

Is Euthanasia the Answer for Your Credential?

Presentation for the
National Organization for Competency Assurance

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The Symptoms

- Profession/occupation has evolved more rapidly than the credential
- Volumes have not lived up to expectations
- Volumes have declined or plateaued
- High or increasing churn rate



Patient Evaluation



- What internal/external factors are impacting (or will impact) the program?
- What program features are impacting our success?
- Is this *just* a marketing problem?
- Why are volumes low and/or the churn rate high?

Patient Evaluation

- Are there reasons to continue despite low volumes?
- Do the resources expended justify the number of individuals served (or the benefits)?
- What else could we do with the resources we are devoting to the credential?
- What is the worst-case scenario if we discontinue the credential? If we keep it?



Now What?



Life Support

*DIRECTIVE TO PHYSICIANS
REGARDING
ARTIFICIAL LIFE SUPPORT*

*Physicians Regarding Artificial
ferred to as a*



Reincarnation

Euthanasia



Euthanasia and Rebirth



Euthanasia and Organ Donation



Five Stages of Grief

- Denial
- Anger
- Bargaining
- Depression
- Acceptance





The Afterlife

- What will we do with existing certificants?
- How will candidates in the pipeline be handled?
- What assets can be repurposed? Redistributed?
- What is a reasonable timetable?
- How will we communicate the changes?

Institute for Supply Management

■ WHO IS ISM?

- The first (1915), the largest (40,000), international
- Mission: To Lead Supply Management
- Certified Purchasing Manager (C.P.M.)
 - Started-1974 with over 47,000 certified
 - Last Date to apply Dec. 31, 2013
- Accredited Purchasing Practitioner (A.P.P.)
 - Started-1996 has over 8,800 certified
 - Last date to apply Feb. 28, 2007

WHY THE CHANGE?

- Market survey results
- Decline in new certificants
- Feedback from practitioners
- Change in profession
- What should SM BE doing- not what SM ARE doing.

OPTIONS? What options?

- Remain
- Reformat
- Rid

Program changes: Phase in approach

- Reminder: Expanding profession
- Don't issue any new designations after certain date
- Instituted a new program
- CPSM requirements:
 - Degree;
 - current programs do not-created backlash

Decision made - what next?

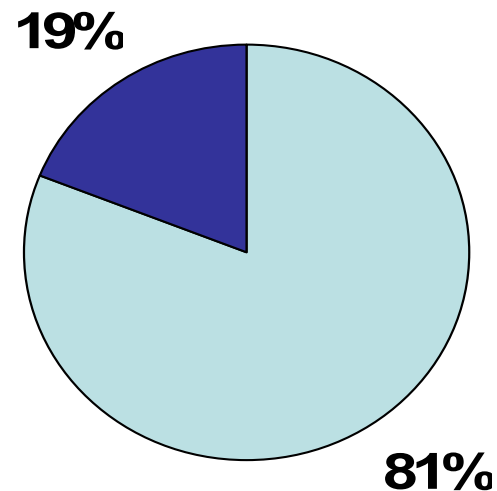
- Communicate, communicate, communicate and then communicate again!
- FAQs on Website
- Discussion forum, webseminars
- Update E-mails, e-newsletter and shows

American College of Healthcare Executives (ACHE)

The **American College of Healthcare Executives** is an international professional society of more than 30,000 healthcare executives who lead hospitals, healthcare systems and other healthcare organizations.

American College of Healthcare Executives (ACHE)

- Over 34,000 total members, including more than 3,300 Student Associates
- 28,800 Members and Fellows of which one-quarter are CEOs



Old Credentialing Program

Member	Diplomate (CHE)	Fellow (FACHE)
<ul style="list-style-type: none">▪ Bachelors degree▪ Interest and commitment to the field	<ul style="list-style-type: none">▪ Masters degree▪ 2 yrs' experience▪ 2 references▪ 12 hours CEUs▪ Community/civic activities▪ Credentialing Exam	<ul style="list-style-type: none">▪ Masters degree▪ 3 yrs' as a Diplomate▪ 3 references▪ 24 hours CEUs▪ Community/civic activities▪ Fellow Project

Reasons for Change

- Given the increasing variability in educational and experiential backgrounds of individuals entering healthcare management, a greater commitment to credentialing and continuing education is critical for our profession
- Yet there are fewer affiliates becoming credentialed

Market Research

- Preliminary Program Audit
- Telephone interviews of Members, Diplomates, Fellows, Executive Search Firms, non-member CEOs
- Surveys of the above groups
- Market Research Interview and Survey Reports

Research Results

- There is ambiguity regarding the specific purpose and value proposition of the CHE and FACHE credentials
- Fellow projects do not measure competency
- Change is needed to keep the program relevant

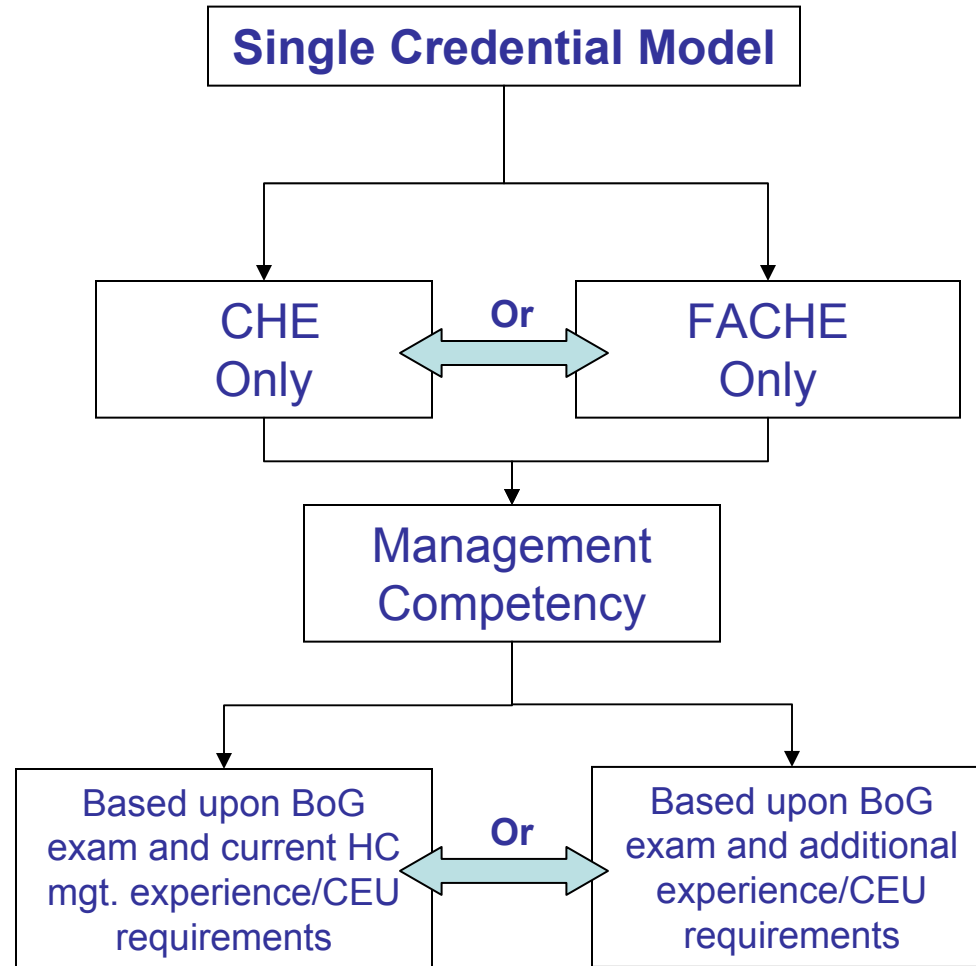
Credentialing Options-Diplomate

- Leave it as is
- Eliminate the FACHE credential and only offer the CHE
- Make the CHE credential more attractive to other healthcare management segments

Credentialing Options-Fellow

- Leave it as is
- Eliminate the CHE credential and offer only the FACHE credential
- Create a new Fellow project option based on an executive leadership program
- Move the CHE and FACHE programs further apart in terms of target audience, purpose and scope

FACHE/CHE Decision Options



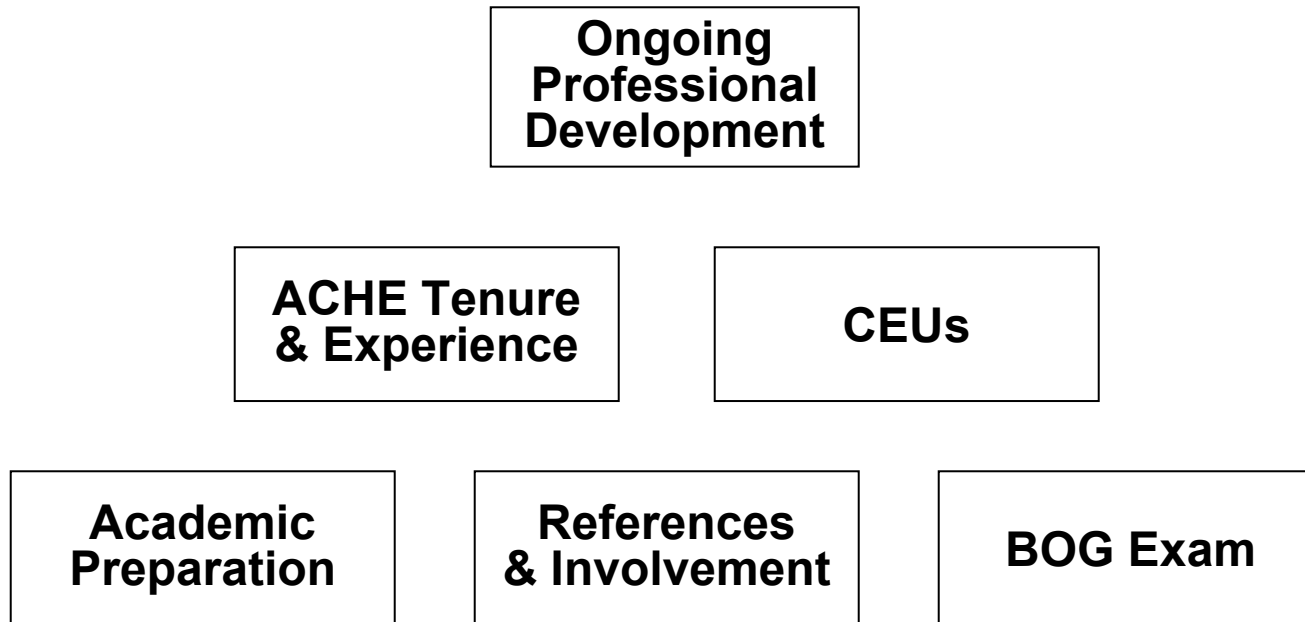
Decision

- Combine the ACHE credentialing program to one credential—the FACHE credential
- Remove the Fellow project requirement and keep the exam as the basis of the credential
- Eliminate Diplomate status—those who qualify can convert to Fellow, others lose the CHE credential and are converted to Member

New Requirements

- Successful completion of the Board of Governors Examination, and:
- A post baccalaureate degree and five years' healthcare management experience or a bachelor's degree and eight years' healthcare management experience (master's required after 1/1/2009);
- 40 hours of continuing education over the previous five years, and
- Three years tenure at the Member level or higher
- Evidence of community/civic participation

Single FACHE credential—based on multi-faceted criteria



Note: Components are not sequential

How the Change was Communicated

- Discussion with the Regents at the fall district meetings, September 2006
- Discussion with the Membership Committee, September 2006
- Credentialing Task Force Summary Report sent electronically to all affiliates for a 30-day comment period, October 1, 2006
- Presentation at the Chapter's Leadership Conference, October 2006
- Discussion and vote by the Board on November 7, 2006
- Letter and e-mails sent to all affiliates in November
- Changes implemented January 1, 2007

Comments from Affiliates

- 1,321 Responses to the Affiliate e-mail (5% of all affiliates)
- 708 in favor (mostly Diplomates)
- 472 not in favor (mostly Fellows)
- 141 neutral

Additional Modifications

- Affiliate feedback included the perception that Fellow status serves as an indicator of commitment to the field in addition to management competency
- In response the Board of Governors authorized the development of a separate process to recognize service, leadership and giving back to the profession

After the Implementation (As of September 30, 2007)

- CEO received only 5 complaint letters
- Only Three Fellows resigned
- Some discontent from old Fellows and negative press from a trade magazine
- New Member Recruitment up 18%
- 3,797 former Diplomates converted to Fellow (1,900 still need to convert)
- Much interest from current and former members who want to pursue Fellow

American Nurses Credentialing Center

- ANCC, the largest credentialing org. in the U.S., certifies nurses in specialty practice areas
- ANCC has been certifying nurses since 1980
- 135,000+ nurses certified by ANCC

ANCC Examinations

- Approx. 12,000 nurses seek ANCC certification per year
- 40+ exams in 2002
- Currently 30 exams
- Several exams - annual candidate volume less than 50

Commission's Approach

- ANCC's Commission on Certification - closer scrutiny of financial and psychometric soundness of smaller exam programs
- Commission adopted set of guidelines to guide ANCC with this issue

Commission's Guidelines

- Exams with low candidate volume placed under a “watch” status for 12 months
- Inform stakeholders of watch status
- Market the exam more to increase candidate volume during watch

Commission's Guidelines

- If additional marketing results in candidate volume of 120+ per year - exam removed from watch status
- If candidate volume does not increase to 120+, exam placed under “planned abandonment”

Commission's Guidelines

- Notification of planned abandonment to stakeholders
- Exam administered only for additional 6 months
- If already certified – keep certification and may renew

Guidelines for Watch Program

- Exam was offered during past 5 years
- Average annual candidate volume for past 3 years < 120

Guidelines for Watch Program

- Exam falls within lowest 1/3 of all exams in volume for past calendar year
- Significant downward trend with renewal for the past 3 years

Marketing Exams Under Watch

- Notify specialty organization about watch status
- Specialty organization does additional promotions
- ANCC promotes exam at specialty conference

Marketing Exams Under Watch

- Sends targeted letter to certified nurses in the specialty
- Places targeted ad in specialty magazine
- Sends promotional materials to faculty

Additional Considerations

- Evaluate eligibility criteria – do they inhibit candidates?
- Is there another exam that could serve this specialty?
- Political and regulatory implications

Implementation

- In 2003-2005, five exams were placed under watch
- Stakeholders notified
- Conference call with stakeholders
- Face to face meetings

Reactions of Stakeholders

- Not well received by many of the stakeholders
- Concerns about ANCC's self interests
- Concerns about the future of the specialty
- Concerns about renewal

How Reactions Were Handled?

- Conference calls
- Face to face meetings
- Extend the last administration of the exam
- Combine specialties

Other Options

- Recognition of specialty through portfolio
- Working on 3 specialties thru portfolio approach

End Results

- Four of the five exams under watch were retired
- One exam was combined with another specialty
- One specialty being considered for recognition through portfolio