

# Nursing Faculty's Perceived Value of Certified Nurse Educator (CNE®)/ Certified Nurse Educator Novice (CNE®n) Credentialing

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## Abstract

**Aim** This study sought to measure nursing faculty's perceptions regarding the value of obtaining the CNE®/CNE®n specialty certification. There is limited research surrounding efforts to improve perceived extrinsic and intrinsic values of certification and even less documentation on identifying a link between student learning outcomes and instruction by CNE®/CNE®n faculty.

**Methods** Participants were recruited from a private college located in X, where only 16% of the 58 full and part-time academic nurse educators possess the Certified Nurse Educator® (CNE®)/Certified Nurse Educator® Novice (CNE®n) specialty certification. An online PVCT-12 survey was conducted pre- and post-CNE preparatory course to investigate changes in extrinsic and intrinsic perceived values of obtaining certification. Participants were also surveyed post-prep course to determine intent and time frame for testing.

**Results:** The study increased the number of full and part time academic nurse faculty with the CNE®/CNE®n certification from 16% to 24%. There was also an increase in the perceived value of the certification, more notably in the extrinsic value category.

**Conclusion:** Understanding these perceptions and motivators for certification can guide institutions in supporting faculty to increase their credentialed nurse educators. This study should be repeated with a larger population of nursing faculty across multiple academic institutions to produce more generalizable results. Future research should focus on identifying a link between improved student learning outcomes and instruction by CNE®/CNE®n faculty to further increase the extrinsic value of certification.

**Keywords:** Certified Nurse Educator, CNE, Nursing Faculty Certification, Nurse Faculty

## Introduction

The National League for Nursing (NLN) has offered the academic nurse educator certification since 2005 and the academic novice nurse educator

certification pilot exam for certification since 2021. The National Commission for Certifying Agencies (NCCA) granted accreditation to the NLN's CNE® Program for demonstrating compliance with the

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*NCCA Standards for the Accreditation of Certification Programs.* Nurse educator certification is considered a marker of teaching expertise; however, there is limited research to support its direct relationship with student learning outcomes. Improved student learning outcomes are measured by NCLEX pass rates, student satisfaction scores, and one-year employment rates, but there is no documented linkage to certification of faculty. Future efforts to link student learning outcomes with CNE<sup>®</sup> competencies may demonstrate improved student graduate transitions and improved patient outcomes.<sup>1</sup> An established link between improved student learning outcomes and instruction by CNE<sup>®</sup>/CNE<sup>®n</sup> faculty would show a tangible extrinsic benefit to holding specialty certification. This study focuses on benefits of certification with previously documented measurable intrinsic and extrinsic value.

### ***Improved Faculty Learning Outcomes***

Most prior studies focused upon learning outcomes of the faculty as measured by candidate exam pass scores and the perceived intrinsic and extrinsic values of pursuing CNE<sup>®</sup> certification.<sup>2-5</sup> Improved faculty learning outcomes can be measured by faculty demonstration of competency in the full scope of the certification test blueprint that assesses facilitating learning and learner development and socialization; assessment and evaluation strategies; curriculum design and evaluation of program outcomes; pursuit of continuous quality improvement; and engagement in scholarship, service, and leadership.<sup>6</sup> It is expected that certified faculty will use these advanced competencies in their course development, student evaluation, and teaching methods.

### ***Improved Faculty Critical Thinking***

One goal of certification is to “recognize the academic nurse educator’s specialized knowledge, skills, and abilities”.<sup>6</sup> Passing the certified nurse educator exam demonstrates faculty’s critical thinking skills and mastery of the full scope of the NLN Core Competencies.<sup>7</sup> The 2022 CNE<sup>®</sup> exam pass rate was 64%, which may validate the hesitancy of some faculty to pursue certification.<sup>8</sup> An academic institution that promotes certification with extrinsic values supports continuing education of faculty and their ongoing development of critical thinking skills that will then be reflected in teaching practices.

### ***Improved Patient Care***

Biel et al. (2014) conducted a synthesis of eight research articles to examine the impact of nursing certification on patient outcomes.<sup>9</sup> Although the study was not focused on nurse educator specialty certification, they found that results were mixed either having a positive impact or no relationship. Nurse educators guide students preparing for nursing practice at both prelicensure and postlicensure levels. Certified nurse educators have the potential to impact improved outcomes in patient health, safety, and quality care through their educational offerings to nursing students.<sup>1</sup>

### ***The Value of Certification***

Certification in any field is a mark of professionalism and distinction. For academic nurse educators, it establishes nursing education as a specialty area of practice and creates a means for faculty to demonstrate their expertise in their role. It communicates to students, peers, and the academic and health care communities that the highest standards of excellence are being met. By becoming credentialed as a certified nurse educator, the nurse educator serves as a leader and role model. The National League for Nursing (NLN) endorses the concept of voluntary, periodic certification for all academic nurse educators meeting educational and practice requirements.<sup>10</sup>

In addition to the CNE<sup>®</sup> credential, the NLN recently introduced the Certified Nurse Educator Novice (CNE<sup>®n</sup>) credential that is tailored to nurse faculty who are within the first of three years of practice as an academic nurse educator. This permits additional opportunity for credentialing of a new cohort of faculty, who have the intention of demonstrating their mastery of novice core competencies in nursing education. Additionally, seeking certification encourages new nurse faculty to increase skill in foundational aspects of teaching practice and increases retention in the role of the nurse educator.

### ***Review of the Literature***

Specialty certification provides the framework for life-long, continuing nursing education. “Advancing the field of credentialing of nurses and

the organizations in which they work will require evidence generated through interdisciplinary and interprofessional research".<sup>11</sup> Nurses report extrinsic barriers to certification as the lack of time to prepare for certification, the cost of the certification examination, and the lack of institutional support and reward. Studies have also shown that less experienced faculty were more apt to consider taking the CNE<sup>®</sup> exam, whereas more experienced faculty were less likely to consider certification.<sup>2,4,5</sup> Nurses do identify more with the intrinsic rewards of certification, such as faculty who are at the rank of assistant or associate professor may pursue specialty certification to meet rank promotion or tenure portfolio requirements. A school of nursing that values nurse educator certification might increase the perception of extrinsic value by offering support such as providing exam preparation through offering a preparation review course, reduction in workload during certification preparation time, reimbursement for the examination fee, recognition of faculty who attain CNE<sup>®</sup> certification, and a salary differential for certified nurse educators. Institutional efforts to make nurse educator certification more visible and valued by the college may change nurses' perception of the extrinsic value of certification.<sup>3</sup>

### **Purpose**

A religious-based, private college located in New England employed 58 full-time and half-time nursing faculty during the spring 2022 term. These faculty are located in the United States, and they teach in both the institutions online and ground based campuses. A spring 2022 needs assessment survey revealed that nine out of 58 faculty reported they held specialty certification as Certified Nurse Educators (CNE<sup>®</sup>) or Certified Clinical Nurse Educators (CNE<sup>®</sup>cl). This represents only 16% of nursing faculty holding this specialty certification. The goal of the project was to increase the percentage of CNE<sup>®</sup> educators at this academic setting.

The benefit of faculty participation in this project was enhanced nurse educator education with the potential of achieving CNE<sup>®</sup>/CNE<sup>®</sup>n certification. Achieving certification may have perceived intrinsic and/or extrinsic value and may create a means for faculty to demonstrate

their expertise in the role of nurse educator. This CNE<sup>®</sup>/CNE<sup>®</sup>n certification project addresses the college's strategic plan initiatives of cultivating character; improving student outcomes; and increasing its visibility and recognition locally, nationally, and internationally. Identification of perceived value may give evidence for the college to support endeavors of faculty certification.

It is anticipated that by providing an eight-week CNE<sup>®</sup>/CNE<sup>®</sup>n *Certification Preparation Course*, nursing faculty's perceived value of certification will increase, and they will be better prepared to sit for the CNE<sup>®</sup>/CNE<sup>®</sup>n certification examination.

### **Theoretical Model**

The project used the Needleman's Expanded Conceptual Model for Credentialing Research to justify the inquiry of certification in nursing education. The Expanded Conceptual Model includes three pathways: (1) Invisible Architecture, (2) Work Organization, and (3) Nursing Performance. This project investigated the nursing performance pathway of the framework (#3) by exploring how credentialed nurses may leverage their special capabilities to improve their performance as nurses.<sup>11</sup>

### **EBP Framework**

The Context, Input, Process, and Product (CIPP) model was chosen to guide the steps of this project. It is a decision-oriented model that is based upon core values and addresses Context Evaluation, Input Evaluation, Process Evaluation, and Product Evaluation and useful in planning for the future of a program by evaluating its sustainability.<sup>12</sup>

### **Methodology**

In March 2022, 58 full-time and half-time faculty were surveyed regarding CNE<sup>®</sup> and CNE<sup>®</sup>cl credentialing status. Of the 58 surveyed, there were 23 responses (40%). Eight faculty reported CNE<sup>®</sup> credentialing, and one faculty reported CNE<sup>®</sup>cl credentialing. The nine current CNE<sup>®</sup> credentialed faculty were acknowledged on Certified Nurses Day, March 19<sup>th</sup>, 2022, by The Dean of the school of Nursing via personal email with a recognition of their CNE<sup>®</sup> certification, which included an emailed Starbucks gift card.

With the objective of increasing the number of CNE<sup>®</sup> certified faculty to 20%, the certification project was introduced during the April 2022 Nursing Faculty Meeting and again at the April 2022 Online Nursing Faculty meeting. The PI recorded the names of 14 interested faculty on an Excel spreadsheet (12 CNE<sup>®</sup> and 2 CNE<sup>®n</sup>).

This 2-phase project aimed to utilize online surveys to assess nursing faculty's perceptions on the value of attaining CNE<sup>®</sup>/CNE<sup>®n</sup> specialty certification and then support interested nursing faculty in achieving certification by means of a CNE<sup>®</sup>/CNE<sup>®n</sup> prep course. This was accomplished by addressing one of the perceived extrinsic values of certification through demonstrating organizational support. Sustainability of the project outcome is five-year certification for CNE<sup>®</sup> and three-year certification for CNE<sup>®n</sup>, awarded to those faculty who choose to take and successfully pass the certification exam after the educational intervention.

#### Phase I:

Twenty-three nursing faculty participants completed both a demographic survey and the Perceived Value of Certification Tool-12 (PVCT-12).

#### Phase II

Fourteen (14) graduate nursing faculty participant volunteers were invited to participate in Phase II of the project. Interested parties completed informed consent and took part in the *Certification Preparation Course*, a self-paced, per learner needs, which was conducted over eight weeks and commenced during the Summer 2022 term. At the close of the eight-week *Certification Preparation Course*, participants received a follow-up PVCT-12 to assess any changes in perceived value of certification and received a qualitative question that documented if they had an intention to sit for the CNE<sup>®</sup>/CNE<sup>®n</sup> certification exam on or before June 30, 2023.

#### *Design*

This project was a quantitative, one group pre-/post-test study.

#### *Recruitment*

Potential participants were graduate full-time and half-time faculty, teaching in either the on-ground

or online nursing campus programs, during Spring 2022 term. They were recruited by the PI directly through the school of nursing (SON) at which they were currently teaching. Faculty were notified with a flyer emailed to their college-issued email accounts, as well as recruited during a Zoom presentation at two end-of-term SON meetings. There were no incentives offered to Phase I participants, and faculty received no grades or course credits for participation in the Phase II educational offering. However, Phase II participants were offered an optional incentive to participate in the form of reimbursement for a successfully passed CNE<sup>®</sup> or CNE<sup>®n</sup> exam prior to June 30, 2023. Reimbursement of exam fee demonstrated to the participants the extrinsic value of organizational support for certification. No penalties would be assessed to any participants who chose to withdraw from the project at any time.

See APPENDIX D for Eligibility Criteria<sup>13</sup>

#### *Setting*

The project was conducted at a religious-based, private college located in XXX; however, participating faculty, employed by the college, were located throughout the United States.

#### *Measurement*

##### 1. Demographic Survey (Appendix A)

A series of nine multiple choice questions were used to gather demographic data regarding the research participants. Areas assessed included age, gender, racial/ethnic identification, highest degree earned, years of experience in nursing education, faculty rank, faculty teaching location, current CNE<sup>®</sup>/CNE<sup>®n</sup> certification, and certification in another nursing specialty. Anticipated time to complete the survey was five minutes.

##### 2. PVCT-12 (Appendix B)

The Perceived Value of Certification Tool-Revised (PVCT-12) is a 12 item self-report instrument designed by the Competency and Credentialing Institute to elicit nurses' perceptions of the intrinsic and extrinsic value of specialty nursing certification.<sup>14</sup> Respondents are asked to report the extent to which they agree or disagree with each statement about how specialty certification benefits nurses using a 4-point Likert scale ranging from strongly disagree

(1) to strongly agree (4). The 12-item PVCT can be divided into two subscales: intrinsic value (6 items) and extrinsic value (6 items). Intrinsic value statements focus on benefits and motivators related to obtaining a certification that are internal to the individual whereas extrinsic value statements involve benefits and motivators related to obtaining a certification that are external to the individual or defined by others. The 12-item PVCT exhibits a stable factor structure, measurement model fit (RMSEA = 0.07, CFI = 0.97), and adequate reliability (intrinsic  $\alpha$  = .74 - .83; extrinsic  $\alpha$  = .83 - .86) across a variety of nursing credentialing organizations, certified nurses, and non-certified nurses, evidencing its construct and concurrent validity.<sup>5,14</sup>

This project used a modified version of the original 18-item tool to determine the perceived value of certification among perioperative nurses. This modified PVCT-12, developed in 2003 by the Competency & Credentialing Institute (CCI), improves upon the original PVCT with 12 newly drafted items that capture a broader range of respondents' opinions, as they relate to their perceptions of certification in more than 20 nursing specialties. The PVCT-12 omits the *no opinion* option (which was included in the 18-item PVCT) from the response categories, yielding a 4-point response scale ranging from *strongly disagree* to *strongly agree*. PVCT-12 embodies a two-factor structure, with 6 items measuring the Intrinsic factor and 6 items measuring the Extrinsic factor (CCI, n.d., para. 9). Permission to use the tool was obtained from the Competency & Credentialing Institute (Appendix C).<sup>15</sup> See Appendix B and Table 1 for a full list of intrinsic versus extrinsic value statements used in the survey.

### 3. Post-survey PVCT-12

Following the educational intervention, an intention to sit for certification exam follow up survey question was administered. Data revealed any changes in value of certification following the prep course and documented intention to sit for exam over the next year.

#### *Data Analysis*

A web-based program from CCI was used to collect demographic/PVCT-12 data. The demographic data collected was analyzed using descriptive analyses to characterize the sample.

Pre-/Post survey data: Average Likert Scale ratings were calculated and organized into a table to allow comparisons between Pre-/Post survey results. Descriptive statistics were used to compare certified and non-certified nurse educators on the individual items of the PVCT-12 during Phase I and any change in perceived value of certification following the educational intervention during Phase II. Results were further broken down into sub-groups to highlight any differences in perceived certification benefits with intrinsic versus extrinsic value.

Intention to sit for the certification exam within the following year was collected at the close of the *Certification Preparation Course*.

#### *Ethical Considerations*

The PI secured approved IRB through the college. The IRB #20212022-88 was determined to be expedited. Informed consent was provided on the home-screen of the electronic survey sent via CCI where participants were given an overview of the research and could decide to opt out of the project. The weekly sessions were optional and voluntary during the 8-week *Certification Preparation Course*; researchers reminded participants of the ongoing informed consent at the start of each 60-minute review session.

#### *Data Storage*

Data was stored on college-issued computers, which are password protected. Further, another layer of password protected exists with the data residing in the college's OneDrive, to which only the PI and research team had access. De-identified participant data was electronic only. Participants were issued an identifying code to be used throughout the project so that pre- and post- survey results can be paired for purposes of data analysis.

## **Results**

### *Phase I Demographics*

The pre-prep course survey was sent to all SON full-time and part-time faculty as an invitation to participate in this study. Only 3 out of 23 respondents completed the demographics section of the survey. The majority make-up of these respondents was as follows: 65+ in age (67%), male (50%), white (100%),

Southern US residing (67%), Doctorate degree (100%), 8-14 years of teaching experience (67%), Associate Professor (67%), additional specialty certifications (67%).

### *Phase I Perceived Value of Certification Tool-12 Pre-Results*

Four out of 23 pre-survey respondents fully completed the Likert-Scale rating section (perceived value statements). Overall, there were 19 partial responses, 3 completed, and one survey response disqualified (Table 1 Results). Of the 12 statements, only 6 received an average Likert-Scale rating between 3 and 4 indicating Agreement/Strong Agreement with 50% of statements. Of these, 5/6 intrinsic value statements received a score above 3.0 while only 1 extrinsic value statement score was above 3.0. This suggests that prior to completing the preparatory course, faculty perceived the benefits of becoming a CNE as having mainly intrinsic value, and little to no extrinsic value.

### *Phase II Demographics*

Post-Survey did not include demographics questions.

### *Phase II Perceived Value of Certification Tool-12 Post-Survey Results*

The post-prep course survey was sent to the 14 SON faculty who participated in the prep course. Results from 12 out of 14 participants were fully recorded (85.7% response rate) for the post-survey (Table 1). From pre- to post-survey, average Likert-Scale ratings increased for 10 out of 12 statements, indicating an increase in perceived value

of CNE certification benefits. Of these, 6/6 extrinsic value statements show score increases, while 4/6 intrinsic value statements had increased scores. Overall, 9/12 statements received an average Likert-Scale rating between 3 and 4 indicating Agreement/Strong Agreement with extrinsic/intrinsic value with 75% of statements. These results indicate that after taking the preparatory course, faculty grew to believe that CNE certification had extrinsic value and not just intrinsic value.

### *Phase II outcomes:*

In the Post-Preparatory Course Survey, 11/14 (78.6%) participants indicated that they intended to sit for the CNE<sup>®</sup>/CNE<sup>®n</sup> certification exam before June 30<sup>th</sup>, 2023.

Five out of the 14 faculty received CNE certification.

At the study conclusion in June 2023, the overall percentage of CNE<sup>®</sup> certified faculty increased from 16% (9/58) in 2022 to 24% (14/59) in 2023, which was slightly more than the project's envisioned minimum outcome of 20%.

Additionally, Full-time and half-time faculty were surveyed in February 2023 to determine any increase in CNE<sup>®</sup> certification over the past year. Twenty-two of 59 recipients responded (37%). The data revealed that as of February 2023, nine faculty indicated that they were CNE<sup>®</sup> certified. There was no change from the 2022 survey; one previously certified faculty left full-time employment and one faculty obtained certification because of the study's Phase II intervention.

**Table 1. Average Likert-Scale (4-point scale) rating for level of agreement with statements from "Nursing Faculty's Perceived Value of Certified Nurse Educator (CNE<sup>®</sup>)/Certified Nurse Educator Novice (CNE<sup>®n</sup>) Credentialing: A Pilot Study" Pre and Post Course Survey. Statements are divided into two subscales: those with intrinsic value vs. those with extrinsic value. Average Likert-Scale rating increases from Pre to Post Survey are in bold.**

INTRINSIC VALUE			EXTRINSIC VALUE		
Statement	Average Rating		Statement	Average Rating	
	Pre-Survey	Post-Survey		Pre-Survey	Post-Survey
Nurses that have obtained certification feel a strong sense of accomplishment.	3.25/4	3.92/4	Obtaining certification shows that a nurse is committed to the nursing profession.	3.25/4	3.5/4

Continue.....

Certification validates specialized clinical knowledge.	3.25/4	3.75/4	Employers tend to favor hiring certified nurses over non-certified nurses.	2.25/4	3.17/4
Nurses that have obtained certification receive greater professional recognition from peers than non-certified nurses.	2.5/4	3.17/4	Other medical professionals are more likely to listen to a certified nurse than a non-certified one.	2.75/4	3.17/4
Certified Nurses have more confidence in their abilities than non-certified nurses.	3.0/4	3.08/4	Consumers are more confident in certified nurses than non-certified nurses.	2.75/4	3.08/4
Obtaining Certification is one of the most challenging aspects of the nursing profession.	3.25/4	3.08/4	Certified nurses generally make more money than non-certified nurses.	2.25/4	2.75/4
In my field of practice, I find that certified nurses are more competent than nurses who are not certified.	3.0/4	2.92/4	Certified nurses are given more professional autonomy than non-certified nurses.	2.5/4	2.58/4

## Discussion

### *Interpretation of Results*

Fourteen faculty members remained engaged throughout the Phase II eight-week CNE® Preparation Course offered via the college's learning management system during summer 2022. During the eight weeks, faculty were guided in CNE® test blueprint knowledge self-assessments and also additionally participated in weekly Zoom facilitated synchronous opportunities to discuss challenging concepts. Following the eight-week course, the participants completed the post PVCT-12. Perceived value of certification scores was statistically significant four out of six intrinsic value statements and six out of six extrinsic value statement (Table 1).

Following the preparation course, faculty were sent monthly, motivational email reminders to schedule and sit for the exam by June 30, 2023, to receive exam fee reimbursement (\$400.00) for a successful passing score. Fourteen participants expressed the intention of taking the exam by June 30, 2023. Anecdotal comments from the five participants who passed the exam were: "It was the motivation I needed to get it done"; "Thank you for all your

help", "I am over the moon!"; "I successfully passed the CNE today on my first attempt!!!; and "Time to celebrate!". Comments from those participants who chose not to take the exam were "faculty workload", "completing a DNP program", and "leave time away from the classroom". Some faculty stated hesitancy to take the exam with a posted 64% pass rate in 2022.<sup>8</sup>

### *Implications for Nursing Education*

#### Institutional

Academic institutions can advance nurse educator certification by supporting the extrinsic values of nurse education certification initially through reimbursement of the cost of certification, allocating devoted time for studying, and promoting employer recognition of certification. One outcome of the study was that the project site promoted the awareness and value of nurse educator certification and was successful in increasing the number of certified faculty. Since the conclusion of the preparatory course, additional faculty, excluded from those 14 who volunteered in Phase II, have expressed an interest in preparing to sit for the CNE®/CNE®n as well.

The assumptions from Needleman's theory support the implications for nursing education: improves organizational culture, improves job satisfaction, empowerment, and confidence, improves recruitment and retention, employability, and job prospects, recognizes validation of knowledge in the specialty, provides professional support, and shapes future practice.<sup>14</sup>

The NLN also offers annual recognition to organizations that exemplify the pursuit of excellence and the advancement of certifications through the Certification Star Award.<sup>10</sup> This project was awarded the 2023 NLN award, in recognition of having "made a significant difference or substantial impact on nursing education, embraced nurse education through adoption and/or promotion of certification, and helped to sustain certifications and excellence in education".<sup>10</sup> Academic institutions are encouraged to advance nurse educator certification and to recognize those faculty annually on March 19<sup>th</sup>, Certified Nurses Day.

### Conclusions

This study showed an increase in the perception value of the CNE<sup>®</sup>/CNE<sup>®n</sup> specialty certification credential after participants completed the self-directed preparatory course. Specific factors to note include those participants who took the exam but did not pass and competing factors such as prioritizing completing a DNP program, teaching workload balance, and leave time away from the classroom. Some faculty are reluctant to take the exam when it is posted that there was a **64% Pass Rate** on the CNE<sup>®</sup> in 2022.<sup>7,8</sup> This study should be repeated with a larger population size, potentially recruiting nurse educators from numerous academic institutions around the country, to allow for more generalizable results. To further increase the perceived value of CNE<sup>®</sup>/CNE<sup>®n</sup> specialty certification, it will also be vital to study the relationships between instruction delivered by certified nurse educators and improved student learning outcomes. As NCLEX first-time pass rates have been deemed indicative of student success, future research could compare these pass rates at various institutions to determine if pass rates changes significantly when there is a higher percentage of CNE<sup>®</sup>/CNE<sup>®n</sup> faculty.

### Limitations

The current study had several limitations. First, the faculty response rate was low. The survey was aimed at graduate academic nurse faculty and therefore undergraduate academic nurse educators were excluded from invitation. The invitation was announced via the SON meeting with a flyer sent via email. Some of the SON faculty work on the ground campus in classroom, or in clinical settings remote to the ground campus or online campus access. Not all faculty attended the online nursing faculty meeting where the study was announced. The response rate may have been improved with the undergraduate faculty participation and additional distribution aspects and follow-up calls for participation to alert faculty to the email flyer. Additionally, the SON employs many adjunct faculty. Inclusion of these faculty could have increased the response rates and volunteer participation rate for Phase II. Lastly, the SON offers a Doctorate level degree with a specialization in Nursing Education. Including a preparatory course within the degree course offerings might also increase the number of certified nurse educator graduates who will be entering the workforce; a new nurse educator elective course was developed and offered to students as an outcome of this project.

**Funding Statement:** Regis College awarded the PI a college-funded grant in the amount of \$5200.00 that would permit the reimbursement of a successfully passed CNE<sup>®</sup> or CNE<sup>®n</sup> exam prior to June 30, 2023.

**Footnotes:** The authors have declared no conflict of interest.

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