Value Statement

Value of Hospice and Palliative Certification

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The Hospice and Palliative Nurses Association (HPNA), Hospice and Palliative Nurses Foundation (HPNF), and Hospice and Palliative Credentialing Center (HPCC):

- Support high-quality national certification in hospice and palliative care as validation of patient care providers’ initial and continuing proficiency in the specialty.
- Champion certification as an essential asset to the national health system and as a symbol of quality to populations served.
- Educate employers about cultivating continuing competence to optimize care for patients and their families through certification and recertification.
- Promote hospice and palliative certification to other disciplines, associations, and stakeholders as the standard to transform the care and culture of serious illness.

Background
HPCC validates the knowledge an individual has within the specialized area of hospice and palliative care through a national certification process. Certification is an avenue to help ensure competent care, which supports the vision of HPNA, HPNF, and HPCC: “Every person living with serious illness receives equitable, comprehensive, and innovative hospice and palliative care.”

Research and policymaking have established nationally recognized hospice and palliative standards of care. These standards can be found in the National Consensus Project’s Clinical Practice Guidelines for Quality Palliative Care and the National Quality Forum’s Framework and Preferred Practices for Palliative and Hospice Care Quality.1,2 These standards contributed to the development of Palliative Nursing: Scope and Standards of Practice. That document established that within the area of professionalism, certification is an example of how the hospice and palliative nurse demonstrates knowledge, attitudes, behaviors, and skills consistent with palliative nursing professional standards, code of ethics, and scope of practice.3

Patients, families, and health systems expect hospice and palliative staff to practice in accordance with nationally recognized standards of care. In conjunction with research and policymaking, hospice and palliative nursing education has continued to develop. Many academic nursing programs now incorporate palliative nursing concepts into their curricula.4 However, academic degrees alone do not ensure specialty knowledge and expertise in palliative nursing. A survey of hospice and palliative nurses found that respondents sought additional education from professional organizations because they did not feel adequately prepared for roles in hospice and palliative care from their education and training.5

Specialty certification remains the most effective way to ensure that nursing personnel at any
level of practice (nursing assistant, licensed practical/vocational nurse, registered nurse, advanced practice registered nurse) have the knowledge and skills needed to provide safe, high-quality care to the public.\(^6\) Certification for other palliative care team members (for example, social workers, physicians, chaplains, perinatal loss counselors, and administrators) also demonstrates commitment, expertise, and continuing competence in the specialty.\(^7\)

Certification is associated with knowledge and value of evidence-based practice in specialized nursing.\(^8\) For nurses who voluntarily pursue certification, the credentials serve as recognition of the quality of their care.\(^9\)

Much has been written about generational differences in the work force and the motivation to continue competence, such as pursuing certification and recertification. There has been a question as to whether the age of the applicant for certification influenced the reason for pursuing certification. Research using a multigenerational cohort showed that there is commonality in reasons to become certified.\(^10\) In general, all age groups find value in professional development.\(^11\) Actions based on stereotypes and assumptions about age-group differences enhance division such that “generational humility” has been recommended to approach health professions education.\(^12\)

Research into the correlation between specialty nursing certification and patient outcomes has been encouraging. For example, research has identified a correlation between higher rates of nursing specialty certification and lower rates of adverse outcomes: total patient falls, hospital-acquired pressure injuries, selected hospital-acquired infections, failure to rescue, and death.\(^13\) Specific to palliative care, there is evidence that specialty palliative care is associated with decreased symptom burden when compared to primary palliative care. In this case, specialty palliative care is defined as interventions provided by clinicians who have become credentialed and have received specialized training in palliative care. Primary palliative care is defined as care at the generalist level.\(^14\)

Further research is needed to better understand causal factors associated with certification and improved outcomes. Boyle has encouraged use of the Expanded Conceptual Model to drive theory-based research examining links between patient outcomes and nursing specialty certification.\(^13\) Other recommendations include a sensitizing definition of certification in nursing to help examine links to patient outcomes and define criteria for certification to better understand impact on practice and patient outcomes.\(^15,16\)

For employers and healthcare systems, support and recognition of specialty nursing certification remain mutually beneficial for organization and staff. A health system can publicly advertise its staff’s accomplishments and the benefits of higher levels of nursing education and certification.\(^17\) Concurrently, support for maintenance of certification activities, such as continuing education, contributes to the improved outcomes that are valued by healthcare organizations, including staff satisfaction.
Definition of Terms

Certification: A voluntary, nongovernmental process by which an individual is determined by a certification body to have successfully completed the requirements of a certification program and may be identified to the public and other stakeholders as a certificant. Some regulatory bodies use voluntary certification programs to meet licensure or registration requirements.18

Continuing competence: Continuing competence is the ongoing commitment of healthcare providers to integrate and apply knowledge, skills, and judgment with the attitudes, values, and beliefs required to practice safely, effectively, and ethically in a designated role and setting.19

Maintenance of certification: This is accomplished by a variety of mechanisms, including demonstration of continuing competence through self-assessment, continuing education, professional development activities, ongoing clinical practice, and, occasionally, re-examination. Continuing competence requires the ongoing commitment of certificants to integrate and apply knowledge, skills, and judgment with the attitudes, values, and beliefs required to practice safely, effectively, and ethically in a designated role and setting.20

Recertification: Recertification is the renewal of certification based on specified requirements (typically associated with continuing competence) completed within defined intervals.18

References


This statement reflects the best available evidence at the time of writing or revisions.

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