CNS-CP®
Certified Perioperative CNS

Certification & Recertification
Candidate Handbook

Presented by:

CCI® The Leader in Perioperative Certification

Candidate Handbook

All information is subject to change without notice, including portfolio content, portfolio fees, and policies. Last updated: 12-20-2019. Version 2020-1.

CCI® The Leader in Perioperative Certification

2170 South Parker Road, Suite 120
Denver, CO 80231
303.369.9566 / 888.257.2667
info@cc-institute.org

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Purpose of the Candidate Handbook

How Do I Use This Handbook?

The CNS-CP Candidate Handbook provides essential information on policies and procedures pertaining to certification and recertification of the CNS-CP credential. It is your responsibility to familiarize yourself with the contents of this handbook.

If you have questions about this handbook, please feel free to contact CCI at info@cc-institute.org, 303-369-9566, or 888-257-2667 between 8 AM and 4 PM Mountain Time.

Introduction to Certification

What Is Certification?

Certification, as defined by the American Board of Specialty Nursing Certification (ABSNC), is the formal recognition of the specialized knowledge, skills, and experience demonstrated by the achievement of standards identified by a nursing specialty to promote optimal health outcomes.

What Are the Purposes of Certification?

- Demonstrates commitment to accountability to the general public for safe nursing practice.
- Enhances quality patient care.
- Identifies the Clinical Nurse Specialist (CNS) who has demonstrated professional achievement in providing perioperative nursing care.
- Provides employing agencies a means of identifying professional achievement of an individual practitioner.
- Provides personal satisfaction for practitioners.

What Are the Objectives of Certification?

- Recognizes the individual professional advanced practice nurse who is proficient in practice.
- Strengthens conscious use of theory in assessing, planning, implementing and evaluating patient care.
- Enhances professional growth through continued learning that results in greater depth of knowledge and expanded skills.

What Is the Rationale for Certification?

CNS-CP certification validates the professional achievement of specific standards of practice by a Clinical Nurse Specialist (CNS) serving as an advanced practice nurse in the perioperative setting. This recognition program acknowledges the professional achievement demonstrated by an individual CNS's performance which exceeds that required for competent practice in the perioperative setting.

About the Professional Portfolio

Acceptance of a CNS-CP Professional Portfolio requires:

1. Having a thorough and sound foundation of the knowledge and skills required for competent clinical practice (see CNS-CP Portfolio Content Outline below). Knowledge can be obtained through work experiences, independent learning, and formal educational programs. The experiential knowledge component of the portfolio requires that a CNS has a minimum of 2 years of experience in perioperative nursing. Additional experience at the advanced practice level is required for those CNSs graduating from a master's program not consistent with Consensus Model standards. Thus, the CNS-CP portfolio is based on what a CNS with 2 years of practice in the perioperative setting is expected to know and do. The portfolio

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assesses a combination of experiential and cognitive knowledge, as together these form the foundation of competent clinical practice.

2. Understanding of the portfolio design process.

The CNS-CP Professional Portfolio method for certification has been designed to capture the essence of the practicing CNS through its integration of the CCI Job Analysis with core competencies as defined by the National Association of Clinical Nurse Specialists (NACNS). The CNS-CP Professional Portfolio is a peer-reviewed mechanism for demonstrating advanced level knowledge and skills in the design, development, and evaluation of a perioperative patient-focused outcomes improvement project. Activities in the portfolio go beyond routine, entry-level practice and challenge applicants to contribute to the art and science of perioperative nursing at an advanced level. This certification method provides a unique opportunity for the applicant to reflect on personal interests and contributions to advanced practice as a CNS in the perioperative setting while meeting standards for competent practice.

How Is the Professional Portfolio Developed?

A Job Analysis, including Test Specifications, was developed by CCI and a collection of subject matter experts working under the expert guidance of our testing partner Prometric. The Job Analysis describes the overall functions and responsibilities, as well as the underlying knowledge and skills that are essential to ensure proficiency as a CNS-CP. Test specifications were developed based on external ratings and constitute a plan upon which the job-related certification exam was constructed for CNSs functioning in this role. These test specifications were then used by Professional Portfolio committee members to design the individual components of the CNS-CP Professional Portfolio. It is recognized that the Job Analysis may not reflect all the specific tasks performed by an individual functioning in this role.

Certification: Earning Your Credential

To earn the CNS-CP credential, candidates must meet eligibility requirements at the time of application and meet the standards for a successful submission of a professional portfolio.

Who Is Eligible to Apply for the Portfolio Program?

Candidates must meet requirements for each of three categories: licensure, education, and experience.

Licensure
Candidate must meet one of two requirements:

1. Current full, unrestricted license (RN and/or APRN) in the United States.

- OR -

2. Current full, unrestricted RN license with recognition as a CNS by state board of nursing.

Education
Candidate must meet one of two requirements:

1. Graduated from an accredited (CCNE, NLNAC, ACEN) graduate, post-master's certificate, or doctoral program in nursing which has prepared the applicant for the CNS role. The program must contain core courses (advanced pharmacology, pathophysiology, and physical assessment), population-specific classes, and a precepted 500-hour clinical practicum in the CNS role.

- OR -

2. A master's, post-master's certificate, or doctoral degree in nursing from an accredited CNS program, and documentation of serving in an advanced practice role may be accepted in lieu of graduating from a program which did not include core courses and the precepted 500-hour clinical practicum.

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The certifying organization does not discriminate among candidates as to age, sex, race, religion, national origin, ethnicity, disability, marital status, sexual orientation, and gender identity.

Experience
Candidate must be currently employed either full- or part-time in perioperative nursing. Candidate must have completed a minimum of 2 years and 2,400 hours of work experience in perioperative nursing, with a minimum of 50% (1,200 hours) in the intraoperative setting.

In addition, the candidate must meet one of two requirements:

1. If enrolled in a CNS program complying with current accreditation standards (advanced pharmacology, physical assessment, and pathophysiology, role-specific classes, and 500-hour clinical practicum), the applicant may begin work on the professional portfolio's project prior to graduation. However, the portfolio project must be completed after the applicant has been awarded the CNS degree.

- OR -

2. If graduated from a CNS program prior to implementation of current accreditation standards, applicant must validate 2,400 hours and 2 years as a practicing CNS in the perioperative setting.

The certifying organization does not discriminate among candidates as to age, sex, race, religion, national origin, ethnicity, disability, marital status, sexual orientation, and gender identity.

What Are the Subject Areas of the Professional Portfolio?
The CNS-CP Professional Portfolio is comprised of the following subjects (see below). For a complete list of task and knowledge statements for the CNS-CP Professional Portfolio, see Appendix A.

Subject Area	Percentage of Time Spent in Role
Clinical Expert in the Delivery of Advanced Practice Perioperative Care	31%
Consultant (intra- and multidisciplinary)	16%
Education (nurse, other healthcare providers, family, and community)	13%
Clinical Inquiry (evidence-based practice projects and/or research)	15%
Organizational and Systems Thinking	16%
Professional Accountability	9%
Total	100%

Applying for the CNS-CP Professional Portfolio

How Do I Apply for the Professional Portfolio?
The following pre-approval documents must be submitted and approved *before* the applicant will be provided access to CNS-CP portfolio materials. Please send your pre-approval documents to CCI, Attn: CNS-CP Professional Portfolio, 2170 S. Parker Road, Suite 120, Denver, CO 80231.

- Photocopies of RN and/or APRN license(s) or a photocopy of the online verification of current licensure from the state board of nursing.

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- An original transcript showing degree conferred and all graduate-level coursework. This document must be mailed. No faxed or scanned copies, e-mail attachments, or photocopies will be accepted.
- Verification of CNS certification, if held. A physical or e-copy is acceptable. CCI reserves the right to request an official letter of verification from the certifying body. The applicant is responsible for any charges related to procuring the letter.
- Completed CNS-CP Pre-Approval Form.

In order for your application packet to be reviewed, you will need to create an account through CCI. CNS-CP portfolio applicants may create an account or log in to their existing account to verify their information. If creating a new account, you will need the following information:

- Personal contact information: address, e-mail (please make sure you are using an e-mail that will allow you to receive communications from CCI), home and work phone number
- Birth year
- Highest degree earned
- Year accredited CNS program completed
- Perioperative work history
- Date began working as a perioperative CNS
- Supervisor contact information: name, address, e-mail, phone number
- Employer contact information: facility name, address, and phone number
- Advanced practice population focus
- RN/APRN license information: expiration date, state(s) licensed to practice

Please note: Setting up an account is required before your portfolio can be reviewed. There is no payment required to set up a CCI account.

CCI will acknowledge authorization of the pre-approval application packet by reply e-mail. After approval, each applicant will be provided access to portfolio documents through an electronic management system.

Portfolio Submission Requirements

The following documents must be submitted and approved as part of the CNS-CP Professional Portfolio:

- A current resume/CV
- The portfolio project, worksheets, and supporting evidence
- A reflective practice form

The applicant is advised to keep a copy of the application and all materials submitted. CCI cannot be responsible for lost correspondence.

All portfolio sections must be completed at the time the peer reviewer application is submitted. Incomplete portfolios will not be sent for peer review until requirements for each activity are met.

How Much Does the Professional Portfolio Cost?

The total CNS-CP certification by portfolio fee is $375. Of this amount, a non-refundable fee of $125 will be collected when the portfolio is submitted for peer review. The remaining $250 fee is due at the time the portfolio is approved. Active CNORs receive a $50 discount which will be deducted from the $250 fee. Following is a listing of current fees and available discounts . Applications cannot be processed without payment. All fees and/or outstanding debts to CCI must be paid in full.

CNS-CP Certification Fee Option	Price
Professional Portfolio Application Fee	$375

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Does CCI Verify My Application Information?

Information on applications may be verified. If there is any reason to believe that any applicant might not have met eligibility requirements, or if an outside party informs CCI that an individual has not met certain requirements, the application may be flagged for audit. In addition, a percentage of certification applications are randomly selected for audit. The Credentialing Department will begin the audit by contacting the individual in writing to obtain documentation to substantiate the information in question. Information may be verified by telephone, e-mail message and/or letter by the Credentialing Department. All information gained through verification procedures will be confidential, except in instances where the law demands disclosure of facts. Under no circumstances will the reporting party be disclosed. Verification may include but is not limited to the following information:

- An employee verification form that must be completed by a current manager, supervisor, or HR.
- Verification of applicant's RN license through NURSYS.
- Verification of professional nursing history through contact with past employers if needed.

It is the responsibility of the applicant to furnish any information missing from the application. Should any information on the application be found false, the applicant will be notified and declared ineligible to continue in the certification process. An e-mail will be sent to the applicant detailing the results of the audit after the documents have been reviewed.

Preparing for the Professional Portfolio Project

CCI provides a detailed bibliography of recommended resources to complement the task and knowledge statements and subject areas found in Appendix A.

Reference Materials

Additional references include:

- Harris, J.L., Roussel, L. Dearman, C., & Thomas, P.L. (2018). *Project Management and Planning: A Guide for Nurses and Interprofessional Teams* (3rd ed.). Burlington, MA: Jones and Bartlett Learning.
- Zaccagnini, M.E., & White, K.W. (2019). *The Doctor of Nursing Practice Essentials.: A New Model for Advanced Practice Nursing* (4th ed.). Burlington, MA: Jones and Bartlett Learning.

Completing the CNS-CP Professional Portfolio

What Are the Components of the Professional Portfolio?

The following must be submitted as part of the CNS-CP Professional Portfolio. All signatures must be original.

- A current resume/CV
- Worksheets
  - Welcome/getting started
  - Needs assessment/gap analysis
  - Change analysis
  - Evidence summary tool/table
  - Stakeholders/committee members
  - Project plan
  - Staff/patient education
  - Reflective practice form
- A signed attestation form that states the portfolio is complete and ready for distribution to peer reviewers.

Instructions, worksheets, checklists, and the scoring rubric are provided in the applicant's Dropbox account.

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How Much Time Do I Have to Complete the Professional Portfolio?

The project used for the portfolio must be completed within 2 years of the application date.

How Much Computer Experience Do I Need to Complete the Professional Portfolio?

Basic computer skills are necessary, including competency in Word document generation, communication via e-mail, accessing and uploading documents into the electronic storage account, and completing fillable PDF forms.

How Do I Gain Access to My Portfolio Tools?

Once CCI has reviewed and approved your pre-approval application packet, you will receive an e-mail notification of approval and instructions on how to access your electronic storage account. The Dropbox will be shared with CCI staff responsible for managing CNS-CP certification and the three peer reviewers assigned to review and approve the portfolio.

The applicant is advised to keep a copy of the application and all materials submitted. CCI cannot be responsible for lost correspondence.

What Happens If I Withdraw My Portfolio Application?

The $125 peer-reviewer fee is non-refundable.

When Do I Receive My Portfolio Results?

Peer reviewers will have 30 days to review the portfolio submission. Applicants will receive notification of the results of their portfolios after CCI has received the peer reviewer comments. Peer reviewer comments and the scoring rubric will be shared with the applicant with a detailed explanation of requests for any additional information required. If additional materials are required, the applicant will have 30 days to submit that information to CCI.

What Happens to My Documents?

Documents will remain in the electronic storage account after review and final approval. Certificants will have access to the documents as long as they have access to the electronic storage account.

What if My Final Submission is Not Successful?

An applicant whose final portfolio has been reviewed and found to not meet the standards for acceptance will be advised of the decision not to grant CNS-CP certification, and there is no appeal from the determination by the reviewers. $125 peer-reviewer fee is non-refundable.

If My Final Portfolio is Not Successful, Can I Submit Another Portfolio?

Yes, you may submit a new portfolio based on a new project. No portion of the previous portfolio attempt may be used for subsequent submissions. You must meet all eligibility requirements and pay fees in effect at the time of application.

Using the CNS-CP Credential

CNS-CP is the designation recognizing the CNS who has been certified in perioperative nursing. CNS-CP certification is defined as "the documented validation of the professional achievement of identified standards of practice by an individual Clinical Nurse Specialist providing advanced practice care for the patient before, during, and after surgery." CNS-CP means that you have demonstrated the advanced practice knowledge and skills necessary to practice in the specialized field of perioperative nursing.

Who Can Use the Credential?

The CNS-CP mark is federally registered with the U.S. Patent and Trademark Office and may only be used in accordance with CCI policy by those who have achieved and actively maintain the credential.

How Long Is the Credential Active?

Certification is conferred for a period of 5 years, with recertification available after that 5-year earning period. When a credential lapses, the nurse may no longer use the CNS-CP designation in his/her credentials.

When Can I Begin Using My Credential?

The CNS-CP credential may be used upon verification of your credential on the CCI website. Certificants will also be able to print a certificate from their CCI account profile.

How Do I Display My Name and Credential?

In writing, proper usage is as follows: Jane A. Doe, MSN, RN, ACNS-BC, CNS-CP, CNOR

General Certificant Data Information

Is My Information Confidential?

The CEO, in consultation with the Manager of Test Development and Certification, Credentialing Department, and Governance and Accreditation Manager will approve all requests for data and access to certificants.

As an accredited program, CCI is required to make public certain data about its certificants (e.g., demographic breakdown of certificants, number of certificants, number of test-takers, and pass rates for certification exams). All data are de-identified and shared in aggregate only, in accordance with Federal privacy law.

During the professional portfolio review process, your documents will be reviewed by three peers holding the CNS-CP credential. Your documents during this process are confidential. Peer reviewers have view-only access to the account.

Is My Information Public or Shared with Third Parties?

CCI may process certificant data based on the following grounds, as appropriate: you have provided your consent which can be withdrawn at any time; the processing is necessary for the performance of a contract to which you are a party, including processing of exams, certification or recertification applications; the processing is necessary to meeting legal obligations or to defend or maintain any claims involving us or our applicants and certificants; the processing is required to protect your vital and legal interests or those of another person; or the processing is necessary for the purposes of CCI's operations and mission.

Is Credential Status Verified?

Verification of your credential can be accessed through the CCI website.

Misuse or Misrepresentation of Certification

What Happens If I Misuse or Misrepresent the Credential?

Any misuse or misrepresentation of the CNS-CP credential by those not currently holding the credential shall be subject to legal action by CCI. This includes use of the CNS-CP credential once the credential has lapsed. CCI may render sanctions against the individual, which may include, but not be limited to the following:

- Suspension from submitting a portfolio for an indefinite or specified period of time.
- At the discretion of the CCI Certification Council and as allowable by law, CCI may notify the State Board of Nursing, candidate's employer, insurance company, or other public health agency.

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Revocation of Credential

Can My Credential Be Revoked?

CCI may deny, suspend, or revoke certification for cause, including but not limited to the following:

- failing to complete or provide evidence of completion of the requirements for initial certification and certification renewal*;
- failure to maintain the required professional licensure
- determination that initial certification or certification renewal was improperly granted
- falsification or misstatement of information on any certification-related document;
- providing false or misleading information;
- misrepresentation regarding credentialing status;
- cheating or assisting others to cheat;
- causing, creating or participating in an examination irregularity;
- assisting others to wrongfully obtain initial certification or certification renewal;
- failure to comply with the scope and standards of practice in an area in which the certification is held;
- misuse of or misrepresentation with respect to the CCI credential;
- commission of a crime or gross negligence in the practice of nursing;
- violation of CCI policy or procedure;
- failure of audit processes;
- failure to comply with the American Nurses Association's Code of Ethics for Nurses with Interpretive Statements;
- conduct unbecoming of the nursing profession; and
- has not paid all outstanding debts to CCI.

*Certified nurses will be informed by letter of CCI's decision to revoke the CNS-CP status. There will be no refund if, for any reason, CNS-CP status is revoked.

CCI Complaint, Disciplinary, and Appeals Processes

Does CCI Have an Appeals or Complaint Process?

Yes. Please see Appendix E for more information

Introduction to Recertification

What Is Recertification?

The continued documented validation of the professional achievement of identified standards of practice by an individual CNS-CP providing advanced practice perioperative nursing care.

What Are the Purposes of Recertification?

Recertification:

- Recognizes the individual CNS who is proficient in practice.
- Supports the development of theoretical constructs which strengthen advanced perioperative nursing practice.
- Enhances professional development through continued learning that results in acquisition of current knowledge to expand advanced practice skill sets.

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Why Should I Recertify?

The rapid pace of change and the prevalence of technology in the modern perioperative setting require a conscious effort to maintain competency. The CNS-CP certification is conferred by CCI for a period of 5 years, at which time a CNS-CP may seek recertification. The required CNS-CP recertification activities flow from and are consistent with the knowledge and task statements of the Job Analysis, performed on a 5-year cycle. The recertification requirements guide professional development activities in providing parameters for acceptable practice, and in maintaining a link to the most current body of knowledge. Linking the certification period to the Job Analysis cycle ensures that certificants are engaged in activities pertinent to their professional development.

Competency is the actual performance in a situation, and consists of three components: knowledge, skills and attitude. Each of these components is a necessary element. The CNS-CP recertification process acknowledges the need for active work in the maintenance of continuing competency by directly addressing all three components. The practice requirement facilitates the maintenance of current skills and promotes the acquisition of new skills through exposure to the practice setting. Other professional development activities e.g., continuing education, facilitate the acquisition of knowledge, which is the second essential component of competency. The self-awareness component of CNS-CP recertification provides an opportunity to thoughtfully reflect on the need for the acquisition of additional skills and knowledge which is then linked to the next recertification plan and thus promotes a positive change in attitude, the third component of competency.

Recertification: Maintaining Your Credential

When Do I Recertify?

The certified status of a Clinical Nurse Specialist is conferred by CCI for a period of 5 years, at which time a CNS-CP may seek recertification. The recertification process requires a CNS-CP to choose a method of recertification, complete recertification activities during the accrual period, and meet recertification eligibility requirements.

What Is An Accrual Period?

The accrual period is the time period in which the certificant must complete continuing education or professional development activities.

When Are the Accrual Deadlines?

Year Certified	Recertification Year	Recertification Earning Period	Recertification Applications Accepted	Recertification Application Deadline
2015	2020	2015-2019	Jan 1 – Dec 31, 2020	December 31, 2020
2016	2021	2016-2020	Jan 1 – Dec 31, 2021	December 31, 2021
2017	2022	2017-2021	Jan 1-Dec 31, 2022	December 31, 2022
2018	2023	2018-2022	Jan 1-Dec 31, 2023	December 31, 2023
2019	2024	2019-2023	Jan 1-Dec 31, 2024	December 31, 2024
2020	2025	2020-2024	Jan 1-Dec 31, 2025	December 31, 2025

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What Must I Do to Recertify?

To recertify your credential, you must:

- Meet the recertification eligibility requirements (these differ from requirements for first-time certification).
- Choose a recertification method and complete recertification activities during your accrual period.
- Complete CCI's application during your recertification year.
- Pay the application fee.

What Are the Eligibility Requirements to Recertify?

Recognizing that certificants transition into a variety of roles, and all patients benefit from the care provided by a certified nurse, CNS-CP recertification candidates must meet the following eligibility requirements at the time of application:

- Hold an active CNS-CP credential.
- Hold a current, unrestricted RN and/or APRN license.
- Be currently employed as a CNS in the perioperative setting in one or more of the following areas:
    - Clinical expert in the delivery of advanced perioperative care
    - Consultant (intra- and multidisciplinary)
    - Educator of nurses, other healthcare providers, patient, family, and/or community
    - Researcher
    - Organizational/systems change agent

For those nurses holding both CNS-CP and CNOR and/or CSSM credentials, recertification eligibility requirements must be met for each credential.

What Are the Fees for Recertification?

Please see below for current list of recertification fees, options, and available discounts. Applications cannot be processed without payment. All fees and/or outstanding debts to CCI must be paid by December 31 of your recertification year.

CNS-CP Recertification Method	Standard Fee
Recertification by Continuing Education Contact Hours, Professional Activity Points	$350*
Recertification by Professional Portfolio	$375*
CNS-CP Emeritus Status	$125

*CNOR Discount: CNS-CP certificants who also hold the CNOR credential receive a $50 discount off the standard recertification fee.

Recertification Methods

To recertify the credential, certificants choose a recertification method, which includes a prescribed plan for continued professional development. Certificants have up to 5 years to complete their recertification activities and apply for recertification the following year. Refer to accrual table (above) for earning windows for contact hours and professional activities.

What Are the Recertification Methods?

The CNS-CP Recertification program is made up of two components:

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1. *Addressing knowledge deficits* through ongoing continuing education. The number of contact hours required for recertification is based on the results of the self-awareness activity (portfolio). In addition to any contact hours required for individual subject areas, applicants must complete 10 contact hours related to pharmacology. Appendix B outlines the specific requirements of recertification by contact hours.
2. *Demonstration of skills* through a variety of self-selected activities meant to showcase the unique skills set of the Clinical Nurse Specialist in the perioperative setting. The 125 activity points required for CNS-CP recertification may be acquired through any of the 9 eligible activities listed below. Candidates are not required to submit points in every category. All points must be earned through activities that provide content specific to or with direct application to perioperative nursing. Appendix C outlines the specific requirements of recertification by professional activity points.

Recertification Option A

Continuing Education and Professional Activities:

- Complete 125 Professional Activity points and the contact hours requirement.
- Complete 1,000 hours as a CNS in the perioperative setting in the 5-year recertification cycle. If the number of practice hours does not meet the minimum requirement, Option B must be chosen.
- Practice hours may be accrued in any of the following areas:
    - clinical expert in delivery of advanced perioperative care
    - consultant (intra-and multidisciplinary)
    - education of nurses, other healthcare providers, patient, family, and/or community
    - clinical inquiry (evidence-based practice projects and/or research)
    - organizational/systems change

Recertification Option B

Professional Portfolio (if practice hour requirement is not met):

- Complete the Professional Portfolio.
    - To prevent the credential from expiring, the last day to submit a Professional Portfolio is November 1 of the year certification is due to lapse. Certificants must have received approval of the portfolio by December 31 of the year certification is due to lapse or their CNS-CP credential will expire.
    - At its discretion, CCI may grant a 1-year extension to individuals whose portfolio has not been approved by December 31 of the year the certification is due to lapse. The extension year will allow certificants additional time to complete their project and finish the portfolio. The credential will remain in an active status during the extension year. If the portfolio has not been completed by December 31 of the extension year, the credential will lapse.

The same policies for CNS-CP certification by professional portfolio apply to CNS-CP recertification by portfolio. Please see "Completing the CNS-CP Portfolio" in the certification section of this handbook for more details.

How Do I Submit My Recertification Application?

A complete application includes:

- Application, including personal and work information
- Required supporting documents
- Application fee
- Signed Statement of Understanding
- Mail the completed CNS-CP Recertification application to: CCI, 2170 South Parker Road Suite 120, Denver, CO 80231

What Happens If I Am Audited?

A percentage of recertification applications are randomly selected by CCI for audit. Additionally, if there is reason to believe there has been a breach in the integrity of the process by an individual seeking recertification, CCI may also select those individuals for audit.

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Applicants selected for audit will be required to submit additional documentation (see Appendix D). Contact CCI for more information if verification of employment is required. An e-mail will be sent to the applicant detailing the results of the audit after the documents have been reviewed.

Emeritus and Lapsed Status Credential Status

How Do I Obtain Emeritus Status of the Credential?

CCI offers CNS-CPs who are retiring from professional advanced practice perioperative nursing, changing professional direction, etc., the option to maintain their credential in an Emeritus capacity with the CNS-CP Emeritus status or CNS-CP (E). Those holding the CNS-CP(E) designation are eligible to sit on CNS-CP portfolio committees and serve as portfolio peer reviewers.

The certificant must currently hold the CNS-CP credential in good standing to apply for CNS-CP Emeritus status. The CNS-CP Emeritus credential is not available if the CNS-CP credential has lapsed.

What Happens If My Credential Lapses?

If your CNS-CP credential lapses or expires, a Professional Portfolio must be submitted and approved. All eligibility requirements must be met at the time of application. You are not eligible to use the CNS-CP credential after it has lapsed.

If your CNS-CP credential expires, contact hours and professional activities will not be accepted to regain certified status.

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Appendix A: Task and Knowledge Statements

Subject Area 1: Clinical Expert in the Delivery of Advanced Practice Perioperative Care

(31% of role)

Knowledge Statements

1. Behavioral responses to physiological and psychological stressors
2. Communication
3. Community dynamics
4. Conflict resolution
5. Differential diagnosis
6. Diversity (cultural and/or generational)
7. Metabolic needs
8. National accepted clinical guidelines and recommended practices
9. Pain management
10. Pathophysiology/surgical pathology
11. Patient/family dynamics
12. Pharmacology
13. Physical assessment
14. Risk mitigation
15. Scope of Advanced Nursing Practice
16. Scope of Nursing Practice
17. Surgical/procedural anatomy
18. Treatment plans

Tasks

1. Conduct comprehensive, holistic wellness and illness assessments using evidence-based techniques, tools, and methods.
2. Assess, monitor, and recognize complex physiologic responses of patients (i.e. continuous surveillance).
3. Collaborate with patients and families regarding discharge planning.
4. Demonstrate complex clinical judgment and reasoning in perioperative nursing care.
5. Appraise patients' knowledge regarding wound care and the phases of wound healing
6. Determine the presence and adequacy of a patient's support system and prescribes necessary modalities.
7. Develop or implement systems to ensure safe practices.
8. Diagnose, interpret findings, and manage the patient for signs and symptoms of alterations in health status.
9. Evaluate nutritional status and prescribe appropriate treatment modalities.
10. Evaluate patients' pain control needs and formulate an individualized pain management plan.
11. Evaluate protective measures to prevent alterations in health status of individuals and groups at risk.
12. Incorporate the patient's psychological, philosophical, cultural, and spiritual beliefs, values, and wishes concerning care when formulating the treatment plan.
13. Formulate differential diagnosis.
14. Formulate individualized treatment plans.
15. Evaluate the feasibility of the patients' expectations for the next level of care.
16. Identify patients who are at risk for the presence of physical barriers or potential hazards in the home.
17. Identify psychosocial issues specific to medication management.
18. Implement measures of psychological support to patients and family.
19. Independently integrate and apply in-depth principles of traditional, complementary, and alternative medicine to ensure optimal patient outcomes.
20. Order and perform procedures to compare clinical findings to ensure optimal patient outcomes.
21. Order, prescribe, initiate, and interpret diagnostic, therapeutic, and/or pharmacologic interventions.

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22. Perform comprehensive and individualized patient assessments.
23. Perform history and physical examinations.
24. Provide an in-depth interpretation of patient conditions and gives rationales for procedures.
25. Provide anticipatory guidance for expected and potential situational changes.
26. Synthesize knowledge of therapeutic regimens and patient response for evaluation of care.

Recommended References

AORN. (current edition). *Guidelines for perioperative practice*. Denver: AORN Inc.

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Arcangelo, V.P., & Peterson, A.M. (2016). *Pharmacotherapeutics for advanced practice* (4th ed.). Ambler, PA: Lippincott Williams & Wilkins.

Bickley, L. (2016). *Bates' nursing guide to physical examination and history taking.* Philadelphia: Wolters Kluwer Health/ Lippincott Williams & Wilkins.

Doherty, G. (2015). *Current diagnosis and treatment: Surgery* (14th ed.). United States: McGraw-Hill Medical.

Goolsby, M.J., & Grubbs, L. (2018). Advanced assessment: Interpreting findings and formulating differential diagnoses (4th ed.). Philadelphia: F.A. Davis.

McCance, K.L., & Huether, S.E. (2018). *Pathophysiology: The biologic basis for disease in adults and children* (8th ed.). St. Louis, MO: Mosby Elsevier.

Mulholland, M.W., & Doherty, G.M. (2011). *Complications in surgery* (2nd ed.). Ambler, PA: Lippincott Williams & Wilkins.

Pagana, K.D., Pagana, T.J., & Pagana, T.N. (2020). Mosby's diagnostic and laboratory test reference (14th ed.). St. Louis, MO: Elsevier.

Phillips, N. (2017). *Berry and Kohn's Operating room technique* (13th ed.). Philadelphia: Elsevier.

Rothrock, J.C. (Ed.). (2019). *Alexander's care of the patient in surgery* (16th ed.). St. Louis, MO: Mosby Elsevier.

Venes, D. (Ed.). (2017). *Taber's cyclopedic medical dictionary* (23rd ed.). Philadelphia: F.A. Davis.

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Subject Area 2: Consultant (intradisciplinary and multidisciplinary)

(16% of role)

Knowledge Statements

1. Change theory
2. Communication
3. Conflict resolution
4. Leadership development for multidisciplinary collaboration
5. Negotiation
6. Patient/family dynamics
7. Risk mitigation
8. Strategic planning

Tasks

1. Collaborate with other disciplines and coordinates multidisciplinary activities (e.g., education, consultation, patient management, research opportunities) to enhance patient care.
2. Consult with the appropriate health care providers to initiate new treatments or change existing treatments.
3. Provide consultation services to the organization to achieve quality, cost-effective outcomes for perioperative patients.
4. Serve as an expert resource on perioperative issues.

Recommended Reference

Tracy, M.F., & O'Grady, E.T. (2018). *Hamric and Hanson's advanced practice nursing: An integrative approach* (6th ed.). St. Louis, MO: Elsevier.

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Subject Area 3: Education (nurse, other healthcare providers, patient, family, and community)

(13% of role)

Knowledge Statements

1. Communication
2. Community dynamics
3. Conflict resolution
4. Learning theory across the lifespan
5. Patient/family dynamics
6. Risk mitigation
7. Theories of teaching mentoring and coaching

Tasks

1. Develop perioperative educational programs for:
    a. healthcare professionals; and
    b. individual patients, groups of patients, and their designated support persons based on identified needs the community.
2. Coordinate perioperative educational programs for:
    a. healthcare professionals;
    b. individual patients, groups of patients, and their designated support persons based on identified needs; and
    c. the community.
3. Implement perioperative educational programs for:
    a. healthcare professionals;
    b. individual patients, groups of patients, and their designated support persons based on identified needs; and
    c. the community.
4. Evaluate perioperative educational programs for:
    a. healthcare professionals;
    b. individual patients, groups of patients, and their designated support persons based on identified needs; and
    c. the community.
5. Link teaching to evidence-based practice and its effects on clinical and fiscal outcomes.

Recommended References

Zuzelo, P. R. (2010). *The Clinical Nurse Specialist handbook* (2nd ed.). Philadelphia: Jones and Bartlett Publishers.

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Subject Area 4: Clinical Inquiry

(15% of role)

Knowledge Statements

1. Clinical inquiry/critical thinking
2. Evidence-based practice
3. Outcome evaluation methods
4. Research principles
5. Research utilization
6. Risk mitigation
7. Statistics

Tasks

1. Evaluate health outcomes to assist in shaping health care and nursing practice.
2. Evaluate the outcomes of patient safety initiatives.
3. Interpret research findings and use scientific inquiry to validate and/or change clinical practice.
4. Participate in the generation, application, and /or dissemination of research and Evidence-Based Practice.
5. Promote the use of nationally accepted clinical practice guidelines and standards.
6. Provide leadership when applying research to practice innovations which enhance patient care.
7. Submit findings of clinical research, Evidence-Based Practice and process improvement projects to scholarly journals and/or for poster or educational sessions at conferences.
8. Synthesize research findings.

Recommended References

Dearholt, S.L., & Dang, D. (Eds.). (2017). *Johns Hopkins Evidence-based practice: Model and guidelines* (3rd ed.). Indianapolis: Sigma Theta Tau.

Polit, D., & Beck, C.T. (2016). *Nursing research: Generating and assessing evidence for nursing practice* (10th ed.). Ambler, PA: Wolters Kluwer Health/ Lippincott Williams & Wilkins.

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Subject Area 5: Organizational and Systems Thinking

(16% of role)

Knowledge Statements

1. Community dynamics
2. Dissemination of perioperative scholarly work
3. Healthcare economics
4. Healthcare informatics
5. Perioperative facility design
6. Project Planning
7. Risk mitigation
8. Statistics
9. Strategic planning
10. Systems thinking

Tasks

1. Actively participate in the organization's method of financing delivery of care.
2. Analyze human factors that influence adherence to policies, procedures, standards of care, and documentation.
3. Analyze legislative review and policy making that influences health services.
4. Cultivate system awareness of advancements in health care through membership in professional organizations.
5. Evaluate the organization for limitations and recommend improvements that influence patient health outcomes.
6. Facilitate multidisciplinary groups in designing and/or implementing innovative practices and alternative solutions to patient care issues.
7. Identify risk management strategies and develop performance improvement programs to establish and maintain a safe therapeutic environment.
8. Integrate a culture of safety within the organization.
9. Interpret or facilitate staff member access to and compliance with current state, local and federal safety regulations and accreditation standards (e.g., The Joint Commission, OSHA).
10. Lead in new technology and product review committees.
11. Promote nursing practice that is visionary and inventive to improve delivery of care.
12. Promote system participation in efforts to diminish cost and unnecessary duplication of testing and diagnostic activities and facilitates timely treatment of patients.
13. Validate the effects of risk analysis and reduction initiatives.

Recommended References

Kleinpell, R.M. (2017). *Outcome assessment in advanced practice nursing* (4th ed.). NY: Springer Publishing Co.

Subject Area 6: Professional Accountability

(9% of role)

Knowledge Statements

1. Dissemination of perioperative scholarly work
2. Ethics
3. Health policy regulation and legislation
4. National accepted clinical guidelines and recommended practices
5. Nursing and other applicable theories
6. Risk mitigation
7. Scope of Advanced Nursing Practice
8. Scope of Nursing Practice

Tasks

1. Coach professionals to provide care that leads to the highest standards of practice.
2. Contribute to the development of services that are consistent, comparable in all settings, and performed within the legal and ethical scope of practice.
3. Educate patients of the risks, benefits, and expected outcomes of planned procedures and provide informed consent.
4. Evaluate care according to professional standards and state Advanced Practice nursing regulations.
5. Evaluate the ethical implications of scientific advances, their cost and clinical effectiveness, and patients' and designated support persons' acceptance and satisfaction with these advances.
6. Demonstrate professional accountability.
7. Promote the dimensions of perioperative APRN practice to the public, legislators, policy makers, the nursing profession and other health care professionals.
8. Serve as a role model to encourage other professionals to remain current within their profession by attending workshops or association meetings, reading journals, and participating on committees.
9. Utilize an ethical framework to evaluate individual or system issues regarding care.

Recommended References

American Nurses Association. (2015). *Scope and standards of practice* (3rd ed.). Silver Spring, MD: Author.

Duffy, M., Dresser, S., & Fulton, J. (Eds) (2016). *Clinical Nurse Specialist toolkit: A guide for the new Clinical Nurse Specialist* (2nd ed.). NY: Springer Publishing Co.

Fulton, J.S., Lyon, B.L., & Goudreau, K. (2014). *Foundations of Clinical Nurse Specialist practice*. NY: Springer Publishing Co.

NACNS. (2018). *CNS core competencies.* Retrieved from https://nacns.org/professional-resources/practice-and-cns-role/cns-competencies/

Please note: References are current as of November 15, 2019. More current versions of these references may be available.

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Appendix B: Contact Hour Requirements

Requirements

Continuing education requirements direct professional development by enhancing the knowledge level of the certificant. Contact hour requirements are generated from those subject areas scoring below the standard (either rubric from portfolio or scorecard from test) or identified as an opportunity for growth (self-awareness tool, portfolio). See the table below to determine the contact hour requirements for each subject area.

Subject Area	Required Number of Contact Hours
Clinical expert in the delivery of advanced practice perioperative care	31
Consultant (Intra-and multidisciplinary)	16
Education (nurse, other healthcare providers, patient, family, and community)	13
Clinical Inquiry (evidence-based practice projects and/or research)	15
Organizational and systems thinking	16
Professional accountability	9

Please note: Only continuing education which reflects the clinical focus of the subject area may be used. In addition to any subject-based continuing education, 10 contact hours associated with advanced practice pharmacology must be earned. Contact hours must be earned during the current 5-year recertification cycle. The certificant is responsible for maintaining a record of contact hours.

Academic Credit

CNS-CPs may use academic credits to fulfill the continuing education requirement for recertification of the CNS-CP. All academic credits must meet the following criteria for them to be acceptable for use toward CNS-CP recertification.

Courses must be at the graduate or postgraduate level. Although courses must be taken for credit at an accredited academic institution, CSN-CPs do not need to be enrolled in a formal degree program at the time the course is taken. To be acceptable, a grade of B or better must be achieved for each course. Any course required for a degree program is acceptable if subject matter is consistent with the subject area of the Job Analysis.

Academic credits will be converted to contact hours using the following calculation:

1 semester hour = 15 contact hours
1 quarter hour = 10 contact hours

CME Credits

CNS-CPs may submit unlimited Category 1 Continuing Medical Education (CME) units to fulfill contact hour requirements. You are responsible for converting CME credits into contact hours using the ANCC conversion of:

1 CME credit = 1 contact hour

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Accredited, Approved Providers

Contact hours approved by any of the following groups are acceptable:

- American Nurses Credentialing Center (ANCC)
- An agency, organization, or educational institution accredited by ANCC
- Any State Board of Nursing
- Any state nurses' association
- Association of periOperative Registered Nurses (AORN)
- American Association of Critical-Care Nurses (AACN)
- American Association of Neuroscience Nurses (AANN)
- American Association of Nurse Anesthetists (AANA)
- Association of Women's Health, Obstetric, and Neonatal Nurses (AWHONN, formerly NAACOG)
- American Academy of Family Practitioners (AAFP)
- American Academy of Nurse Practitioners (AANP)
- American Academy of Physicians Assistants (AAPA)
- American College of Nurse Midwives (ACNM)
- National Association of Clinical Nurse Specialists (NACNS)
- National Association of Nurse Practitioners in Women's Health (NPWH)
- National Association of Pediatric Nurse Associates and Practitioners (NAPNAP)

Certificates from other groups deemed equivalent to those listed above may be accepted. This decision will be approved by the CEO in consultation with the Credentialing Manager.

Approved Topics

To ensure the validity of this credential and its consistency with industry standards, CCI requires contact hours earned for CNS-CP recertification to be related to the specialty of perioperative nursing at the advanced practice level. Although the following is not an all-inclusive list, it provides a broad range of APRN perioperative-related topics.

- Advanced pathophysiology
- Advanced physical assessment, including differential diagnosis
- Advanced pharmacology
- Legal issues related to advanced practice
- Monitoring and treating physiologic responses to surgical stressors
- Pain management, including pharmacologic and non-pharmacologic interventions
- Change theory
- Conflict resolution
- Interprofessional collaboration
- Strategic planning
- Risk analysis/risk mitigation
- Teaching/learning theories
- Educational programs that incorporate the three spheres of influence
- Clinical inquiry (evidence-based practice projects and/or research)
- Healthcare economics
- Health policy regulation/legislation

The candidate must maintain a copy of the certificate of attendance for each approved program and submit such records if audited. Every certificate of attendance must have an accreditation statement and provider number.

If a candidate attended a program and did not receive, or lost, the certificate of attendance, the applicant is responsible for contacting the program sponsor for a replacement certificate.

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The following DO NOT meet the criteria for recertification and are, therefore, not acceptable:

- Handwritten accreditation statements or provider numbers.
- Certificates of attendance without an appropriate accreditation statement and/or acceptable provider number.
- Contact hours earned prior to January 1 of the year certified.
- Provider numbers that do not state Board of Registered Nursing.

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Appendix C: Recertification by Points

Points for CNS-CP recertification may be acquired through any of the following categories. Points do not have to be accrued in every category. Please see Appendix D for a list of documents which must be supplied if certificant is audited.

- Academic Study, Graduate or Post-Graduate Level
- Service on a Board or Committee
- Clinical Inquiry (Evidence-Based Practice (EBP) Projects, Quality Assurance/Quality Improvement, or Research)
- Teaching in an Academic Setting
- Precepting
- Presentations
- Publishing
- Volunteer on CCI Test Development Committee
- CNS Certification Maintenance and/or Achievement
- Earning another Accredited Perioperative Certification
- Professional Perioperative-Related Volunteer Service

Please note: Except for academic study, there is a maximum number of points allowed for each activity. The candidate must earn a total of 125 points to recertify the CNS-CP credential.

Academic Study

An unlimited number of points may be earned in the Academic Study category. Enrollment in a degree program is not required; however, the course must be taken for credit at an accredited academic institution. A grade of "B" or higher is required. The same course cannot be used for both Continuing Education and Professional Activities. The conversion rate for academic credit is as follows:

1 semester hour/credit = 15 points
1 quarter hour = 10 points

Service as a Board or Committee Member

A maximum of 60 points may be earned in the Service as a Board or Committee Member category.

- International, National or State Board Member = 30 points per year
- Local or facility level = 15 points per year

Clinical Inquiry

A maximum of 60 points may be earned in the Clinical Inquiry category. The CNS-CP credential carries with it an expectation that the CNS in perioperative practice can interpret research findings and incorporate scientific results to validate and/or change clinical practice. Research, QA/QI, and EBP projects may be performed due to employer directives or independent of employment status. To receive points in this category, you must have had the primary responsibility for developing, implementing, and evaluating the project. The activity must show evidence of the participation in or application of research that improves current practice and/or patient outcomes.

Role	Point Value
Primary Investigator or Primary Project Leader	50 points/project
Co-Investigator or Project Lead	30 points/project

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Teaching in an Academic Setting

A maximum of 90 points may be earned in the Teaching in an Academic Setting category. CNSs in perioperative practice who teach in academic programs may claim the same amount of credit as that awarded to the students enrolled in the course. Courses must be a graduate or post-graduate level course in an accredited school and have a perioperative component. Students may include residents, interns, physicians, Physician Assistants, graduate/doctoral nursing students, and/or APRNs (Nurse Practitioners [NPs]/Clinical Nurse Specialists [CNSs]/Certified Nurse Midwives [CNMs], and Certified Registered Nurse Anesthetists [CRNAs]). Conversion rate for academic credit is as follows:

1 semester hour/credit = 15 points
1 quarter hour = 10 points

Precepting

A maximum of 60 points may be earned in the Precepting category. CNSs who precept APRN (NP, CNS, CNM, or CRNA) students may claim the same amount of credit as that awarded to the student enrolled in the course. Nursing students must be enrolled in an accredited graduate nursing education program. Students must be present for at least one academic quarter, semester, or the entire clinical rotation. The preceptorship should be in a one-on-one relationship focusing on exposure to the role of the CNS in the perioperative setting. Preceptorships involving partial clinical experiences or undergraduate students will not be accepted. This option does not apply to orienting new staff to workplace. Conversion rate for precepting is as follows:

1 semester hour/credit = 15 points
1 quarter hour = 10 points

Presentations

A maximum of 50 points may be earned in the Presentation category. The presentation must be related to advanced practice perioperative nursing in one or more of the following:

- Direct patient care
- Consulting
- Education (patient, family, nurse, health care provider, and community)
- Clinical inquiry (evidence-based practice projects and/or research)
- Organizational/systems thinking
- Professional accountability

Points awarded by presentation type:

- Podium presentation (must be minimum 30 minutes in length) = 30 points
- In-service (must be minimum of 30 minutes in length) = 25 points
- Remote presentation (i.e., webinar) (must be 30 minutes in length) = 20 points
- Poster presentation = 20 points

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Publishing

A maximum of 75 points may be earned in the Publishing category. Acceptable documents include:

- Original work for books, peer-reviewed journals, professional newsletters, patient/family educational material or electronic media that requires review and synthesis of current literature.
  - Article/book must be related to advanced practice perioperative nursing in one or more of the following areas:
    - direct patient care
    - consulting
    - education (patient, family, nurse, health care provider and community)
    - clinical inquiry (evidence-based practice projects and/or research)
    - organizational/systems thinking
    - professional accountability

Except for publications with a patient/family education focus, publication must be directed at a professional audience. The material must have been accepted for publication during the 5-year recertification cycle.

Material	Point Value
Doctoral Dissertation	100 points
DNP Capstone Project	75 points
Primary Author, Book Chapter	50 points
Guest Editor, Peer-Reviewed Journal Issue	50 points
Primary Author, Peer-Reviewed Journal Article	50 points
Secondary Author, Book Chapter	30 points
Editorial, Peer-Reviewed Journal	30 points
Secondary Author, Peer-Reviewed Journal Article	30 points
Subject Matter Expert (SME) or Reviewer for Journal Article or Book Chapter	20 points
Author, Book Review	20 points
Developer/Author of a Patient Education or Healthcare Professional Resource	20 points
Poster Presentation at a Professional Meeting	20 points

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Volunteer, CCI Test Development Committee
A maximum of 100 points may be earned for serving as a volunteer for a CCI test development committee. A CNS-CP who serves as a subject matter expert for CCI exam test development committees may earn points for recertification.

Committee	Point Value
Job Analysis	100 points
Task Force (in-person)	25 points
Survey Completion (remote)	5 points
Survey Review Call	10 points
Pilot Survey Review Call	10 points
Subgroup Analysis Call	15 points
Test Specs (in-person)	25 points
Crosswalk Call	10 points
Item Writer (in-person)	30 points
Item Writer (remote)	0.5 points/item
Cut Score/Standard Setting	30 points/appointment
Item Review (in person)	25 points
Item Review (remote)	15 points
Form Review (in-person)	25 points
Problem Identification Notification (PIN)	10 points
Alternate	5 points
Other: Ad Hoc Committee (specify)	15 points

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Volunteer, CNS-CP Professional Portfolio Development Committee

CNS-CP Portfolio-Related Activity	Point Value
Job Analysis	
Task Force (in-person)	25 points
Survey Completion (remote)	5 points
Survey Review Call	10 points
Pilot Survey Review Call	10 points
Subgroup Analysis Call	15 points
Blueprint Development	25 points
Standards Committee	30 points/appointment
Peer Reviewer Committee	25 points/appointment
Pilot Activity Committee	15 points/appointment
Peer Reviewer	15 points/appointment
Other: Ad Hoc Committee (specify)	15 points

CNS Certification Maintenance and/or Achievement

A maximum of 45 points may be earned in the CNS Certification/Maintenance category.

Primary APRN Certification	Points Awarded
Initial APRN primary (population) certification	30 points
Maintaining APRN primary (population) certification	20 points/renewal period
Attaining/maintaining prescriptive authority	15 points/renewal period

Attain/Maintain Perioperative-Related Certification

A maximum of 100 points may be earned for earning an accredited perioperative-related certification or completing the recertification process for an accredited perioperative-related certification. Examples of accredited perioperative-related certifications include CAPA, CPAN, CRCST, or ABCGN. Accreditation by ANSI, ABSNC, or NCCA will meet these criteria. This list is not intended to be all-inclusive. Other accredited certification deemed equivalent by the CEO of CCI in consultation with the Credentialing Manager may be accepted. Please note: Other CCI credentials (CSSM, CNOR) do not qualify for additional points in this category.

Attain/Maintain an Accredited Perioperative Certification	
Initial Certification	30 points
Completion of Certification	20 points

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Professional Perioperative-Related Volunteer Service

A maximum of 100 points may be earned for medically-related volunteer service activities. Examples include surgical mission trips and service at medically underserved clinics.

Role	Point Value
Professional Medically-Related Volunteer Service	20 points/year of service or project

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Appendix D: Recertification Audit Documentation

A percentage of recertification applications will be randomly selected for audit. If you are selected, you will be notified after you have submitted your recertification application. Applicants chosen for audit will be required to submit copies of specific documentation, as outlined below.

1. CONTINUING EDUCATION
   a. Copies of certificate(s) of attendance from an accepted provider. The certificant is responsible for providing the certificates of attendance. Transcript may be accepted in lieu of certificates but must include accredited provider name and number. Transcripts that do not include accrediting provider information will not be accepted.
2. ACADEMIC STUDY TOWARD HEALTHCARE-RELATED DEGREE COMPLETION
   a. Copy of official or unofficial transcript.
3. PUBLISHING
   a. Copy of the title page, table of contents, or abstract indicating you are the author, co-author or contributor.
4. SERVICE AS A BOARD OR COMMITTEE MEMBER
   a. Board summary, minutes, or committee report (minimum of four meetings per year required).
5. PRESENTATIONS
   a. Program brochure, activity documentation form (ADF), or completed course evaluation. Each document must include title, presentation, date, and objectives of presentation.
6. TEACHING A PERIOPERATIVE-RELATED COURSE IN ACADEMIC SETTING
   a. Syllabus, course description, or other documentation that verifies name and role as instructor.
7. PRECEPTING / MENTORING IN THE PERIOPERATIVE NURSE ROLE
   a. Letter from applicant's supervisor confirming precepting/mentoring experience.
8. CCI VOLUNTEER COMMITTEE TEST DEVELOPMENT COMMITTEE
   a. Certificate of completion from each committee assignment
   b. Letter of participation
9. ATTAIN/MAINTAIN PERIOPERATIVE-RELATED CERTIFICATION
   a. Copy of certificate or wallet card.
10. CLINICAL INQUIRY
    a. A final report which summarizes evidence of participation in a QA, QI, EBP, or research project, including its impact on current practice and/or patient outcomes.
11. PROFESSIONAL ORGANIZATION ACTIVITIES
    a. Copy of points certificate.

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Appendix E: Complaint, Disciplinary, and Appeals Processes

Appeals Regarding Non-Disciplinary Matters

Candidates who are deemed ineligible to take the exam or submit a portfolio may appeal that decision as a non-disciplinary matter not subject to the disciplinary appeals process. Eligibility is determined by the Credentialing Coordinator.

All appeals regarding eligibility decisions shall be referred to the Manager of Test Development and Certification for further review. The candidate may be asked for additional information to substantiate his or her claim of eligibility. The Manager of Test Development and Certification may uphold or overturn the previous decision. If upheld, the candidate may request a final determination from CCI.

Candidates who experience alleged disruptive and/or inappropriate exam administration conditions may petition to reschedule and re-take the exam without waiting the required 30 days and/or without additional charge. Any such petition may be granted by CCI at its sole discretion.

There can be no appeal for failure to achieve a passing score on the examination, non-approval of a portfolio submission for initial certification, lack of current RN license, or failure to register for the exam by the deadline.

Appeals Regarding Disciplinary Matters

There shall be a Board of Appeals, consisting of individuals not involved in the original disciplinary action, and appointed by the CCI Certification Council, as needed, for any certificant seeking appeal of a decision made by the CCI Disciplinary Committee, as under the Disciplinary Procedures set forth in CCI policy Section 9.10 et seq (found below under the title "Disciplinary Procedures/Sanctions"). Such Board of Appeals will be composed of a subset of the Certification Council not involved in the initial review and determination. The Chair of the Certification Council shall serve as Chair of the Appeals Committee. The committee will review and decide the appeal. Appointment of alternates will be made by the Chair in the event of a conflict of interest or unavailability of any members.

The Appeals Committee will review and determine any appeals solely on the basis of material errors of fact by the Disciplinary Committee in review and determination of any disciplinary action, or if CCI failed to follow published criteria, policies, or procedures during such process. Only facts and conditions up to and including the time of the CCI Disciplinary Committee's decision under CCI policy Section 9.10 et seq (found below under the title "Disciplinary Procedures/Sanctions") will be considered during appeal.

A written request for appeal, including supporting documentation, must be submitted by the certificant to the Appeals Committee Chair and CCI CEO, at 2170 S. Parker Road, Suite 120, Denver, CO 80231, within 30 days following the certificant's receipt of the Disciplinary Committee's decision and include reasons why the appeal should be granted. If a request for appeal is not received within that 30-day period, the matter will be considered closed. Acknowledgement of receipt of the request for appeal shall be sent by the Chair of the Appeals Committee to the certificant within 30 days of receipt by the Chair, along with a scheduled date for consideration of the appeal.

The Appeals Committee may affirm, reject, or modify the decision of the CCI Disciplinary Committee. At its sole discretion, the Appeals Committee may consider the appeal at a meeting in person or by conference call. The Appeals Committee shall limit its activities to review of the written record; it will not conduct a hearing and the rules of evidence, discovery, etc., will not apply. The written request for appeal, supporting documentation, and information related to the Disciplinary Committee's decision will be considered by the Appeals Committee according to the criteria and policies in effect at the time the determination was made.

The Appeals Committee will notify the certificant and Certification Council in writing within 30 days following its decision. The decision of the Appeals Committee, including a statement of the reasons for this decision, shall also be reported by the Certification Council to the individual who filed the complaint, if appropriate, and to relevant licensing boards. The Certification Council may decide also to make this information available to the certificant's employer, or other persons or organizations with a material interest in the matter.

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The decision of the Appeals Committee shall be final and binding. There will be no refund of any fees if disciplinary action is imposed.

Disciplinary Procedures/Sanctions

Certificants are required to continue to meet all applicable legal, ethical, and policy requirements of CCI during the time that they hold any CCI credential. Disciplinary action, including sanctions of public or private reprimand, censure, or suspensions or revocation of certification, may be taken by CCI for failing to meet or otherwise violating these requirements. Candidates and certificants shall be made aware of the basis for which certification can be revoked, or other disciplinary action taken. Certification can be denied, suspended or revoked for cause, including but not limited to the following:

- failure to complete or provide evidence of completion of the requirements for initial certification or certification renewal;
- failure to maintain the required professional licensure;
- determination that initial certification or certification renewal was improperly granted;
- falsification or mis-statement of information on any certification-related document;
- providing false or misleading information;
- misrepresentation regarding credentialing status;
- cheating or assisting others to cheat;
- causing, creating, or participating in an examination irregularity;
- assisting others to wrongfully obtain initial certification or to renew certification;
- failure to comply with the scope and standards of practice in an area in which the certification is held;
- misuse of or misrepresentation with respect to the CCI credential;
- commission of a crime or gross negligence in the practice of nursing;
- violation of CCI policy or procedure;
- failure of audit processes;
- failure to comply with the American Nurses Association's Code of Ethics for Nurses with Interpretive Statements;
- conduct unbecoming of the nursing profession; and
- has not paid all outstanding debts to CCI.

Any individual may submit information to CCI alleging violation of one of the standards listed above. In certain cases, CCI may refer complaints to the applicable state licensing board or other legal enforcement authority. The following procedures describe the process CCI uses to consider all complaints and take appropriate disciplinary action. CCI takes all reasonable measures to ensure that any materials regarding a complaint or disciplinary action process are kept confidential and discloses only that information which is required to resolve the complaint. This information is disclosed only to designated staff, legal counsel, and/or other such authorities (e.g., state licensing boards, human resources personnel, etc.) whose role is deemed to be material to resolution. The information and materials related to the complaint may also be provided to the candidate or certificant who is the subject of the complaint if necessary, to meet due process requirements.

Complaints or other information regarding certificants must be submitted in writing to the attention of the Manager of Test Development and Certification at the following address: Competency and Credentialing Institute, 2170 South Parker Road, Suite 120, Denver, Colorado 80231. Only written complaints will be considered. At its discretion, CCI may itself initiate complaints and investigate actions based on information obtained by or known to CCI (e.g., a certificant has falsified application information or CCI learns of information from newspaper, internet, state nursing boards or other sources).

All formal complaints must include the following:

- the name and contact information of the person initiating the complaint,
- a statement of the certificant's alleged misconduct,
- reasons why that misconduct warrants disciplinary action, and
- supporting documentation if available.

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If the CCI Credentialing Coordinator, Manager of Test Development and Certification, and Certification Council Chair determine that a complaint does not have merit, the complaint will be dismissed and the complainant so notified. A complaint will be dismissed if it is determined by the CCI Credentialing Coordinator, Manager of Test Development and Certification, and Certification Council Chair to be frivolous, inconsequential, unreliable, or does not constitute a matter for which disciplinary action may be taken. At the discretion of CCI, the complaint may also be referred to the CEO and/or legal counsel for review and input prior to the initial determination.

If the CCI Credentialing Coordinator and Manager of Test Development and Certification determine that the complaint has merit, the certificant accused of misconduct will be notified in writing that a complaint has been filed against them. The notice will include the facts of the complaint, identify the alleged violation, provide a copy of the procedures, identify the potential disciplinary action, and request any specific information that should be provided. In addition, the notice will state:

- that the certificant may submit a written response and supporting documentation within 30 days of receiving the notice from CCI;
- that the certificant may request the opportunity to appear by teleconference before the CCI Disciplinary Committee. The Disciplinary Committee is appointed by the CCI Certification Council, and is comprised of the Certification Council Vice Chair, and two other members of the Certification Council. Appearance may be granted at the sole discretion of the CCI Disciplinary Committee; and
- the date of the next Disciplinary Committee meeting or conference call at which the matter will be considered.

The CCI Disciplinary Committee, CCI staff, and legal counsel, as appropriate, will investigate the complaint and seek additional information. If the response to the notification is considered by the CCI Disciplinary Committee to be satisfactory and to adequately resolve the complaint, the matter will be considered closed and the certificant and complainant will be so notified. If the response is not considered satisfactory, the CCI Disciplinary Committee may request additional information and proceed as outlined below.

The CCI Disciplinary Committee will consider the matter at a regularly scheduled or special meeting. Review of the matter will not be a trial-type proceeding, and rules of evidence, discovery, etc., will not apply; instead, the CCI Disciplinary Committee will review the written record, may investigate the matter at its discretion, and may provide the certificant an opportunity to appear by teleconference to make a presentation and allow the CCI Disciplinary Committee to ask questions. It is not expected that the certificant be represented by counsel at their appearance, although the CCI Disciplinary Committee may consult counsel at any time. The CCI Disciplinary Committee will deliberate and issue a determination and course of disciplinary action, if any. Such action must be approved by the Certification Council at the next regularly scheduled or special meeting.

Written notification stating the CCI Disciplinary Committee's decision, including the reasons for its decision, and if the matter involves disciplinary action, will be sent to the certificant within 30 days following the meeting at which the matter was heard. The certificant will have the opportunity to appeal the decision in accordance with the CCI Appeals procedures under CCI policy Section 9.30 et seq (found below under the title "Appeals Regarding Disciplinary Matters" above).

If the decision is not appealed, and if appropriate, notice will also be sent to the individual who initiated the complaint to notify them the Council has issued a determination for this matter. To comply with privacy laws, details about the issued sanction will not be shared with the individual who filed the complaint. The CCI Disciplinary Committee and/or Certification Council may provide notice of the decision to relevant licensing boards. In accordance with Federal, State, and Local privacy laws, the CCI Disciplinary Committee and/or Certification Council may decide also, to make the information about the decision available, in accordance or as required by applicable law, and to permissible third parties or organizations with a material interest in the matter (e.g., employers and relevant state licensing boards). To comply with Federal privacy laws, the individual must be notified of any such action.

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