



The Jimmy A Young Memorial Lecture

June 28, 2016

8:00 to 9:30 AM

Ponte Vedra Beach, FL



Jimmy Albert Young, MS, RRT
1935 –1975

The NBRC has honored Jimmy's memory and the contributions he made to respiratory care through this program since 1978 .

**Jimmy Albert Young, MS, RRT
was one of the profession's
most outstanding and
dedicated leaders**

In a 15-year career,

- achieved the RRT
- directed an education program
- directed a hospital department
- served as AARC President
- served as an NBRC trustee

- 1935 – born in South Carolina
- 1960 – 1966 – served as Chief Inhalation Therapist at the Peter Bent Brigham Hospital in Boston
- 1965 – earned the RRT credential, Registry #263
- 1966 – 1970 – served in several roles including director of the education program at Northeastern University in Boston
- 1970 – became director of the Respiratory Therapy Department at Massachusetts General Hospital
- 1973 – became the 22nd President of the American Association of Respiratory Care
- 1975 – was serving as an NBRC Trustee and member of the Executive Committee when he passed away unexpectedly

How Does the NCCA Affect My Ability to Educate, Hire, and Retain Therapists?

Why should I care about the NCCA?

Presenters

- Robert L. Joyner Jr., PhD, RRT, RRT-ACCS, FAARC
 - NBRC President
- Robert C. Shaw Jr., PhD, RRT, FAARC
 - NBRC Assistant Executive Director, Examinations Director and Psychometrician

Conflict of Interest

I have no real or perceived conflicts of interest that relate to this presentation. Any use of brand names is not meant to endorse a specific product, but to merely illustrate a point of emphasis.

Learning Objectives

- Describe milestones in the history of the NCCA including the year that the NBRC first submitted to accreditation
- Explain the process that produced revisions to the accreditation standards implemented in 2016
- Highlight standards that have an impact on examination candidates and therapists who have achieved a credential

Organizations, programs, and institutions are accredited while individuals are credentialed

ACCREDITATION

Why accreditation?

- Enhance confidence of stakeholders in practices by
 - encouraging self-reflection leading to improved quality
 - externally verifying that practices meet standards
 - comparing internal practices to effective practices of others

Entities that commonly seek accreditation

- Education providers
 - Whole institution
 - Individual programs
- Healthcare providers
 - Whole institution
 - Individual programs
- Manufacturers
- Credentialing programs



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An accreditor of credentialing programs

NCCA MILESTONES

- 1977
 - Federal Department of Health, Education, and Welfare granted funds under a Congressional mandate to establish the National Commission for Health Certifying Agencies (NCHCA), which would accredit credentialing programs
 - NBRC programs were among the first to be accredited
- 1987
 - A membership association of credentialing bodies was established, which was called the National Organization for Competency Assurance (NOCA)

- 1987 continued
 - Organizations seeking accreditation and standards they followed broadened outside of healthcare
 - NCHCA changed its name to the National Commission for Certifying Agencies (NCCA), which existed inside of NOCA

- 2009
 - NOCA changed its name to the Institute for Credentialing Excellence (ICE) to reflect worldwide leadership that promotes high-quality certification programs
 - NCCA continues to exist within ICE
 - It's standards exceed requirements of the American Psychological Association and the Federal Equal Employment Opportunity Commission

NCCA Mission

- Help ensure health, welfare, and safety of the public
- Use a peer-review process
 - Establish standards
 - Evaluate compliance with standards
 - Recognize programs demonstrating compliance
 - Be a resource on quality certification

NCCA Vision

- Be
 - administratively independent
 - recognized as the authority on accreditation standards for certification programs
- Standards are
 - broadly recognized, objective, and current benchmarks
 - optimal and comprehensive criteria for organizational process and performance

Details About ICE and NCCA

- 13 staff serve ICE and NCCA
- 223 organizations are members of ICE
- 312 programs accredited by NCCA involving 129 organizations across 25 industries
 - healthcare, construction, legal, transportation, manufacturing, information services, legal, financial

Previous Releases of Standards

- 2002 after starting in 1997
- 1977 first set

Effective 2016

THE LAST REVISION OF NCCA STANDARDS

Tenets of the Process

- Embody fundamentals required for public protection
- Use terminology that is adaptable to a wide variety of programs
- Present requirements that are valuable and relevant
- Explicitly describe documentation requirements

Steps in the Process



Used with permission from Anjali Weber, MS, CAE
ICE Director of Accreditation Services
April 6, 2016

24 Standards covering (1) Purpose, Governance, Resources, (2) Responsibilities to Stakeholders, (3) Assessment Instruments, (4) Recertification, and (5) Maintaining Accreditation

DETAILS FROM SELECTED STANDARDS

Standard 2: Governance and Autonomy

- The certification program must be structured and governed in ways that are appropriate and effective for the profession, occupation, role, or specialty area; that ensure stakeholder representation; and that ensure autonomy in decision-making over all essential certification activities.

S2: Essential Element A

- . . . the process for selection and removal of certification board members protects against undue influence that could compromise the integrity of certification process.

S2: Essential Element C

- The composition of the board must include individuals from the certified population and may include other appropriate stakeholder groups
 - Certified population includes those who have achieved RRT (CRT), RPFT (CPFT), plus each specialty credential
 - The “other appropriate stakeholder groups” have been physicians representing CHEST, ATS, and ASA

S2: Essential Element D

- The certification board must include at least one member, with voting rights, that represents the public or non-employer consumer interest.
 - Public member must be a potential consumer of the certificants' services.
 - Help balance the certification program's role in protecting the public while advancing the interests of the certificants.

Public Member

Glenna L. Tinney, MSW



S2: Essential Element E

- The certification program must demonstrate that members of the certification board do not have a conflict of interest in their overall capacity to serve that could compromise the integrity of the certification program.

Standard 3: Education, Training, and Certification

- Appropriate separation must exist between certification and any education or training functions to avoid conflicts of interest and to protect the integrity of the certification program.
 - A program cannot demand that candidates take its course before taking the test
 - Persons whose primary job is education can serve on the board
 - Persons involved in examination review courses are disqualified

Standard 4: Financial Resources

- The certification organization must have sufficient financial resources to conduct ongoing, effective and sustainable certification and recertification activities.
 - Documentation includes two years of financial statements

Standard 6: Information for Candidates

- The certification program must publish certification information that concerns existing and prospective certificants
 - Application procedure including eligibility
 - Examination description
 - Procedures for requesting accommodations (ADA)
 - Policies for retesting candidates who fail and appeals of adverse certification decisions
 - Annual counts of (1) candidates, (2) success rates, (3) current certificants

Standard 7: Program Policies

- The certification program must establish, enforce, and periodically review certification policies and procedures related to certification and challenges to certification decisions
- Essential Elements
 - The certification board must provide a rational for all eligibility requirements
 - The program must not unreasonably limit access to certification

Standard 8: Awarding of Certification

- The certification program must award certification only after the knowledge and/or skill of the individual candidate has been evaluated and determined to be acceptable
- Essential Elements
 - Once a program applies for accreditation, any procedure for granting a credential in the absence of an evaluation (grandfathering) is no longer permitted

Standard 9: Records Retention and Management Policies

- The certification program must have a records management and retention policy for all certification related programs
- Essential Elements
 - Records must be maintained of applicants, candidates, current certificants, and previous certificants
 - It is advised that current certificants be listed in a publicly available directory

First Name:	<input type="text"/>
Last Name:	<input type="text"/>
Middle Initial:	<input type="text"/>
Credential:	ALL ▾
City:	<input type="text"/>
State:	ALL ▾
Birthday:	<input type="text"/> ▾ <input type="text"/> ▾ <input type="text"/> ▾
	<input type="button" value="Search"/> <input type="button" value="Cancel"/>

Standard 13: Panel Composition

- The certification program must use panels of qualified subject-matter experts to provide insight and guidance and to participate in job analysis, standard setting, and other examination development activities
- Essential Elements
 - Panel must represent relevant characteristics of the population
 - Terms of service are useful

Standard 14: Job Analysis

- The certification program must have a job analysis that defines and analyzes domains and tasks related to the purpose of the credential, and a summary of the study must be published
- Guidance
 - Typically accomplished by surveying current certificants and/or a representative sample of the population who will seek certification

Standard 15: Examination Specifications

- The certification program must establish specifications that describe what the examination is intended to measure as well as the design of the examination and requirements for its standardization and use, consistent with the stated objectives of the certification program

S 15: Essential Elements

- The objective of the examination must describe the level of practice (entry, advanced, specialty)
- Design considerations must be specified and explained
- The plan for weighting examination sections must be based on a job analysis and must give precise direction

Standard 17: Standard Setting

- A certification program must perform and document a standard setting study that relates performance on the examination to proficiency, so that the program can set a passing score appropriate for the certification

S17: Essential Elements and Guidance

- Procedures must be based on generally accepted measurement principles (criterion-referenced)
 - Must avoid creating an artificial barrier to entry; if everyone is proficient, then everyone should pass
 - Any significant change to examination content or design should trigger reconsideration and potential revision of the performance standard

Standard 18: Examination Administration

- The certification program must develop and adhere to its policies and procedures for each examination administration. The procedures must ensure that all candidates take the examination under comparable conditions, safeguard confidentiality of examinations, and address security at every stage of the process.

Standard 19: Scoring and Score Reporting

- The certification program must employ and document sound psychometric procedures for scoring, interpreting, and reporting examination results.

S 19: Essential Elements and Guidance

- Failing candidates must be provided information in relation to the passing standard. If the program provided feedback such as domain-level information, candidates must be provided guidance about limitations in interpreting and using that feedback.
 - If domain-level information has low reliability, programs are advised against reporting it

Standard 20: Reliability

- The certification program must ensure that scores are sufficiently reliable for the decisions that are intended
- Guidance
 - Most examinations contain multiple-choice items, the number of items is positively related to reliability encouraging more items
 - Longer tests cost more to administer

Standard 22: Maintaining Certification

- The certification program must require periodic recertification
- Essential Elements
 - The program must have a definition of continuing competence that is consistent with the Commission's definition
 - Certification must be time limited
 - Programs applying for accreditation must require periodic recertification for all certificants

S 22: Guidance

- Lifetime certification is not consistent with the requirement for periodic recertification
- Recertification requirements
 - may differ for more recent certificants compared to certificants from earlier years
 - can either measure and/or promote continued competence
- If CEUs are the requirement, the program should document how CEUs support continuing competence

Standard 24: Maintaining Accreditation

- The certification program must demonstrate continued compliance to maintain accreditation
- Essential Elements
 - The program must annually submit information about the previous year
 - Notify the Commission in writing before making any material changes



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SUMMARY

NCCA and the NBRC

- The start of NCCA and the start of accreditation of NBRC programs are entwined
 - Personnel associated with the NBRC have been involved in NCCA activities over several decades
- The latest set of standards became effective this year; NBRC programs will be exposed to those standards next year

Educate

- Examination content is
 - kept secure
 - based on therapists' practices as revealed by job analyses, which may or may not strongly relate to the curriculum of a given program
- It is up to each program to tap into national practice standards
 - Some do better than others, which is detected by CoARC

Hire

- Licensure is linked to results from the Therapist Multiple-Choice Examination in most states
- Some healthcare institutions give preference to the employment of therapists who have achieved the RRT or are credentialed in a specialty
 - Programs on which these credentials are based are influenced by NCCA Standards

Retain

- Persons holding general and specialty credentials have permitted their credentials to expire since 2002
 - Employees who experience an expiration have their employment disrupted, some may not be retained
- Regardless of how the NBRC continuing competency program will change, participants must remain engaged with the system



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