success. The CNE workshop provides focused study, reduces anxiety, and increases confidence in taking the certification exam. Financial reward and public recognition for achieving certification address the costs of testing and ongoing professional development activities.

Maryland faculty now test at twice the rate of other states and are projected to reach and exceed the goal of doubling the number of faculty with certification. There has been a 92.3 percent increase from a baseline of 65 educators with the CNE to the current number of 125. Though there was 17.6 percent diversity among this group, that finding is inconsistent with CNE workshop attendance, where 53 percent of attendees were from underrepresented groups. Several of these faculty had attended the preparatory workshops more than once; reasons for this finding are not known, and further investigation is warranted so that appropriate strategies can be implemented.

RECOMMENDATIONS FOR IMPROVEMENT

Suggested program improvements include: 1) standardizing all aspects of CNE preparatory workshops through centralized management of logistics, using the same presenter, and maintaining a virtual delivery option to promote attendance and participant satisfaction; 2) encouraging schools to support faculty preparation for the CNE exam through workload release and reimbursement for practice tests and exam registration to reduce concerns about time and costs of preparation; 3) and developing a system of peer support using CNE-certified faculty as mentors to improve the certification exam completion rate.

New statewide goals for 2025 have been set as follows: 1) at least 50 percent, or 300 of the full-time nurse faculty, will hold the CNE credential, and 2) CNE certification among underrepresented groups will mirror preparatory workshop attendance. To reach these goals, NSP II will continue to partner with the NLN to host two workshops annually, presented by the same nationally recognized expert, in addition to making the suggested program improvements.

Ongoing research is needed to uncover factors associated with CNE examination success, for example, average study time and elapsed time from preparatory workshop to examination; granting of workload release to prepare; use of study groups, timelines, and other strategies; and whether these factors are different for underrepresented groups. As part of NSP II annual and five-year program evaluation, continued tracking of CNE workshop participant satisfaction,

certification testing and pass rates, and characteristics of award recipients will assist in understanding the impact of our initiatives on preparation and first-time success. Longitudinal research is needed to study the impact of the ANEC program on faculty satisfaction with and retention in an educator role and renewal of CNE certification. These outcomes can inform nursing education research, improve nurse education and delivery of patient care, and provide support for the academic nurse educator as an advanced practice role.

CONCLUSION

NSP II is a responsive, stakeholder-guided program that uses effective methods to increase the number of CNEs across all nursing education programs. Maryland's initiatives to create a culture that values and rewards the contributions of academic nurse educators can serve as a model for other states to stimulate workforce development opportunities and as part of the solution to the nurse faculty shortage.

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