





Study group participants who piloted the study group manual while preparing for the April 2005 CNA certification exam in gerontological nursing. All work at Veterans' Services, Camp Hill Veterans' Memorial Building, Capital District Health Authority, Halifax, N.S.: (left to right) Glenn Loranger, Lynn Currie, Patricia Bilski (facilitator), Melanie Parsons-Brown. Missing from photo: Colleen Berridge, Natasha Symes-Osmond and Barbara Lyons-Cardinal

## CERTIFICATION

# Building on What You Know

NURSES RECOGNIZE THAT BEING PART OF A CERTIFICATION EXAM STUDY GROUP IS AN EFFECTIVE LEARNING STRATEGY AND A VALUABLE NETWORKING EXPERIENCE.



### LESLIE ANNE PATRY, RN, BScN, MScN

LESLIE ANNE PATRY IS THE CERTIFICATION COORDINATOR WITH THE CANADIAN NURSES ASSOCIATION, OTTAWA, ONTARIO. SHE WAS A STAFF NURSE AND CLINICAL INSTRUCTOR IN PEDIATRIC CRITICAL CARE AND A STAFF NURSE WITH THE ONTARIO REGIONAL POISON CENTRE.

**Strategies to prepare for the Canadian Nurses Association certification exams** are as diverse as the number of nursing specialties within the CNA Certification Program. This voluntary national nursing specialty credential is available to Canadian nurses

who meet specific eligibility criteria. Nurses who are successful on a written exam in their selected nursing specialty achieve CNA certification, which is valid for a five-year term. Nurses recertify to maintain the credential by either writing an exam again or submitting proof of their continuous learning activities in the specialty. Increasingly, Canadian nurses are engaging in study groups as one of their exam preparation strategies. These study groups are organized and the content determined by nurses in order to meet their specific learning needs. Nurses are rec-

### ABSTRACT

The author undertook a project to support nurses participating in study groups as part of their strategy to prepare for the Canadian Nurses Association certification exams. Feedback was obtained from CNA certified nurses, study group participants and facilitators and other key stakeholders to develop a study group resource manual. CNA certification is a voluntary national nursing specialty credential that offers Canadian nurses the opportunity to demonstrate their knowledge and skills by meeting eligibility criteria and successfully writing an examination.

Initially, development of a study group manual was the principal

aim of the project; however, nurses' insights into their study group experiences became the focal point. Nurses recognized that being part of a study group was an effective learning strategy and a valuable networking experience.

The author highlights nurses' study group experiences, describes the use of a nursing leadership conceptual model to frame the project and discusses the concept of continuing competence.

**KEYWORDS:** Canadian Nurses Association, certification, continuing competence, leadership, nursing study groups

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## PROJECT GOALS AND OBJECTIVES

To complete my final assignment in the master of science in nursing program at the University of Ottawa, I undertook a project to respond to nurses' requests for study group support. In early 2005, consultation with a wide range of key stakeholders was initiated, with a primary goal to finalize a user-friendly manual designed for those planning to facilitate a study group, those planning to participate in a study group and those who are studying independently and/or who wish to consult a study group.

Early on during the consultation, it became apparent that a straightforward project to obtain study group feedback had evolved beyond discussions about exam preparation. Nurses' insightful observations about their participation in study groups became the project's focal point.

This article outlines the development of the study group manual and underscores the nurses' study group experiences as they relate to a nursing leadership conceptual framework. Findings from the project support the concept of continuing competence.

## LITERATURE REVIEW

A literature review was undertaken to elicit the current state of knowledge about nursing certification and strategies to prepare for certification exams. Results screened through three levels of sifting did not reveal any research specifically addressing study groups. However, one article described a blueprint for course development and implementation of a U.S. medical-surgical certification review course. (Karvonen, Sayre, & Wyant, 2004). The authors observed that nurses were not only preparing for their certification exam but were beginning to form bonds and network with each other.

In examining group cohesion and nurse satisfaction, DiMeglio et al. (2005) undertook a team-building intervention that would have an impact on the culture in which nurses practise. The authors identified that the creation of a community in the workplace encourages connection and commitment among nurses.

A review of nursing certification literature revealed that certification has been available to nurses in the U.S. for about 30 years and in Canada since 1991. During the 1990s, U.S.-based papers describing nursing certification began appearing (Carlson, 1990; Coleman et al., 1999). Recent research

explored the relationship between increased job satisfaction for nurses who have earned certification and the potential for improved patient outcomes (Cary, 2001; Hughes et al., 2001). More research studies are examining such issues as the perceived value of certification, barriers to becoming certified and professionalism in nursing (Byrne, Valentine, & Carter, 2004; Gaberson, Schroeter, Killen, & Valentine, 2003; Schaffner, 2004; Wynd, 2003).

Canadian certification literature emerged in the 1980s, when CNA released a report in 1982 and published its first certification article (Levesque, 1985). Descriptive articles that followed increased awareness of certification in Canada (Blais Gumpert, 2005; Leclerc, Holdway, Kettyle, Ball, & Keith, 2004; Rashotte, 2003). Recently, CNA provided data for a U.S. research project examining how certification contributes to nurses' personal and professional growth (Cary, 2001).

## CONCEPTUAL FRAMEWORK

The nursing leadership conceptual framework developed for the Dorothy M. Wylie Nursing Leadership Institute (Simpson, Skelton-Green, Scott, & O'Brien-Pallas, 2002) was selected as an underlying framework for the CNA certification study group manual project. The conceptual framework encompasses four main dimensions:

- profession of nursing
- competencies of leadership
- business of health care
- use of self.

This framework was selected because it recognizes that nurses must have competence in all four areas. Simpson et al. (2002) explained that "building communities of practice is an important way to leverage knowledge in today's environment. These communities of practice share experiences and knowledge in free-flowing creative ways that foster new approaches." The study groups foster "communities of practice" where nurses share experiences and knowledge with a goal of achieving the CNA certification credential.

## PROJECT INTERVENTIONS

Consultation for the study group project, through a mix of telephone and in-person interviews using semi-structured surveys, comprised three groups of informants:

- nurses who, in the past, had participated in study groups
- nurses currently participating in study groups
- other key stakeholders consulted to offer broader feedback relevant to certification.

In total, 58 nurses, including several francophones, took part. They represented eight provinces and 11 CNA certification nursing specialties. Content analysis of the narrative data from all respondents was completed to identify prominent themes. The feedback from this group was key in developing the content for the study group manual.

Following analysis and review of the project information, three project outcomes were identified: a snapshot of the experiences

THERE ARE  
CURRENTLY 13,427  
CNA CERTIFIED  
RNs IN CANADA.  
SEVENTEEN NURSING  
SPECIALTY EXAMS  
ARE BEING OFFERED  
IN 2006. EVERY YEAR  
ABOUT 3,000 NURSES  
CERTIFY AND/OR  
RECEIVE THEIR  
CNA CERTIFICATION  
CREDENTIAL

**Table 1: Linking nurses' study group experiences to a nursing leadership conceptual framework**

Dorothy M. Wylie Nursing Leadership Institute Conceptual Framework <sup>®</sup>	Comments from nurses on their study group experiences
Profession of Nursing <ul style="list-style-type: none"> <li>• Entry to Practice</li> <li>• Scope of Practice</li> <li>• Standards of Practice</li> <li>• Practice Guidelines</li> <li>• Maintenance of Competency</li> <li>• Professionalism and Practice Settings</li> </ul>	<ul style="list-style-type: none"> <li>• Preparing for and writing the CNA certification exam is a good mechanism to “stay current” despite the fact of lots of experience in the specialty. (Maintenance of competency)</li> <li>• Nurses are more receptive to new ideas and practice within the unit. (Professionalism and practice setting)</li> <li>• Use the table of contents from a key textbook and “marry it” with the CNA certification competencies to form the basis for content review. (Scope of practice, standards of practice and practice guidelines)</li> </ul>
Business of Health Care <ul style="list-style-type: none"> <li>• Political &amp; Health Environment Knowledge</li> <li>• Human &amp; Organizational Behaviour</li> <li>• Relationship Management</li> <li>• Resource Management</li> <li>• Results Management</li> </ul>	<ul style="list-style-type: none"> <li>• The success of one study group contributed to the success of the next. (Results management)</li> <li>• Employer supported a more flexible rotation to accommodate the study group. (Resource management)</li> <li>• Don't hesitate to go to your employer (key person) to discuss the certification initiative. (Political &amp; health environment knowledge)</li> </ul>
Use of Self <ul style="list-style-type: none"> <li>• Emotional Intelligence                             <ul style="list-style-type: none"> <li>• Self-Knowledge</li> <li>• Self-Management</li> <li>• Social Awareness</li> <li>• Relationship Management</li> </ul> </li> <li>• Lifelong Learning</li> <li>• Work-life Balance</li> </ul>	<ul style="list-style-type: none"> <li>• The positive energy and the positive experience lived during the study group continued after the exam was over. (Lifelong learning)</li> <li>• Respect the level of knowledge that exists and the different roles that participants bring to the group. (Emotional intelligence - relationship management)</li> <li>• Set up “ground rules” so that everyone knows what to expect. (Emotional intelligence - social awareness)</li> </ul>
Competencies of Leadership <ul style="list-style-type: none"> <li>• Modelling the Way</li> <li>• Inspiring Shared Vision</li> <li>• Challenging the Process</li> <li>• Enabling Others to Act</li> <li>• Encouraging the Heart</li> </ul>	<ul style="list-style-type: none"> <li>• Study group learning is worth more than the exam. What we created as a team is so powerful. (Inspiring shared vision, enabling others to act)</li> <li>• Prior experience as a study group member was helpful. (Modelling the way, enabling others to act)</li> <li>• “Have fun!” The leaning must be fun for the participants to stay committed. (Encouraging the heart)</li> </ul>

Adapted with permission from Simpson, B., Skelton-Green, J., Scott, J., & O'Brien-Pallas, L. (2002). Building capacity in nursing: Creating a leadership institute. *Canadian Journal of Nursing Leadership*, 15(3), 22-27.

of study group participants; an understanding of the connection between leadership, continuing competence and the nurses' study group experiences; and the development of the manual.

## DISCUSSION

Respondents indicated that networking and the bond created among study group participants and facilitators continued after the exam was over. Key strategies described as contributing to study group success included early preparation, a consistent and committed facilitator, committed participants, support from employers and opportunities to have fun while learning.

Barriers impeding study group success included lack of employer support, the need to juggle shift work schedules, lack

of time, inability to meet the required financial commitment and increased demands on the facilitator's time.

The importance of employer support emerged as a recurring theme. Examples given of employer support included financial reimbursement, purchase of textbooks, flexible rotation and paid education leave. Conversely, participants pinpointed the lack of consistent employer financial support as a contributing factor to a decline in the number of CNA certification applicants. One study group facilitator said, “The employer is limiting the number of nurses supported and has decreased the financial commitment to each candidate. This in turn has affected morale and nurses have lost momentum.” >

## LEADERSHIP, CONTINUING COMPETENCE AND CERTIFICATION

The links between the nurses' study group experiences and the four dimensions of the leadership conceptual framework are illustrated in Table 1. The nurses' statements also support Canada's current continuing competence requirements as mandated by regulatory nursing organizations. Leadership complements continuing competence by inspiring collaboration and commitment, forming strong networks and promoting the achievement of mutual goals, resulting in excellence in nursing practice (Mackay and Risk, 2001; CNA, 2002).

## MANUAL DEVELOPMENT

*Build on What You Know: A Study Group Manual for Nurses Preparing for CNA Certification Exams* was published in September 2005. It is specifically designed to complement existing CNA certification materials and is specialty neutral. The manual includes tips for study group participants and facilitators, tips for nurses preparing on their own, suggested references, a study group timeline and feedback forms.

The project was initiated to coincide with locating nurses who were actively participating in study groups. In view of the limited timeframe available to complete the project, access to study groups in progress proved more difficult than originally anticipated. This was in part due to nurses' busy schedules, their competing priorities and difficulty I had reaching contact persons. As a result, only one study group pilot tested the document. To address this gap, a feedback form is included in the study group manual and regular updates are planned.

## IMPLICATIONS FOR PRACTICE AND INQUIRY

The interviews revealed nurses' knowledge, expertise, wisdom, insight and innovative ideas about study groups as a valued approach to prepare for CNA certification exams. Participants took the initiative to research information, organize study sessions, connect with the multidisciplinary team members and integrate their learning from the study group into their nursing practice.

Future research could yield significant information about the impact of certification study groups on nursing practice. Continued investigation can help support Canadian nurses striving to earn the national nursing specialty credential and demonstrate their commitment to excellence in nursing practice, continuing competence and high-quality client outcomes.

## CONCLUSION

A key factor leading to the success of developing the study group manual was the expert advice and insightful feedback from participants. My interviews revealed that study groups influence the way in which nurses interact with each other and provided reflections of nurses on this valued exam preparation strategy. The study group project supported CNA's commitment to continuing competence, lifelong learning and the integration of learning into nursing practice. ♦

## Feedback from interviews

“Consistency of key staff (for example, the clinical nurse specialist) to lead the study group from year to year is crucial. Consistency, knowledge, experience, confidence — all increased with a familiar person leading the initiative.”

– Study group facilitator, New Brunswick

“We created a strong bond within the team of nurses.”

– Study group participant, Ontario

“Nurses not involved with the study group expressed interest in the learning that was occurring within the study group — everyone became involved.”

– Study group facilitator, New Brunswick

“The positive energy and experience lived during the study group continued on after the exam was over.”

– Study group participant, Alberta

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**Editor's Note:** Nurses can obtain a copy of the study group manual from the CNA website ([www.cna-aiic.ca](http://www.cna-aiic.ca)) by going to “Become Certified” and then to the section on study groups or request a free hard copy by e-mailing the CNA Certification Program at [certification@cna-aiic.ca](mailto:certification@cna-aiic.ca).

## REFERENCES

- Blais Gumpert, S. (2005). Certification dans une spécialité infirmière. *Perspective Infirmière*, 2(3), 34.
- Byrne, M., Valentine, W., & Carter, S. (2004). The value of certification: A research journey. *Association of Operating Room Nurses Journal*, 79(4), 825-835.
- Canadian Nurses Association. (1982). *Credentialing in nursing* [Policy statement and background paper]. Ottawa, ON: Author.
- Canadian Nurses Association. (2002). *Nursing leadership* [Position statement]. Ottawa, ON: Author.
- Carlson, K.E. (1990). Reasons why emergency nurses take or do not take the certification examination in emergency nursing. *Journal of Continuing Education in Nursing*, 21(1), 37-41.
- Cary, A.H. (2001). Certified registered nurses: Results of the study of the certified workforce. *American Journal of Nursing*, 101(1), 44-52.
- Coleman, E.A., Frank-Stromborg, M., Hughes, L.C., Grindel, C.G., Ward, S., Berry, D., et al. (1999). A national survey of certified, recertified, and noncertified oncology nurses: Comparisons and contrasts. *Oncology Nursing Forum*, 26(5), 839-849.
- DiMeglio, K., Padula, C., Platek, C., Korber, S., Barrett, A., Ducharme, M., et al. (2005). Group cohesion and nurse satisfaction: Examination of a team-building approach. *Journal of Nursing Administration*, 35(3), 110-120.
- Gaberson, K.B., Schroeter, K., Killen, A.R., & Valentine, W.A. (2003). The perceived value of certification by certified perioperative nurses. *Nursing Outlook*, 51(6), 272-276.
- Hughes, L.C., Ward, S., Grindel, C.G., Coleman, E.A., Berry, D.L., Hinds, P.S., et al. (2001). Relationships between certification and job perceptions of oncology nurses. *Oncology Nursing Forum*, 28(1), 99-106.
- Karvonen, C.A., Sayre, C., & Wyant, S.E. (2004). Building a medical-surgical certification review course: A blueprint for success. *Journal for Nurses in Staff Development*, 20(5), 213-218.
- Leclerc, A., Holdway, K., Kettyle, D., Ball, A., & L. Keith. (2004). Nurses' perceptions of rehabilitation certification. *Canadian Nurse*, 100(2), 22-25.
- Levesque, V.D. (1985). Specialization and certification: A review of CNA's activities. *Canadian Nurse*, 81(6), 26-28.
- Mackay, G. & Risk, M. (2001). Building quality practice settings: An attributes model. *Canadian Journal of Nursing Leadership*, 14(3), 19-27.
- Rashotte, J. (2003). How will certification in critical care be of benefit to an organization? *Dynamics*, 14(1), 14.
- Schaffner, M. (2004). Chicken soup for the certifying soul. *Gastroenterology Nursing*, 27(2), 76-77.
- Simpson, B., Skelton-Green, J., Scott, J., & O'Brien-Pallas, L. (2002). Building capacity in nursing: Creating a leadership institute. *Canadian Journal of Nursing Leadership*, 15(3), 22-27.
- Wynd, C.A. (2003). Current factors contributing to professionalism in nursing. *Journal of Professional Nursing*, 19(5), 251-261.