

Nurse Educator Certification: Overview and Evaluation of the Canadian Association of Schools of Nursing Program

Karin Page-Cuttrara

School of Nursing, York University, kcuttrara@yorku.ca

Patricia Bradley

School of Nursing, York University, bradleyp@yorku.ca

Cynthia Baker

Canadian Association of Schools of Nursing, cbaker@casn.ca

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Introduction

For nurses, the transition from direct nursing practice roles to academe and other education-focused positions can be challenging. Often, nurses in Canada who move into an educator role have relied on learning through experience and exposure, mentorship (if they were able to identify and work with a qualified mentor), and immersion in available literature or U.S.-based nurse educator certification resources. Nurses in Canada who have the drive and commitment to teach nursing students or to support the continuing professional development of practising nurses have faced a lack of formal preparation and support.

In Canada, formal programming to assist in the professional development of competencies for academic nurse educators is a relatively new but an essential undertaking. The Canadian Association of Schools of Nursing (CASN) has spearheaded and fostered the growth of an accessible cadre of educational programming, housed by the Canadian Nurse Educator Institute (CNEI), and built on relevant national competencies that are foundational to nursing education. Program evaluation to make determinations about the quality of a program, and its effectiveness in meeting its outcomes, is essential (Oermann et al., 2022).

This article shares an analysis of program evaluation data from the CASN Canadian Nurse Educator Certification Program and summarizes its current value to nurse educators, as identified by program participants. While every module in this program has received feedback on the delivery and content of each of its offerings, an analysis of the broader program evaluation data was needed to further understand the perceptions and potential effects of certification programs on the practice of nurse educators in Canada.

Overview of Certification Programs and Literature

Certification in nursing is a formal validation process by which an organization certifies that a nurse has demonstrated the knowledge, skills, and abilities relating to defined professional competencies, typically through an examination or other rigorous approval criteria (American Nurses Credentialing Center, 2022; CNEI, 2022; Chappell et al., 2020). Certification, as a path to formal credentialing, began in Canada in 1991 through the Canadian Nurses Association (CNA, 2022) to recognize excellence in specialty nursing practice areas.

Recognition of excellence in academic nurse educator practice has been established within the last two decades, most prominently by the National League for Nursing (NLN) in the United States. While various preparation products are available to candidates who plan to write the U.S. nurse educator certification exam, there is no national program that supports preparation of nurse educators. Eligibility for registered nurse certification and for sitting the NLN exam includes either a graduate degree with a major emphasis on nursing education or a post-master's certificate in nursing education, or a graduate degree with recent employment in an academic program (Oermann et al., 2022). The pass rate for the U.S. nurse educator certification exam was 69% in 2020 (NLN, 2022).

There is a paucity of literature on programs that prepare academic nurse educators for teaching practice and that support professional development as an educator, likely because most formal preparation is often housed in degree or certificate programs that are reviewed using institutional cyclical reviews or accreditation processes. A recent scoping review of North American nursing certification literature showed that few studies provided actionable information on the link between certification and nursing practice outcomes and that the studies were often

missing important data that made it difficult to interpret the benefits of certification (Chappell et al., 2020).

However, there are several reports of organized initiatives that describe focused preparatory activities for nurse educators. A cohort model (Basley et al., 2021) has been used by academics to pursue professional development and share learning resources. One school of nursing examined outcomes of an educator certificate program, which included practicum reflections on nurse educator competencies, and indicated the benefits of access with online delivery and flexible course sequencing (Bonnell & Tarnow, 2015). In another article, a statewide initiative involving 10 nurse educator competency-focused preparatory workshops reported an increase in faculty certifications (Daw et al., 2022). The evaluation of this particular initiative suggested that standardising aspects of faculty preparation through centralized management, consistent presenters, and a virtual delivery option would promote attendance and satisfaction.

Background and History of the CCNE

Beginning in 2013, CASN recognized a common gap in the preparation of academic nurse educators in provinces and territories across Canada and a need for programming that fit CASN's organizational mandate for the promotion of excellence in nursing education. Preceding the current format and the existing CNEI supports, a 10-week session was initially offered that included essential knowledge and content for the academic nurse educator. Topics such as philosophical and theoretical foundations of nursing education, curricula, and teaching strategies were compressed into a single comprehensive course and associated with general competencies that related to teaching and learning in the Canadian context. An exam allowed participants to demonstrate their understanding of the course content.

At the same time, to support this national educational initiative, CASN began to consult more widely with academic nurse educators across the country to develop clearer nurse educator competencies that were fully reflective of the scope of the role across all provinces and territories. Consultation occurred through experts and at an annual general meeting.

Professional certification of nurse educators validates the achievement of specific competencies as a mark of excellence. The CASN began to offer its formally structured programming to support nurse educators in 2015, with an initial focus on preparing nursing faculty who teach across a variety of programs in college and university settings. This current, formal program, which has not been significantly revised since its introduction, is based on the nurse educator competencies that were developed in consultation with educators across Canada. Twenty-seven competencies are incorporated into modules to address broad indicators for nursing education excellence: facilitation of learning; design of programs, curricula, and courses; the conduct of formative and summative evaluation; and the scholarship of teaching.

Overview of Program Structure

The CASN program comprises three modules that fully address the national nurse educator competencies: Teaching-Learning Philosophies and Theories; Curriculum and Design; and Teaching-Learning Strategies. Foundational theoretical knowledge from the literature, current educational practices and conventions, and traditional and trending teaching-learning strategies that may facilitate educational practices are covered in the online modular delivery. Concepts related to scholarship, diversity, interprofessional education, leadership, and trends in nursing education are embedded across the modules' content.

The requirements for each of the three modules include participation in live webinars and weekly online discussions, submission of an electronic portfolio, and successful completion of a final exam, which contribute to the acquisition and consolidation of knowledge. The modules target the national competency indicators for academic nurse educators. Thus, the overall design of the program is to create an opportunity for program participants to gain essential preparation that will enable them to demonstrate national competencies as nurse educators. Enrollment in the modules is typically voluntary and paid for by the participants for personal and professional development. In its current module format, the program has been offered for 6 years. To date, approximately 500 nurse educators have participated in at least one module.

A national certification exam that assesses academic nurse educators' integration of the competencies was offered for the first time in 2016. Eligibility for registered nurses to sit the certification exam includes either successful completion of the three CASN modules or a graduate degree with recent teaching experience and professional development in nursing education. Successful candidates receive the designation of a Canadian Certified Nurse Educator (CCNE), with its associated credentials. While this national certification exam is completely separate and independent of the modules, both target the national competencies for nurse educators. Many participants who have completed all three modules have successfully sat this online, proctored national certification exam and, as of December 2021, were among the 235 who have been awarded the CCNE credential. The current pass rate for this exam is 96% (J. Pearce Lamothe, personal communication, April 7, 2022).

Program Evaluation Strategy and Methods

The CASN has sought feedback on this innovative national program approach for fostering the development of academic nurse educators. An evaluation of the program's outcomes in terms of its influence on the delivery of nursing education is difficult; how nurse educators, who practise in very diverse settings, actually apply new knowledge or change their practice to affect outcomes and student learning can be a challenge to measure. Therefore, in addition to gathering some general demographic information, the perceived value of certification by these nurse educators was assessed as a general outcome. Evaluation of the CCNE program participants' perspectives on the value of module learnings in terms of the academic practice that occurred, using the Perceived Value of Certification Tool for the Nurse Educator (PVCT-NE) (Barbé, 2015; Competency and Credentialing Institute Research Foundation [CCI], 2021), with permission.

Barbé's (2015) PVCT-NE had been adapted from an instrument designed for evaluating perceptions of certification in perioperative nurses in the U.S. (CCI, 2021; Gaberson et al., 2003). The PVCT-NE adapted by Barbé (2015) has demonstrated reliability and has been previously used to survey nurse educators. This adapted tool includes 18 value statements (12 intrinsic or internally related values and 6 extrinsic or externally related values), each rated on a 4-point Likert scale (strongly agree = 4, agree = 3, disagree = 2, strongly disagree = 1) with possible scores ranging from 18 to 72.

The PVCT-NE (Barbé, 2015; CCI, 2021) that comprises value statements was selected for its general alignment of these statements with the Canadian nurse educator competencies. For instance, competence in one's alignment of "personal teaching and learning philosophy with academic perspectives" may link to the value statement relating to "personal satisfaction" and others. In addition to this tool, text boxes were included by CASN in the general survey to provide

an opportunity for respondents to further comment on their valuing of the certification process and credentialling in nursing education.

The CCNE program evaluation was conducted by CASN in 2021 to provide information on the perception of certification for ongoing review purposes. The online survey link was sent via email, followed by a reminder, to 353 Canadian nurse educators who had either participated in the CCNE modules or who had obtained certification (i.e., through an exemption) by the date of the survey. All original responses to the survey were anonymous. From the data obtained in this routine program evaluation survey, a secondary analysis was subsequently conducted to gain further understanding of the program and its users. An exemption from ethics review for this additional analysis was confirmed by the York University Research Ethics Board.

Results

There was a 30.6% response rate ($n = 108$) to the program evaluation survey. Descriptive statistics, used to characterize the sample, showed that the average age of respondents was 46.8 years (of 103 who responded to this question). The educational preparation of participants who responded ranged from the baccalaureate level (12.9%) to a master's degree (77.8%) to PhD-prepared faculty (9.3%). Not all respondents had nursing-related degrees but were involved in nursing education in their work positions. Years of education experience ranged from none to over 15 years, with most respondents reporting 6 to 10 years of teaching experience.

The internal consistency of the PVCT-NE (Barbé, 2015; CCI, 2021) instrument was measured using inter-item correlations and Cronbach's alpha. For the total 18-item scale, the Cronbach's alpha was .92. The Cronbach's alpha for the 12-item intrinsic subscale was .93 and the 6-item extrinsic subscale was .83. This supported the reliability of the instrument, as a .70 or greater Cronbach's alpha is considered acceptable (Nunnally, 1978).

Table 1 shows the data for each value statement; responses to most of the intrinsic value statements generally showed high agreement. The lowest percentages of agreement within the intrinsic statements related to "indicates level of educator competence," and "enhances level of professional autonomy." The total mean perception score was 54.5 ($SD = 10.75$) for all value statements. On average, respondents scored the intrinsic value statements higher than the extrinsic statements.

Table 1

Canadian Nurse Educator Agreement with PCVT-NE Value Statements (n = 108)

Survey items	Mean	SD	% Agreement
Intrinsic items			
Enhances feeling of personal accomplishment	3.54	.62	98.2
Provides personal satisfaction	3.52	.62	98.2
Validates specialized knowledge	3.41	.75	93.4
Indicates professional growth	3.56	.57	99.1
Indicates attainment of a practice standard	3.30	.92	89.8
Provides evidence of professional commitment	3.54	.57	99.1

Provides professional challenge	3.31	.72	91.7
Enhances professional credibility	3.36	.83	88.9
Enhances personal confidence in the academic role*	3.29	.85	85.2
Indicates level of educator competence*	3.01	1.02	76.8
Provides evidence of accountability	3.37	.66	92.6
Enhances professional autonomy	2.74	1.13	63.9
Extrinsic items			
Increases marketability	2.85	1.20	77.8
Promotes recognition from peers	2.82	1.05	74.1
Promotes recognition from other health professionals	2.31	1.24	50.0
Promotes recognition from employers	2.79	1.02	70.0
Increases consumer confidence	2.33	1.28	54.6
Increases salary	1.45	.87	9.6

Note. *SD* = standard deviation. Original source: Competency and Credentialing Institute Research Foundation, 2021; used with permission; *Adapted by Barbé (2015) and used with permission.

In addition, there were small significant ($p < .05$) negative Pearson correlations with years of teaching for “enhances personal confidence in the academic role” ($r = -.2, p = .04$); “promotes recognition from employers” ($r = -.23, p = .015$); and “increases consumer confidence” ($r = -.20, p = .04$).

Open comments were reviewed from 46 anonymous respondents in the context of valuing the certification process in the Canadian context. Positive comments such as “enhanced my teaching,” “excellent addition,” and “[providing] professional development is vital in remaining accountable to our profession” were frequent.

Discussion and Implications for Certification of Nurse Educators

Based on the analysis of results, there is evidence that nurse educators in Canada, who have successfully completed the national modules for nurse educators and/or the certification exam, valued the learning and the credential that recognizes this learning. It is noteworthy that intrinsic value statements were rated more highly than perceived extrinsic values. From the results of the negative correlation, it was also interesting to note that those educators with more years of teaching experience were less likely to value enhanced “personal confidence in the academic role” provided by certification than those respondents with fewer years of teaching. Similarly, those with more years of teaching experience were less likely to value how certification could promote “recognition from employers,” and they were also less likely to value an increased “consumer confidence” in their certification. It may be posited that experienced educators were already confident in their teaching performance and practice before seeking certification and so relied less on the certification process to increase their confidence and perceived value by their employer and students.

The results of the analysis from the evaluation data obtained on the CCNE program are consistent with the U.S. literature (Barbé, 2015; Barbé & Kimble, 2018). The generally positive

agreement with intrinsic value statements were comparable to U.S. educators' perceptions of the value of certification (Lindell et al., 2020; Poindexter et al., 2019). The lower level of agreement with the two intrinsic items relating to competence and autonomy, and the internal consistency reliability results are also in line with the published results from the United States.

From the optional comments, respondents to the survey indicated that the positive value of certification for personal professional development was a common perception. While some indicated that they "would more likely hire an applicant who held the CCNE credential," overall, respondents felt that certification was not fully recognized by employers, colleagues, or students (no extra pay for earning the credential or no additional responsibilities were assigned) and that "certification is not well understood by other faculty for its value." Suggestions for enhancing others' perceptions of certification were proposed in the comments and included that "programs with faculty who have certification [should be recognized] as part of accreditation" and that programs should "market externally that there are CCNE faculty to increase student applications."

Despite consistent enrollments in all three CCNE modules over the last several years and the positive feedback and perceptions of academic nurse educator certification in Canada, the CCNE program and designation appears to require further formal recognition from teaching and academic institutions. Further study of the benefits of nurse educator professional development, and how certification is valued, may assist with such recognition. In terms of program evaluation, marketing to Canadian schools of nursing may be reviewed to further support the recognition of credentialing across the country.

Since the introduction of the CCNE program, other specialized certification programs and courses for nurse educators have been initiated through CASN under the CNEI. Modules and credentialing for simulation nurse educators and a clinical instructor course are experiencing continuing success in attracting nurses who teach in these specific areas of practice. While the value placed on earning an educational credential in Canada appears to be increasing, CASN has also had engagement in its CCNE programming from Saudi Arabia and China. A modification of the nurse educator programming has been delivered to academics in those countries.

Conclusion

Overall, the evaluation of the CCNE program supports the value of preparing faculty who have developed national competencies in nursing education and of recognizing their learning through national certification. The analysis of the evaluation data indicates support for the CCNE program among nurse educators but a need to increase recognition of the program and its value among employers. This information will guide future program changes to ensure that the value of certification is maintained. Any updates to the modules themselves will, in part, continue to be influenced by the ongoing participant feedback on individual modules and may include increased access, active learning activities, and more flexible content delivery.

While the shortage of qualified nursing faculty continues to grow, strengthening current and future academic faculty members' competencies as educators is essential to support the quality of nursing in the future. This certification and credentialing program for the academic nurse educator promotes recognition and provides merit for the acquisition of specialized knowledge, expertise, and competencies required for the role. Evaluation serves to strengthen the quality of nursing education in Canada and continuing development of the program.

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