

May 21, 2008

The Council for the Advancement of Comprehensive Care  
630 West 168th Street  
New York, NY 10032

Dear Members, Council for the Advancement of Comprehensive Care

On Wednesday, April 2, 2008, the Council for the Advancement of Comprehensive Care (CACC) and the National Board of Medical Examiners (NBME) reached an agreement to develop and administer a Certification Examination for Doctors of Nursing Practice (DNP). The National Association of Pediatric Nurse Practitioners (NAPNP), the Association of Faculties of Pediatric Nurse Practitioners (AFPNP), and the Pediatric Nursing Certification Board (PNCB) have grave concerns regarding the possible *unintended consequences* of administering a certification exam for DNPs. We recognize the importance of assuring the competency of Nurse Practitioners (NPs) and we are committed to advancing the profession to meet the ever-challenging needs of our patients. We ask the CACC to seriously consider our concerns regarding your plans for a DNP certification exam and welcome your reply. As an established coalition of pediatric healthcare focused nursing organizations for comprehensive care, we seek your agreement in principle and understanding of our position. NAPNP recently released its position statement on the DNP and we are disseminating it widely (see attached).

Our first concern relates to the CACC announcement, "The Council determined that a national certification process would provide the public with a reliable way to identify advanced nurse clinicians with the DNP degree who can provide comprehensive care". Currently, the Pediatric Nursing Certification Board (PNCB), the American Nurses Credentialing Center (ANCC), the American Academy of Nurse Practitioners (AANP), the National Certification Corporation (NCC) and others offer nationally accredited certification exams for NPs that test synthesis and application of specialty knowledge for various populations. We believe the additional DNP competencies can be incorporated into these current exams. The certification process is linked to licensure in the majority of states and is recognized as an essential credentialing process by the Centers for Medicare and Medicaid Services (CMS). The CACC's announcement does not acknowledge that a credible quality system already exists for certifying advanced practice nurses, thus leading the public to believe that master's prepared nurse practitioners are not certified or competent to provide comprehensive care. Although unintentional, this announcement by the CACC will undermine the public's confidence in the competence of the master's prepared NP.

A second and particular concern is the mechanism CACC selected to build a certification process for DNP graduates. CACC's plan to administer an exam to DNP graduates that will be developed in collaboration with the National Board of Medical Examiners (NBME) and will be similar to the United States Medical Licensing Examination (USMLE) administered to medical students is flawed. Although the care given by nurses and physicians often overlaps, it remains the responsibility of nursing to set the standards for their own profession just as it is the duty of medicine to set the standards for physicians. While we appreciate overlapping areas of knowledge required to provide comprehensive health care, including pathophysiology, we are deeply concerned that the CACC is allowing the medical profession to set standards of education for advanced practice nurses. The first link in the chain of evidence for all certification exams is a comprehensive practice analysis or role delineation study. An analysis of the practice benefits provided by DNPs will evolve as more DNPs enter practice. A certification exam for the new DNP graduates cannot be developed until these new graduates delineate their full scope of practice and a requisite consensus building process among DNP programs occurs. Furthermore, the DNP scope of practice needs to be based on competencies acquired in various DNP programs. Indeed, to develop a DNP certification exam based on a test-item pool developed to test the knowledge and competence of third year medical students is an inappropriate measure of cumulative advanced practice *nursing* knowledge. We are also concerned that the CACC's plan for DNP certification will not include assessment of knowledge related to the complex and comprehensive care and health needs of children and families and would **not** be an appropriate measure for DNP prepared advanced practice pediatric nurses who care for our nation's children and families.

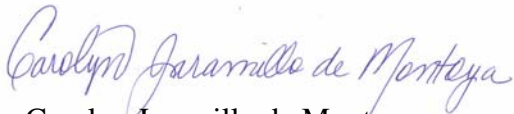
Currently the Centers for Medicare and Medicaid Services (CMS) require that NPs have a master's degree in nursing and national advanced practice certification in order to obtain reimbursement. The CACC needs to consider the possibility that the development of a certification exam for DNPs may be viewed by CMS as the "gold" standard for reimbursement. NPs who elect not to take the DNP exam, could see their rates of reimbursement drop dramatically regardless of their demonstrated current competence.

We appreciate the CACC's commitment to advance the nurse practitioners; however, we take exception to the statement that the CACC "...is the leading academic organization for the promulgation of doctoral level clinical nursing." The American Association of Colleges of Nursing (AACN) developed the *Essentials of the Doctoral Education for Advanced Practice Nursing* in order to assure consistency across institutions offering the DNP. Additionally, the National Organization of Nurse Practitioner Faculties (NONPF) has a long history of standard-setting and faculty development and has worked in partnership with many organizations to develop competencies for nurse practitioners, including those prepared with a practice doctorate degree. For the past several years, NONPF, AACN, NAPNAP, AFPNP and the PNCB have continued to participate in an ongoing national consensus process to create a unified model defining the standards and scope of practice guidelines for APRN education, certification, accreditation and regulation. For the past several years the APRN Consensus and Joint Dialogue Groups have successfully worked to ensure the development of educational, certification, accreditation and licensing systems in support of APRN practice. As an organization promulgating education or DNP certification standards for APRNs, the CACC should seek the opportunity to assess the impact of their DNP products with respect to quality standards. The creations of a secondary voluntary DNP certification process for NPs fails to address the national consensus standards highlighted by the work of the Joint Dialogue Group and **will serve to divide** our

discipline and threaten the public's faith in the quality care currently provided by all nationally certified NPs and other APRNs. We have worked diligently with many groups and are committed to continue to work together to develop and implement processes that will ensure that the practice doctorate meets the widely promulgated standards for advanced nursing education. We respectfully ask the CACC to collaborate with AACN, NONPF, NAPNAP, AFPNP, PNCB, and NP certification groups and other organizations such as the American Academy of Nurse Practitioners (AANP), American Nurses Credentialing Center (ANCC), American College of Nurse Practitioners (ACNP), the American Association of Nurse Anesthetists and the National Association of Clinical Nurse Specialists (NACNS), in addition to the NBME. This above described collaboration would be an innovative approach toward resolving one problem with our broken health care system. It is essential that organizations like ours, health care professionals and the public understand that master's-prepared NPs continue to provide quality care and that nursing, not medicine, must continue to set the standards for advanced practice nursing.

We look forward to your reply and to working with CACC and other professional organizations to address the multiple concerns addressed in this letter. Again, we ask the CACC to seriously consider our legitimate concerns regarding your plans to offer a DNP certification exam and welcome your reply. Thank you.

Sincerely,



Carolyn Jaramillo de Montoya  
President, NAPNAP



Nan Gaylord  
President, AFPNP



Madelyn McMurtrie  
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