



National Board of Certification & Recertification for Nurse Anesthetists (NBCRNA)

COVID-19 Impact on Certification Survey Report

March 2021

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Table of Contents

Introduction	2
Methodology.....	2
Survey Development.....	2
Survey Distribution	3
Survey Respondents.....	3
Respondent Demographics.....	3
Results.....	7
Staffing	7
Marketing and Communications.....	11
Meetings and Travel	13
Testing and Other Operations	14
Workforce Impact	17
Certification Program Policies and Procedures	18
Examination Administration Methods.....	20
Accreditation.....	22
Employee Work Setting	23
Looking Ahead.....	26
Lessons Learned.....	28
Appendix A – Survey Advisory Group	30
Appendix B – Survey Development Participants	31
Appendix C – Survey Instructions	32
Appendix D – Survey Invitations	33
Appendix E – Additional Comments for Figure 12.....	39
Appendix F – Additional Comments for Figure 15.....	40
Appendix G – Additional Comments for Figure 16	42
Appendix H – Additional Comments for Figure 19	44
Appendix I – Additional Comments for Figure 27.....	47
Appendix J – Additional Comments for Figure 28	60
Appendix K – COVID-19 Impact - Credentialing Survey	62

Introduction

The National Board for the Certification and Recertification of Nurse Anesthetists (NBCRNA) engaged SeaCrest to conduct a survey to gather information about how certifying organizations in the United States responded to the coronavirus disease 2019 (COVID-19) during 2020. In March 2020, the World Health Organization (WHO) declared the COVID-19 outbreak a pandemic. The pandemic's effects have been wide-ranging with the epidemiology continuing to evolve and shift. The survey enabled participants to capture this unprecedented world event for the credentialing industry for institutional knowledge, continuity, and historical purposes.

The COVID-19 Impact - Credentialing Survey sought to answer the following questions:

- How did organizations respond to the COVID-19 pandemic operationally and programmatically?
- What changes have been implemented to address the needs of staff and other target audiences?
- What changes does the organization anticipate institutionalizing?

Methodology

This report describes the methodology and procedures used to develop and conduct a survey to collect data on how certifying bodies have been impacted by the effects of coronavirus disease on society, the economy, and infrastructure.

NBCRNA and SeaCrest recruited professionals from the credentialing industry to participate in ad-hoc workgroups to provide insight and advice in the development of the COVID-19 Impact - Credentialing Survey (see [Appendix A](#) and [Appendix B](#)). These volunteers provided key feedback throughout the survey development process.

Survey Development

Development of the survey tool included the following steps:

1. **Define and categorize survey questions:** A draft including 28 survey questions was developed by SeaCrest and NBCRNA in October 2020. The Survey Advisory Group (see [Appendix A](#)) participated in initial review and edit of survey content.
2. **Interview certification leaders to inform survey development:** During November 2020, SeaCrest conducted one-on-one interviews with ten leaders of professional certification programs ([Appendix B](#)) after providing each with a draft of the survey. SeaCrest utilized the feedback gathered from the interviews to inform the content, design, and structure of the survey (e.g., open-and closed-ended questions).
3. **Develop the online survey:** The work product from the Survey Advisory Group and interview process was used to design the survey for pilot testing in SurveyMonkey®.
4. **Pilot Test the online survey:** The Survey Advisory Group ([Appendix A](#)) and survey development volunteers ([Appendix B](#)) were invited to pilot test the online COVID-19 survey (see [Appendix K](#)). The pilot testers were asked to complete the survey and provide comments and suggested improvements on the survey, including noting the length of time it took to complete the survey, clarity of the instructions, ease of navigation through the survey, and presentation, content, or other characteristics. The pilot test was conducted from December 7 to December 21, 2020.

5. **Distribute the survey:** The survey was revised based on the pilot test feedback and finalized for distribution to the survey target audience. An exported copy of the survey is presented in [Appendix K](#). Invitations to participate in the survey, along with a survey link, were distributed through several industry groups and LinkedIn ([Appendix D](#)). To incentivize responses, the invitations noted that all participating individuals and organizations would receive a copy of the survey report.

Survey Distribution

The target audience for the survey included professional certification programs representing a range of industries. The online survey link was distributed through industry organizations including the Institute for Credentialing Excellence (I.C.E.), American Board of Nursing Specialties (ABNS), and the Certification Network Group (CNG). Each distributed the online survey link to their membership and broader database contacts. Survey invitations were also distributed and promoted via several LinkedIn channels.

The survey opened on January 6, 2021 and closed on January 28, 2021. A copy of the email invitations is provided in [Appendix D](#). There were 77 respondents.

Survey Respondents

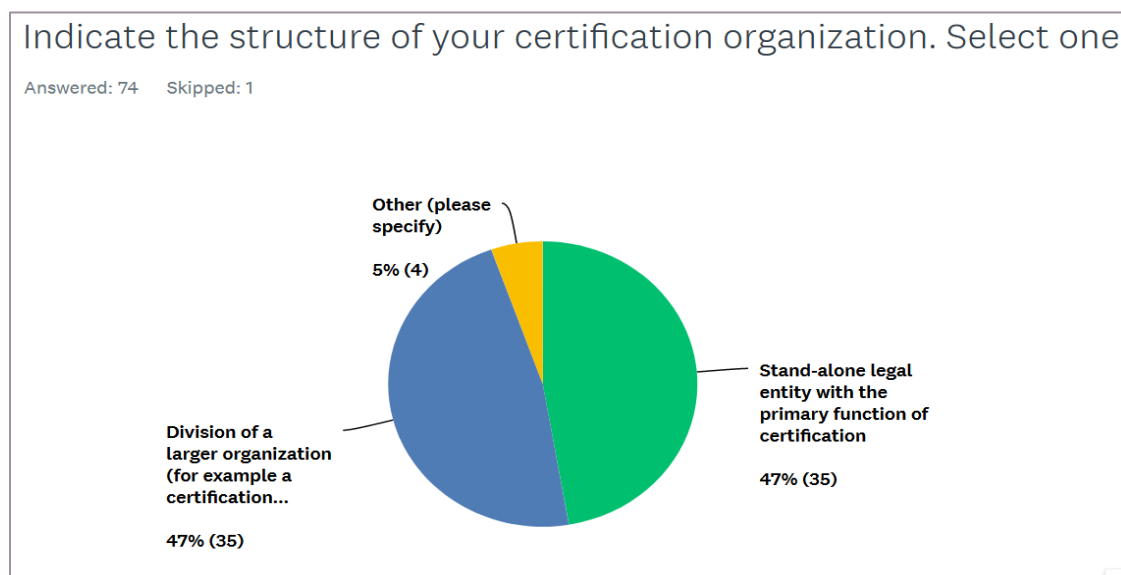
Of the 77 survey respondents, the majority (93.5%, N=72) identified their organization's name.

Two duplicate respondents were removed from the data file. There were 75 respondents included in the final data analyses.

Respondent Demographics

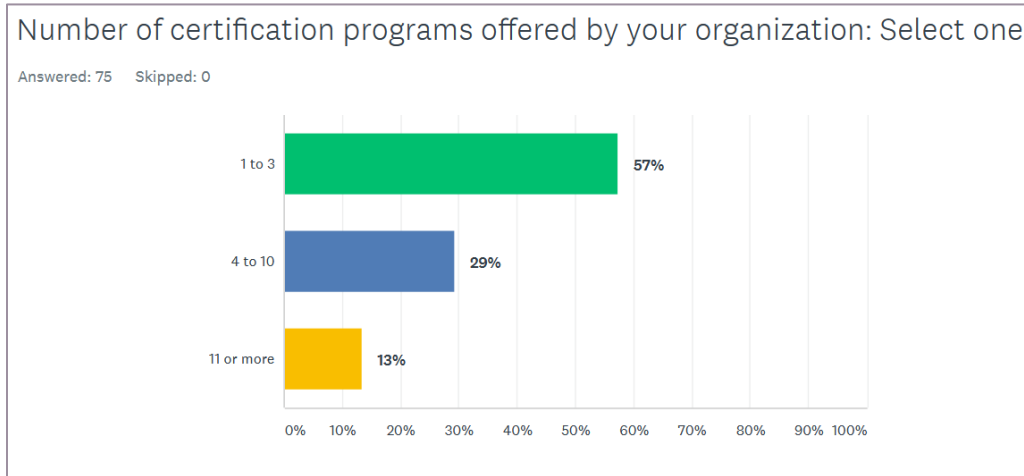
In terms of the structure of the certification organization, the majority of respondents were split between stand-alone certifying bodies (47%, N=35) and certification programs within a larger, parent organization (47%, N=35). As indicated in Figure 1, a very small percentage (5%, N = 4) indicated the "other" category which cited association for credentialing organizations, stand-alone at an association management company, certification and education, and vendor organization.

Figure 1



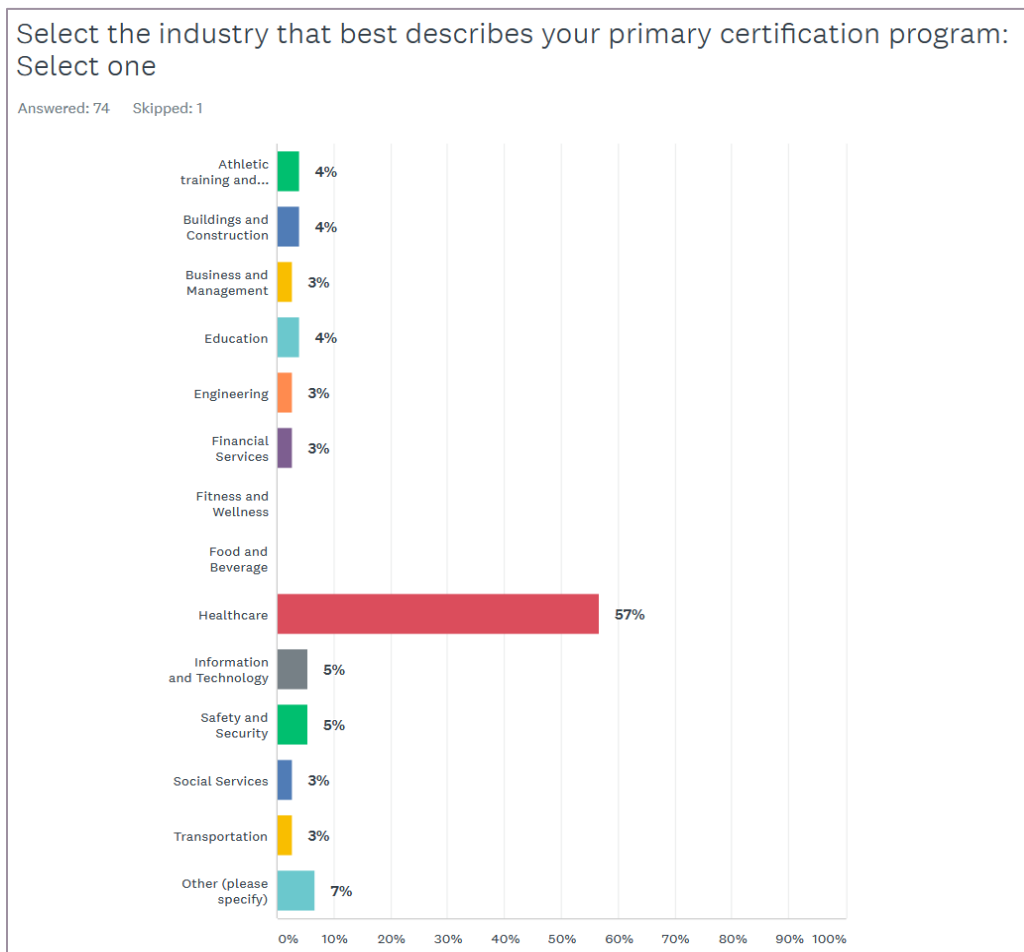
Most certifying organizations (57%, N=43) that responded offer one to three programs (see Figure 2). A second cluster of organizations stated that they offer four to ten programs (29%, N = 22).

Figure 2



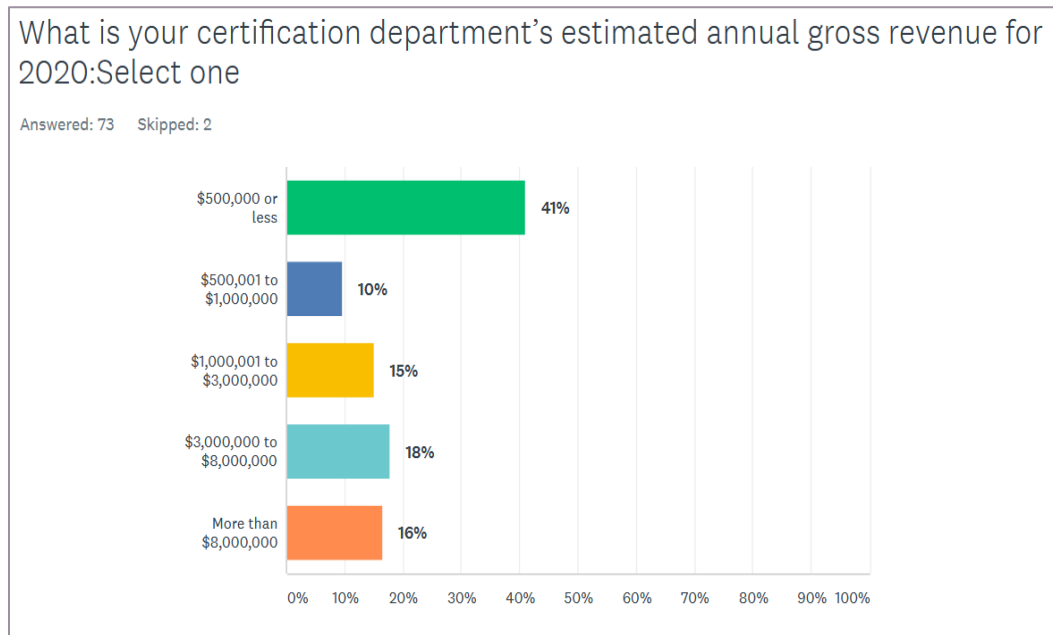
A majority of certifying organization respondents (57%, N=42) stated that their programs addressed healthcare. As indicated in Figure 3, the remaining responses were widely scattered among various professions representing less than 10% of certifying organizations. “Other” responses include certification bodies, certification, (re)insurance arbitration, life sciences, and human resources.

Figure 3



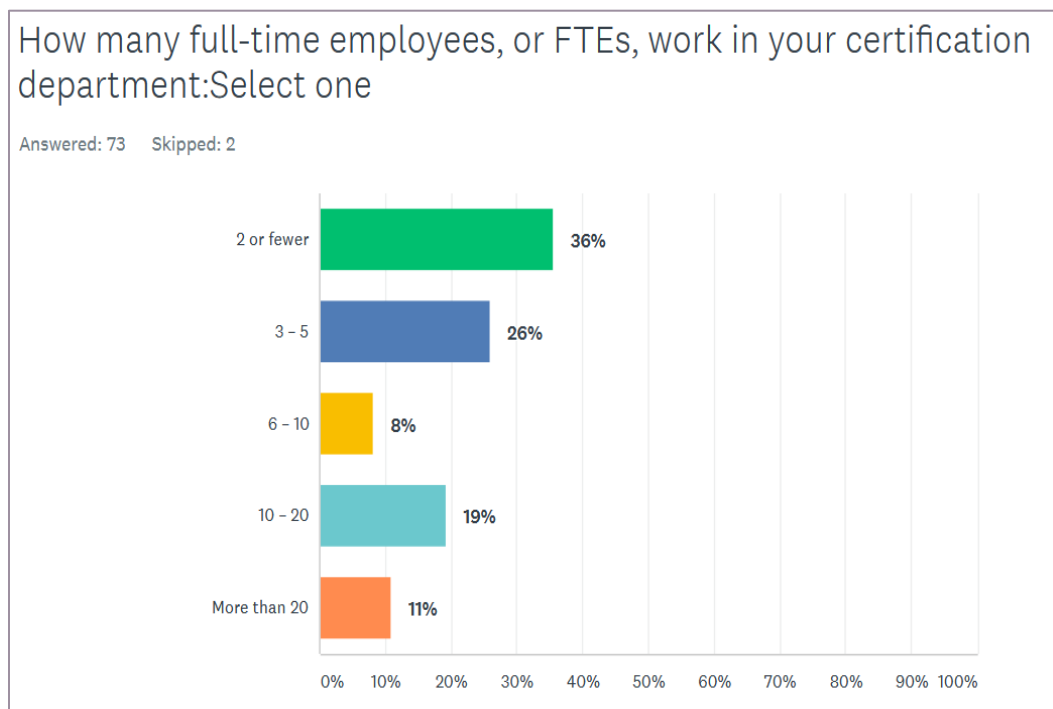
Of those respondents, 41% (N=30) represented certifying organizations with an annual gross revenue of \$500,000 or less. Fewer respondents stated the certification department’s annual gross revenue for 2020 was 3,000,000 to 8,000,000 (18%, N = 13).

Figure 4



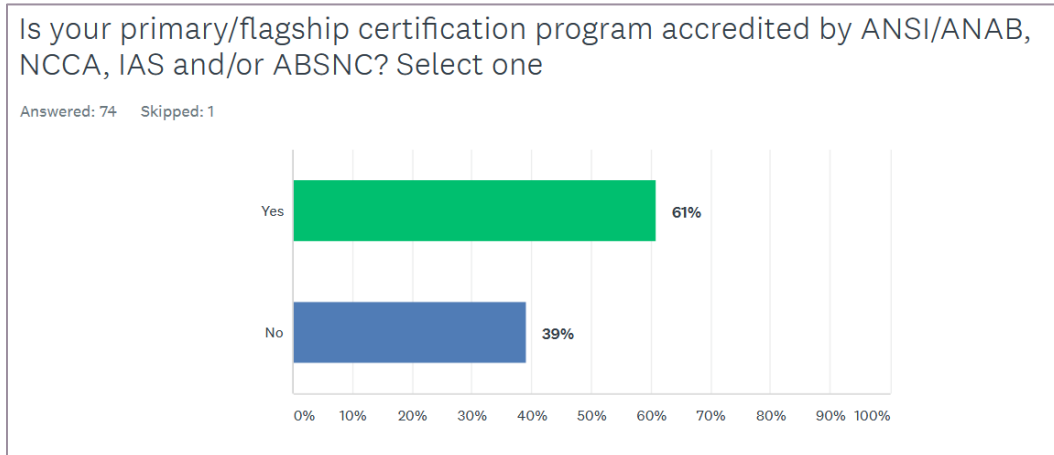
Survey data from twenty-six respondents (36%) reported employing two or fewer full-time equivalent (FTE) employees during 2020. As indicated in Figure 5, the remaining responses were widely scattered with three to five FTEs representing 26% (N=19) and ranking second. The third-highest category was 10-20 FTEs (19%, N=14), followed by more than 20 (11%, N=8), and six to ten (8%, N=6).

Figure 5



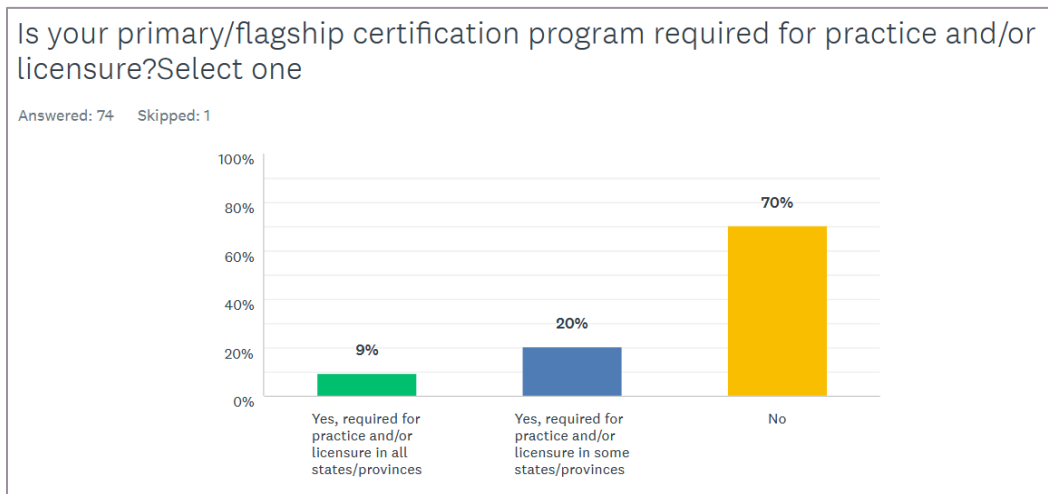
A plurality of respondents (61%, N=45) acknowledged their flagship certification program (i.e., most recognized or valued program) as accredited by a third party.

Figure 6



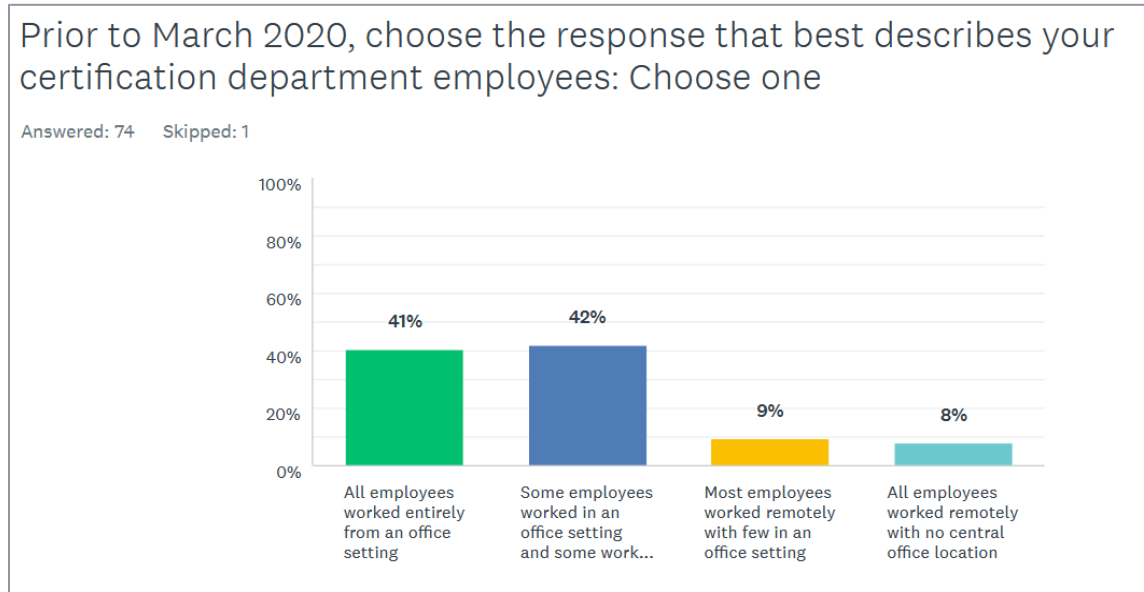
Respondents from certification programs were asked whether their flagship certification program had been adopted by states/provinces as a requirement for licensure and/or was required to work in their profession by law in every state/province (see Figure 7). Nearly three-quarters (70%, N=52) of certification programs were voluntary and not required for practice and/or licensure.

Figure 7



Prior to the onset of the pandemic, organizations reported almost even distribution between employees working in an office setting (i.e., brick and mortar) with some employees working remotely working (42%, N=31) and employees working entirely from an office setting (41%, N=30). Only 9% (N=7) of organizations reported employees working mostly remotely and 8% (N=6) reported no central office location with all employees working remotely (see Figure 8).

Figure 8



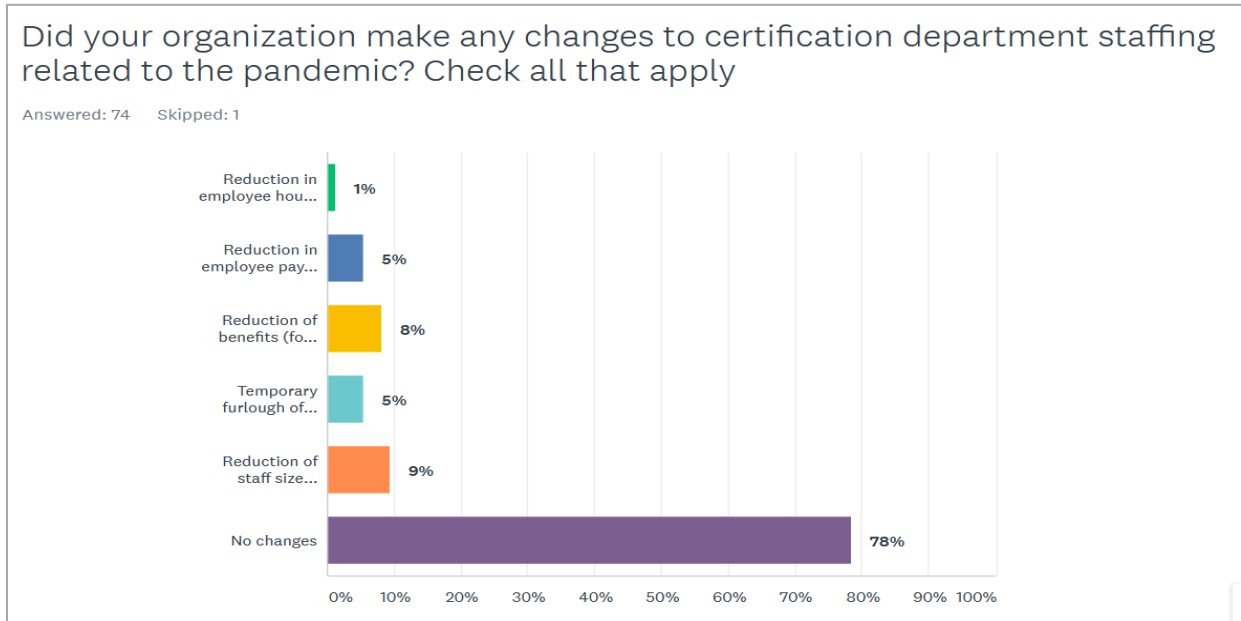
Results

Data from 75 organizations was included in the analyses for this report. The sample size (N) varies by question, as not all responding organizations answered every question. The 30-item survey included multiple-choice and open-response items. The survey contained six primary sections: nine background/demographic questions, six operational questions, nine programmatic questions, two human resources questions, two questions pertaining to the long-term implications of COVID-19, and two open-ended questions for organizations to share lessons learned or situations not addressed in the survey.

Staffing

Over three-quarters of organizations (78%, N=58) indicated making no changes to their certification department staffing as a result of the pandemic in 2020 (see Figure 9).

Figure 9



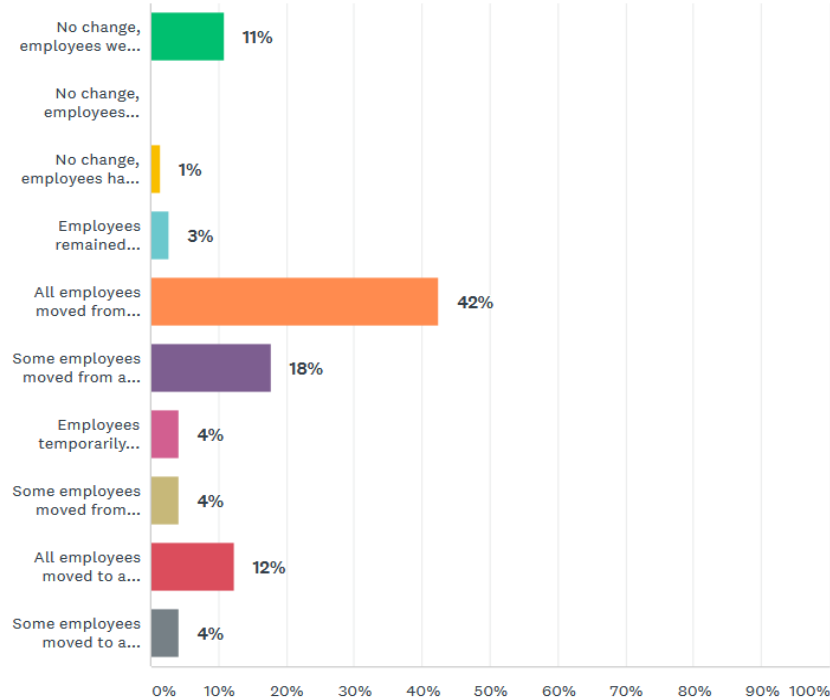
ANSWER CHOICES	RESPONSES	
Reduction in employee hours (example: some full-time employees were changed to part-time)	1%	1
Reduction in employee pay (salaries were reduced for some, or all, employees)	5%	4
Reduction of benefits (for some or all employees, for example reduced 401k matching, reduced vacation time)	8%	6
Temporary furlough of employees (at least some full or part-time employees were temporarily furloughed with the intent to bring them back)	5%	4
Reduction of staff size (staff size was reduced through lay-offs or other means with the intent for these changes to last beyond 2020)	9%	7
No changes	78%	58
Total Respondents: 74		

During the pandemic, 42% (N=31) of certifying organizations reported the work setting locale for all employees shifted from the office setting to a remote setting (i.e., telecommuting). The second-highest category, some employees moved from the office setting to remote work while some employees were already working remotely prior to the pandemic, was selected by 18% (N=13) of the respondents (see Figure 10).

Figure 10

Has the professional work setting location for your certification program employees changed? Choose one response that best describes the location of employees.

Answered: 73 Skipped: 2

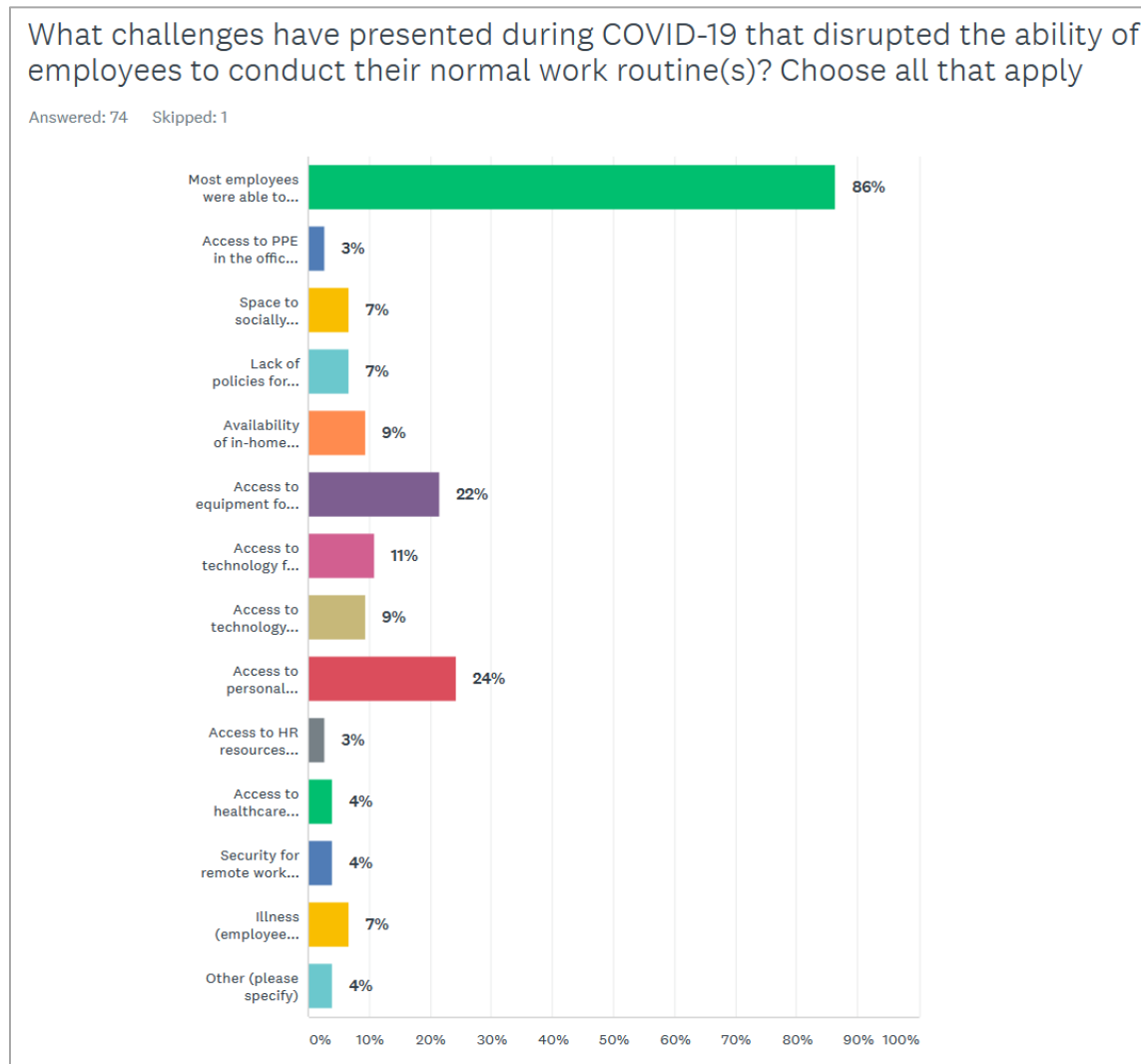


ANSWER CHOICES	RESPONSES	
▼ No change, employees were already working from remote locations.	11%	8
▼ No change, employees remained working in the office with no changes to the physical space.	0%	0
▼ No change, employees have remained working from a combination of remote and in-office locations in the same numbers as before the pandemic.	1%	1
▼ Employees remained working in the office with changes to the physical space such as physical distancing, mask requirements, added barriers, etc.	3%	2
▼ All employees moved from working in an office setting to remote work.	42%	31
▼ Some employees moved from an office setting to remote work and some employees were already working remotely prior to the pandemic.	18%	13
▼ Employees temporarily worked remotely, but have transitioned back into an office setting.	4%	3
▼ Some employees moved from working in an office setting to remote work with some essential employees remaining in the office.	4%	3
▼ All employees moved to a hybrid combination of working remotely and working in the office setting.	12%	9
▼ Some employees moved to a hybrid combination of working remotely and working in the office setting.	4%	3
TOTAL		73

Most organizations (86%, N=64) indicated the shift to remote work was managed without significant disruption. Conversely, 24% (N=18) reported their employees' access to personal resources for remote work (i.e., child care or caring for a family member) presented challenges that disrupted normal work routines. Another 22% (N=16) reported that access to equipment for remote work (i.e., laptops and printers) was problematic.

As indicated in Figure 11, the remaining responses were scattered among various challenges representing less than 11% of certifying organizations. "Other" responses include: our only challenge was the need to occasionally physically print and ship things like certificates, updated credential letters/documentation for recertifying individuals; building lock-downs impeded reliable fed-ex/ups deliveries upon which our business is significantly reliant; and transportation to/from office on scheduled in-office days.

Figure 11



ANSWER CHOICES	RESPONSES	
▼ Most employees were able to successfully continue working without significant disruption	86.49%	64
▼ Access to PPE in the office setting	2.70%	2
▼ Space to socially distance in the office setting	6.76%	5
▼ Lack of policies for remote work	6.76%	5
▼ Availability of in-home office space for remote work	9.46%	7
▼ Access to equipment for remote work (laptop, printer, etc.)	21.62%	16
▼ Access to technology for remote work (FTP access, email access, shared files, network drives, etc.)	10.81%	8
▼ Access to technology support for remote work (IT department, help desk, help navigating set up and/or IT issues)	9.46%	7
▼ Access to personal resources for remote work (child care, caring for family member)	24.32%	18
▼ Access to HR resources and/or professionals to navigate questions and challenges	2.70%	2
▼ Access to healthcare resources (mental health)	4.05%	3
▼ Security for remote work systems, tools, and/or information sharing	4.05%	3
▼ Illness (employee illness)	6.76%	5
▼ Other (please specify)	Responses	4.05% 3
Total Respondents: 74		

Marketing and Communications

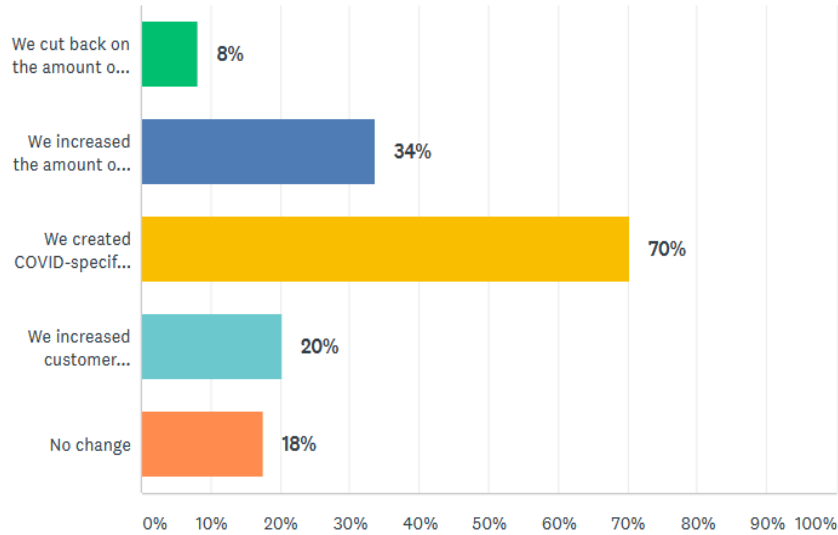
Most organizations (70%, N=52) developed COVID-specific resources and communications for their certificant. Over one-third of respondents (34%, N=25) reported increasing the amount of marketing and communications related to the promotion of certification and/or recertification. Additionally, 20% of respondents (N=15) confirmed increasing their customer service capacity to address applicant and certificant questions and concerns (see Figure 12).

Optional commentary provided by respondents is included in [Appendix E](#).

Figure 12

How did your certification program’s messaging and marketing communications directed toward potential applicants change? Choose all that apply

Answered: 74 Skipped: 1

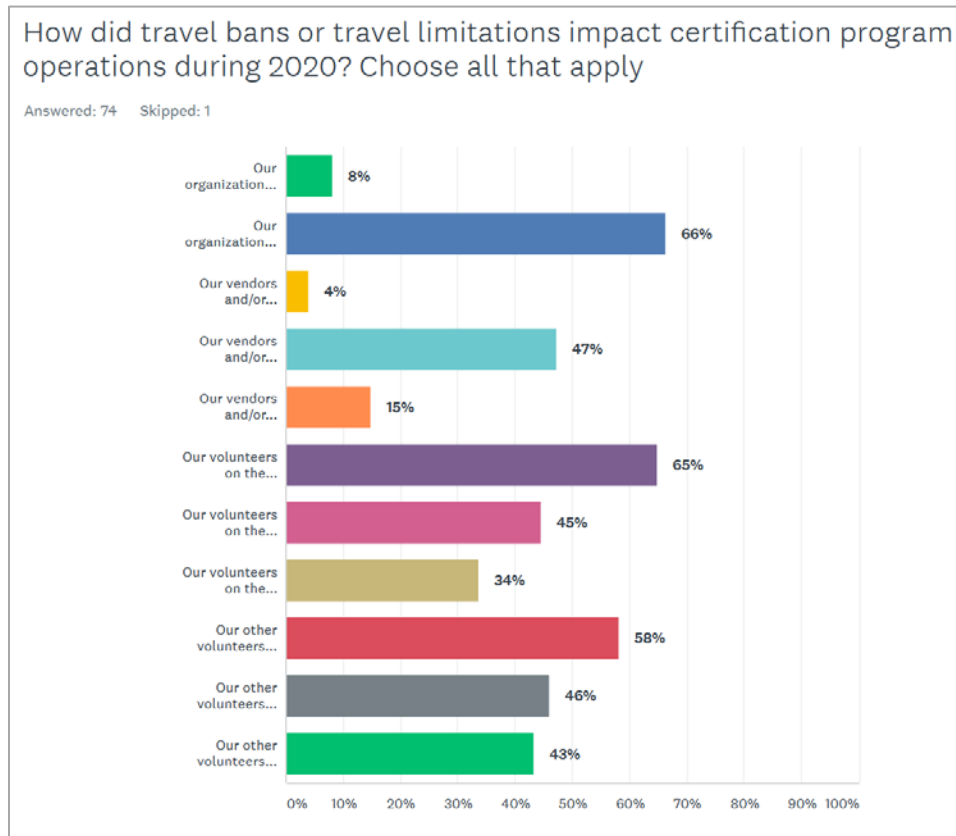


ANSWER CHOICES	RESPONSES	
▼ We cut back on the amount of marketing and communications related to promoting certification and/or recertification	8%	6
▼ We increased the amount of marketing and communications related to promoting certification and/or recertification	34%	25
▼ We created COVID-specific resources and communications	70%	52
▼ We increased customer service capacity to respond to applicant and certificant questions and concerns	20%	15
▼ No change	18%	13
Total Respondents: 74		

Meetings and Travel

In terms of travel restrictions during 2020, the majority of respondents were split between organization’s temporarily limiting or restricting employee travel with restrictions still being imposed (66%, N=49) and volunteers on the governing board unable to travel due to restrictions imposed by their employers (65%, N=48). As indicated in Figure 13, over half of respondents (58%, N = 43) indicated other volunteers, including committee members and subject matter experts, could not travel due to employer restrictions.

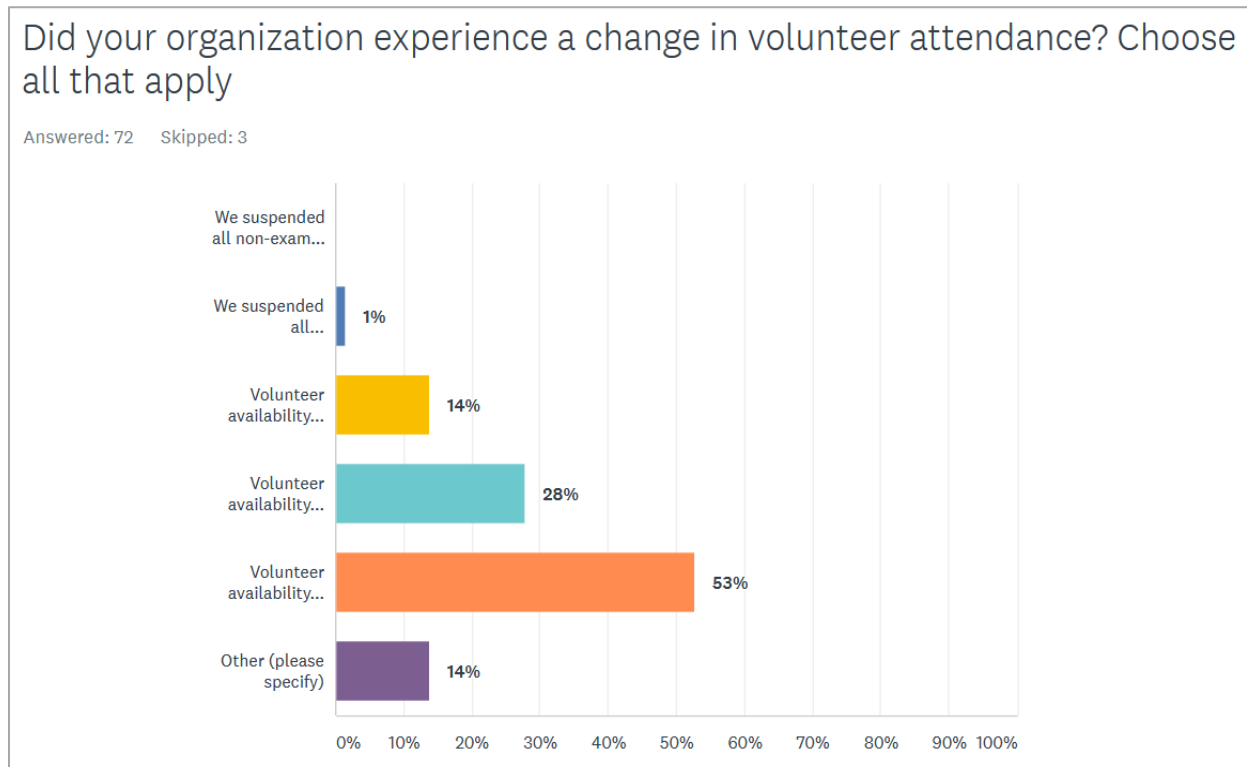
Figure 13



ANSWER CHOICES	RESPONSES
Our organization temporarily limited or restricted employee travel, but those limitations are no longer in place	8% 6
Our organization temporarily limited or restricted employee travel and those limitations are still in place	66% 49
Our vendors and/or consultants were limited or restricted by their company's travel rules, but those limitations are no longer in place	4% 3
Our vendors and/or consultants were limited or restricted by their company's travel and rules and those restrictions are still in place	47% 35
Our vendors and/or consultants are unwilling to travel	15% 11
Our volunteers on the governing board have been unable to travel due to travel restrictions placed on them by their employers	65% 48
Our volunteers on the governing board have been unable to travel or limited in their ability to travel due to state-mandated orders	45% 33
Our volunteers on the governing board are unwilling to travel	34% 25
Our other volunteers (committee members, SMEs) have been unable to travel due to travel restrictions placed on them by their employers	58% 43
Our other volunteers (committee members, SMEs) have been unable to travel or limited in their ability to travel due to state-mandated orders	46% 34
Our other volunteers (committee members, SMEs) are unwilling to travel	43% 32
Total Respondents: 74	

More than half of certifying organizations (53%, N=38) reported that volunteer availability to participate remained the same. Conversely, 28% (N=20) indicated that volunteer availability to participate decreased (see Figure 14).

Figure 14



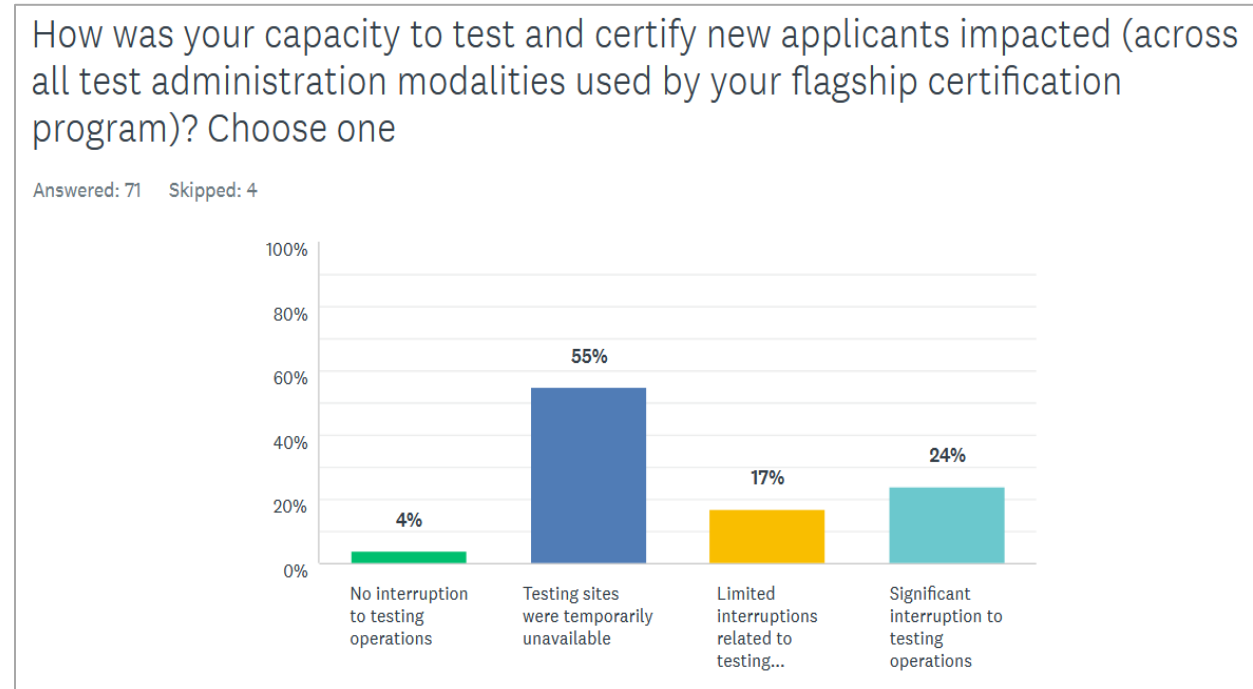
ANSWER CHOICES	RESPONSES	
▼ We suspended all non-exam related volunteer activity	0%	0
▼ We suspended all exam-related volunteer activity	1%	1
▼ Volunteer availability to participate increased	14%	10
▼ Volunteer availability to participate decreased	28%	20
▼ Volunteer availability to participate remained the same	53%	38
▼ Other (please specify)	Responses 14%	10
Total Respondents: 72		

Testing and Other Operations

More than half of programs (55%, N=39) reported that testing sites were temporarily unavailable. Only 4% (N=3) of certification programs had no interruption to testing operations. Significant interruptions to testing operations were reported by 24% (N=17) and 17% (N=12) reported limited interruptions.

Optional comments provided by 29 respondents are included in [Appendix F](#).

Figure 15



ANSWER CHOICES	RESPONSES
▼ No interruption to testing operations	4% 3
▼ Testing sites were temporarily unavailable	55% 39
▼ Limited interruptions related to testing availability (for example, longer wait times for appointments, or additional travel required to find an open testing site)	17% 12
▼ Significant interruption to testing operations	24% 17
TOTAL	71

[Comments \(29\)](#)

Programs that experienced interruptions to operations were asked to briefly describe the gaps in knowledge, skills, and/or capabilities that contributed to interruptions. All responses are included in [Appendix G](#). The most frequently noted problems were related to test center closures.

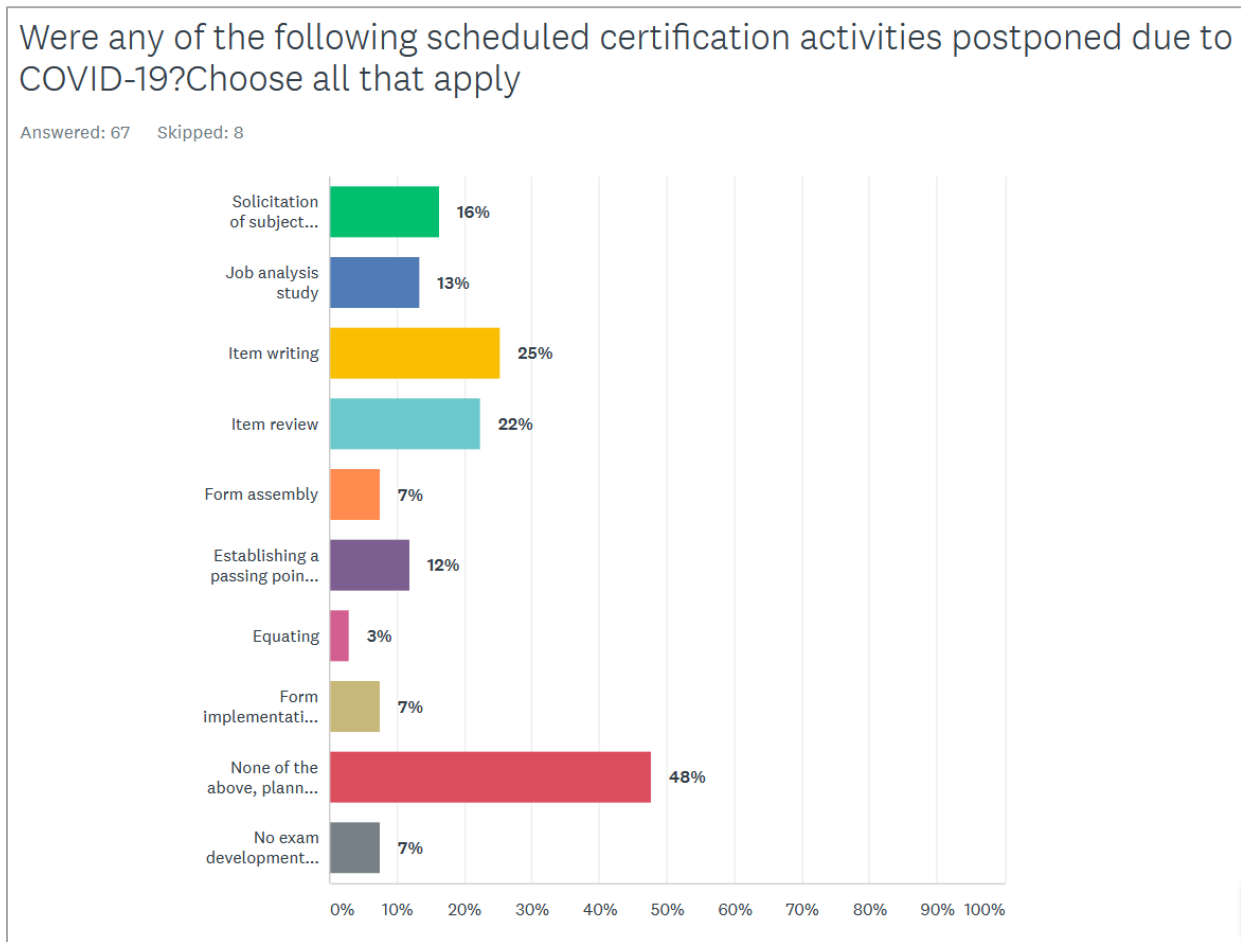
Figure 16

If your primary certification program experienced any interruptions to operations, briefly describe the knowledge, skills, or capabilities that were missing or not sufficient to allow for uninterrupted operations. Examples of interruptions include, but are not limited to: exam development activities, testing center closures, cancelled meetings, lack of IT support or technology tools, etc.

Answered: 48 Skipped: 27

48% (N=32) reported conducting planned certification activities as scheduled. The most frequently postponed activities included item writing (25%, N=17), item review (22%, N=15), and solicitation of subject matter experts (16%, N=11) (see Figure 17).

Figure 17



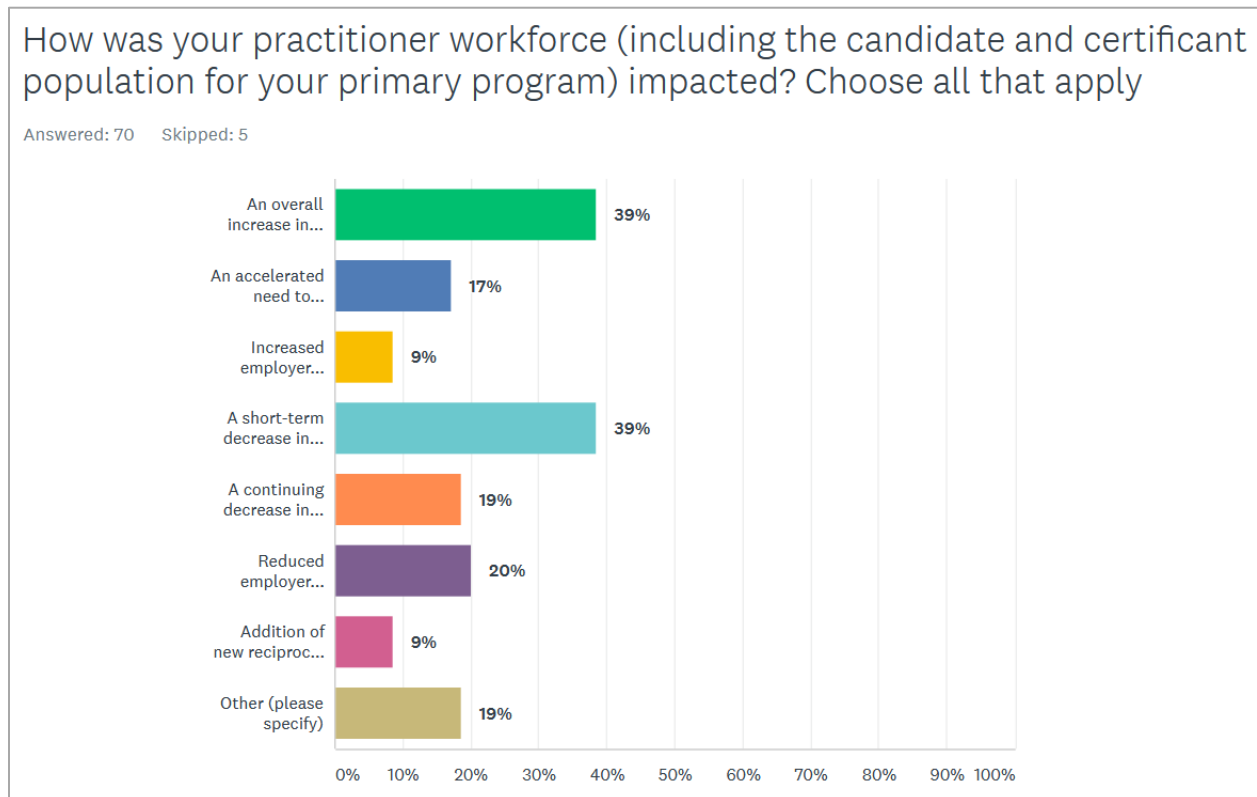
ANSWER CHOICES	RESPONSES
▼ Solicitation of subject matter experts (SMEs)	16% 11
▼ Job analysis study	13% 9
▼ Item writing	25% 17
▼ Item review	22% 15
▼ Form assembly	7% 5
▼ Establishing a passing point (standard setting, cut score study)	12% 8
▼ Equating	3% 2
▼ Form implementation (live launch)	7% 5
▼ None of the above, planned activities were conducted without postponing	48% 32
▼ No exam development activities were planned in 2020	7% 5
Total Respondents: 67	

Workforce Impact

Impact on the practitioner workforce, including the candidate and certificant population, was evenly split between an overall increase in demand, workload, and/or similar factors (39%, N=27) and a short-term decrease in demand including reduced workload, furloughs, layoffs, etc. (39%, N=27).

Reduced employer support for certification was reported by 20% (N=14). An accelerated need to transition more candidates/practitioners into practice (for example expediting student's entry into practice or transitioning retired professionals back into the workforce) was reported by 17% (N=12) (see Figure 18).

Figure 18



ANSWER CHOICES	RESPONSES
▼ An overall increase in demand, workload, and/or similar factors	39% 27
▼ An accelerated need to transition more candidates/practitioners into practice (for example expediting students entry into practice, transitioning retired professionals back into the workforce)	17% 12
▼ Increased employer support for certification	9% 6
▼ A short-term decrease in demand (examples: reduced workload, furloughs, layoffs, hiring freezes)	39% 27
▼ A continuing decrease in demand (examples: reduced workload, furloughs, layoffs, hiring freezes)	19% 13
▼ Reduced employer support for certification	20% 14
▼ Addition of new reciprocal or accelerated licensing provisions, or changes to regulatory requirements, to increase entry into the workforce	9% 6
▼ Other (please specify)	Responses 19% 13
Total Respondents: 70	

“Other” responses included:

- Due to closure of clinical sites some candidates experienced delayed graduations which then delayed their ability to meet eligibility to test
- The impact has been uneven, with some practitioners putting in significant overtime and others experiencing temporary layoffs, reduced hours, and/or job loss.
- Increased support by employers exhibited in the hiring preference, especially for travel nurses. However, decreased support for professional development \$\$ for current staff.
- [Healthcare] offices were closed during the pandemic, they are now slammed with patients
- Most of the people furloughed are back on the job but some are still not.
- We also saw [certificant]s being utilized in new and different departments through the healthcare system, i.e. Covid testing, screening, some are prepping now to administer vaccine's
- people pulled to do other work in the health care setting; ability to do job could not be accommodated by telehealth until August and still only in limited situations; the provision of the service just couldn't be done in most practices/locations with state mandates or other situations.
- While some [providers] were furloughed, they used the time to prepare for the exam, or shifted their focus to help address various issue regarding COVID in their community.
- Some students could not complete clinical hours; therefore, graduation and certification were delayed.
- A few instances of certifiants not renewing certification due to furloughs and retirement.
- Our applications and number of test takers increased during 2020
- People had more time to get certified

Certification Program Policies and Procedures

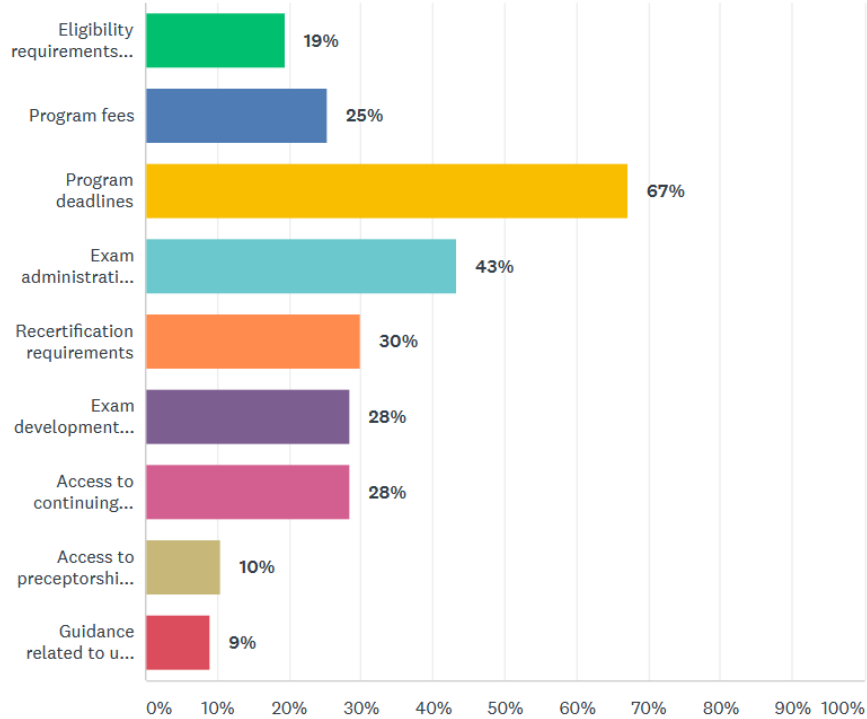
Most organizations (67%, N=45) adjusted program deadlines. Other policy and procedure changes included changes to examination administration methods (43%, N=29), recertification requirements (30%, N=20), examination development activities (28%, N=19), access to continuing education (28%, N=19), and program fees (25%, N=17) (see Figure 19).

Optional comments provided by 33 respondents are included in [Appendix H](#).

Figure 19

Did your organization modify any of the following policies or procedures regarding the flagship certification program? Choose all that apply

Answered: 67 Skipped: 8

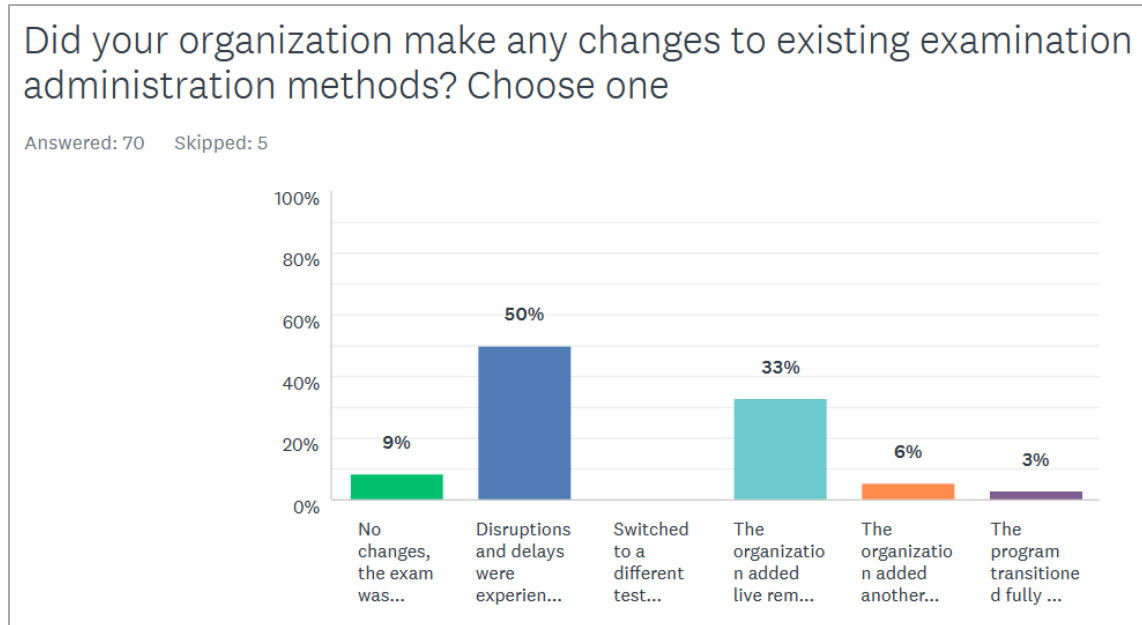


ANSWER CHOICES	RESPONSES	
Eligibility requirements (not including changes to fees and deadlines)	19%	13
Program fees	25%	17
Program deadlines	67%	45
Exam administration methods	43%	29
Recertification requirements	30%	20
Exam development activities	28%	19
Access to continuing education	28%	19
Access to preceptorships, internships, clinical work, mentorships, or other required work/experience	10%	7
Guidance related to use of telehealth to meet practice requirements	9%	6
Total Respondents: 67		

Examination Administration Methods

Half of the respondents (50%, N=35) reported that their examination continued to be offered when and where feasible without changes to test administration method(s) despite disruptions and delays. 33% (N=23) reported adding live remote proctoring as an option in addition to their existing test administration method(s) (see Figure 20). Six programs indicated in the optional comments that they are planning to add live remote proctoring.

Figure 20



ANSWER CHOICES	RESPONSES
▼ No changes, the exam was administered as planned and scheduled	9% 6
▼ Disruptions and delays were experienced but the exam continued to be offered when and where feasible without changing the test administration method(s)	50% 35
▼ Switched to a different test administration vendor/service, with NO changes to test administration methods	0% 0
▼ The organization added live remote proctoring as an option in addition to the existing test administration method(s)	33% 23
▼ The organization added another method of remote proctoring as an option in addition to the existing test administration methods (record and review or other remote proctoring methods without a live proctor)	6% 4
▼ The program transitioned fully to remote proctoring and discontinued other test administration method(s)	3% 2
TOTAL	70

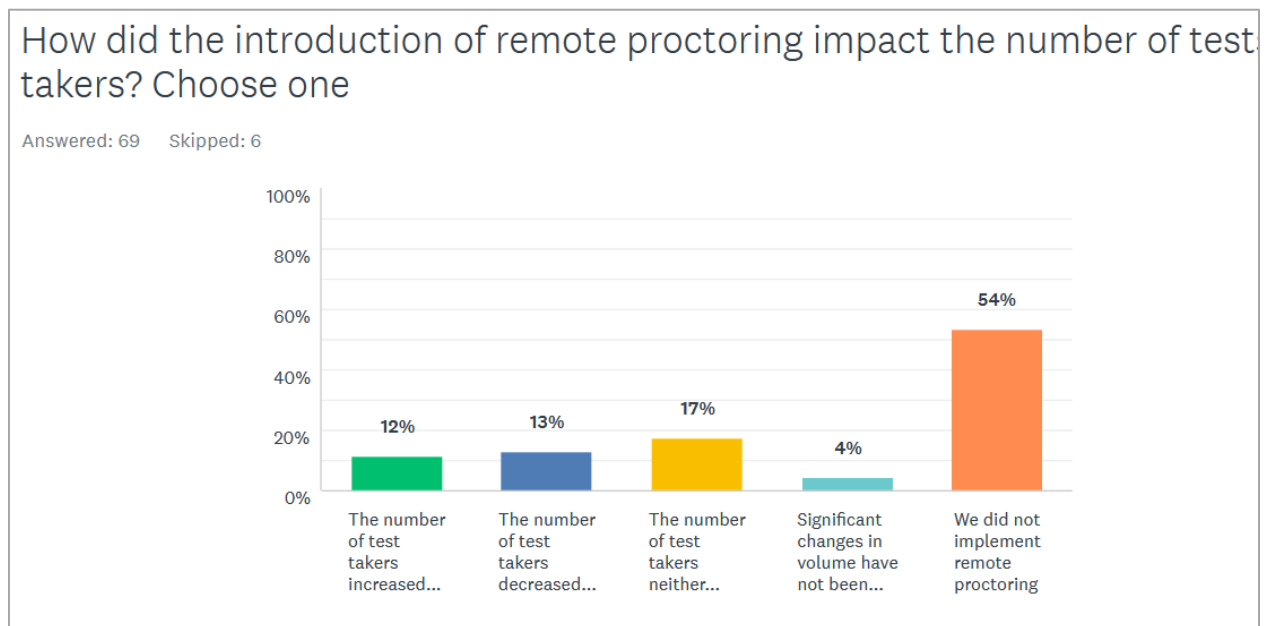
Optional comments included:

- [Organization] goes live with online proctoring on February 1 2021.
- We are now planning for implementation of live remote testing.
- Preparing for remote proctoring capability
- The Live Online Proctoring option was not available to be offered for the first exam of the year.
- We are waiting for NCCA to approve our Notice of Material Change request form to offer live remote proctoring... but then plan to have onsite and online testing open.
- The written exam continued to be administered as usual but we had to change from an in-person practical exam to a remote virtual one.
- We are also looking to still implement LRP in 2021

- We already offered remote proctoring so while our in-person exams offerings were cancelled we could simply moved them to remote exams.
- In process of adding live remote proctoring
- Our spring exam administration was shut down a day early due to test center closures. We extended the summer exam administration by 10 days to allow for more testing appointments. This was following the recommendation from our testing provider.
- Launched mobile app to assist with recertification.
- The exam-based certification is not the primary certification.

Of the organizations that implemented remote proctoring in 2020, 17% (N=12) reported no change in the number of test takers compared to the previous year, 13% (N=9) reported a decrease, 12% (N=8) reported an increase, and 4% (N=3) reported no significant changes but anticipated an increase in test takers (see Figure 21).

Figure 21



ANSWER CHOICES	RESPONSES
▼ The number of test takers increased compared to previous year(s)	12% 8
▼ The number of test takers decreased compared to previous year(s)	13% 9
▼ The number of test takers neither increased nor decreased compared to previous year(s)	17% 12
▼ Significant changes in volume have not been observed yet, but we anticipate an increase	4% 3
▼ We did not implement remote proctoring	54% 37
TOTAL	69

Optional comments included:

- We are analyzing data to determine impact of LRP on number of tests taken.
- More people used remote proctoring than previous years, but the numbers lost from tradeshow and other special events were not made up and therefore less than the previous year.
- Our testing volume was down versus prior years but this was not attributable to the start up of Remote Secure Testing. When testing resumed we had about 14 - 16% of our test takers elect remote testing. We

had contemplated shifting to more remote testing but the pandemic forced us to make this change much earlier and much faster than planned.

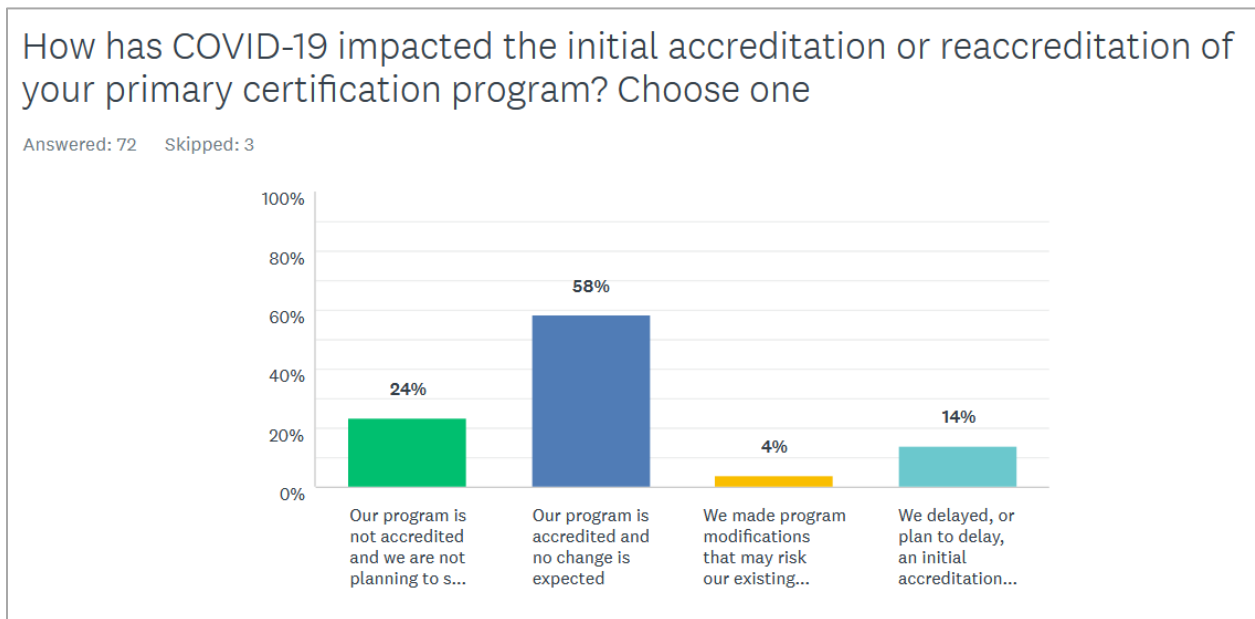
- Our industry was hit very hard and many members are laid off or furloughed.
- We are anticipating a small dip in application volume for 2021.
- Volume has not been evaluated
- No change as I always used Remote Proctoring
- Test takers decreased but due to COVID extensions not due to remote proctoring. Remote proctoring helped us recover some in terms of test takers.
- We saw a large decrease in test takers, but introducing remote proctoring stemmed the bleeding a bit.

Accreditation

All of the accrediting bodies for certification programs listed in Figure 6 made allowances during 2020 for programs to seek approval for live remote proctored test administration.

Most (58%, N=42) of accredited programs reported no expected changes to accreditation status while 4% (N=3) reported that changes made during 2020 may risk their existing accreditation and 14% (N=10) reported delaying an initial accreditation application (see Figure 22).

Figure 22



ANSWER CHOICES	RESPONSES	
Our program is not accredited and we are not planning to seek accreditation in the near future	24%	17
Our program is accredited and no change is expected	58%	42
We made program modifications that may risk our existing accreditation	4%	3
We delayed, or plan to delay, an initial accreditation application	14%	10
TOTAL		72

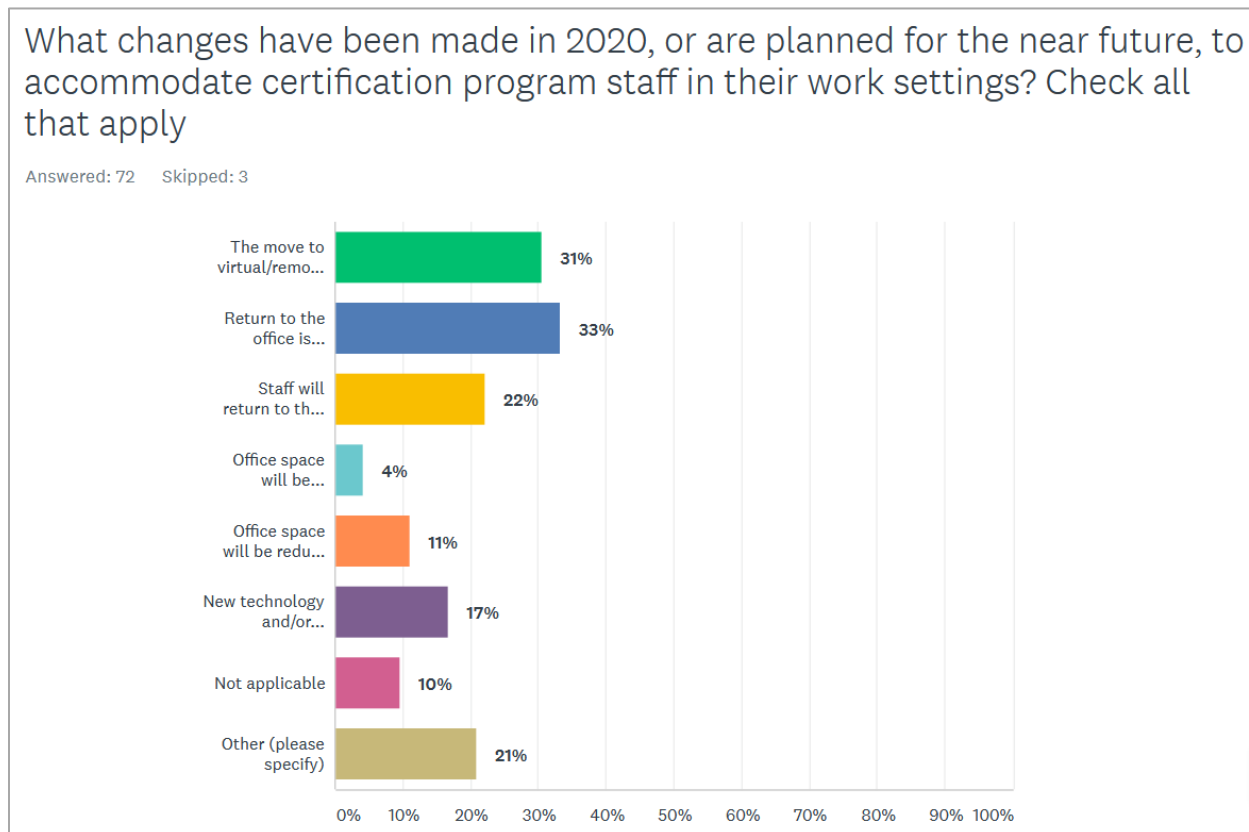
Employee Work Setting

As noted in the Demographic section, prior to the onset of the pandemic in the US in March 2020, 41% (N=30) of organizations' employees worked entirely from an office setting and 42% (N=31) reported that employees worked in an office setting with some employees working remotely. Only 9% (N=7) of organizations worked mostly remotely and 8% (N=6) reported no central office location with all employees working remotely (see Figure 8).

33% (N=24) reported that return to an office setting is currently optional with each staff member given the option to decide. 31% (N=22) plan to keep virtual/remote work in place with no planned return to the office and 22% (N=16) plan to return to the office setting on a rotating and/or part-time basis to allow for increased distancing (see Figure 23).

Optional comments indicated ongoing uncertainty about when and how staff will return to the office.

Figure 23



ANSWER CHOICES	RESPONSES
▼ The move to virtual/remote work will remain in-place with no planned return to the office	31% 22
▼ Return to the office is optional and voluntary with each staff member given the option to decide	33% 24
▼ Staff will return to the office on a rotation and/or part-time basis to allow for increased distancing	22% 16
▼ Office space will be expanded or re-designed to allow for increased distancing	4% 3
▼ Office space will be reduced due to hybrid model of in-office and remote work	11% 8
▼ New technology and/or communication tools will be available to support remote work	17% 12
▼ Not applicable	10% 7
▼ Other (please specify)	Responses 21% 15
Total Respondents: 72	

“Other” responses included:

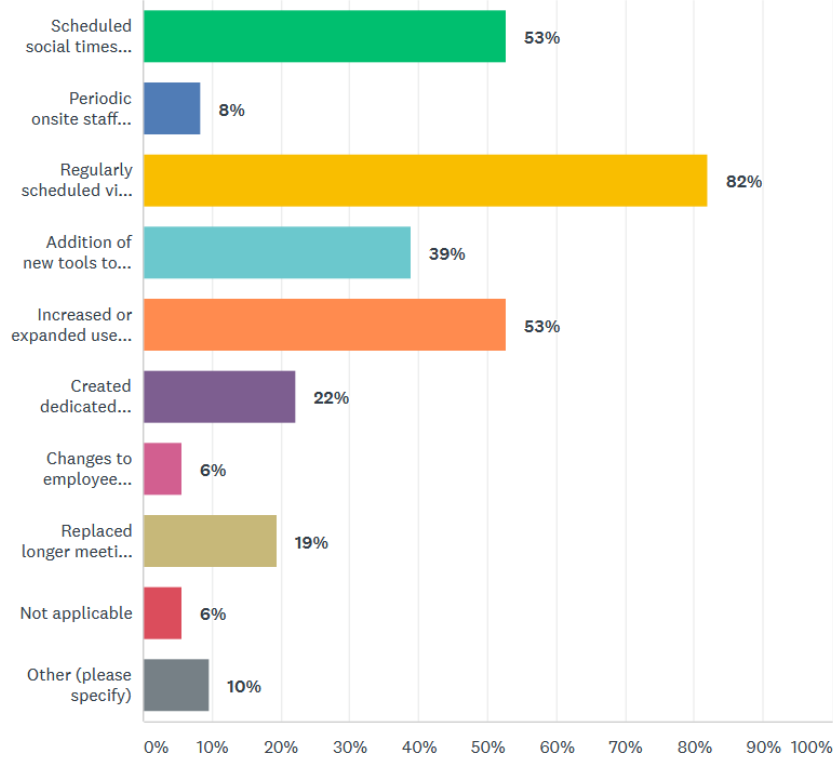
- The move to virtual/remote work will remain in-place with no planned return to the office
- Our Board is still considering what the post-pandemic policies will be regarding working remote vs. working in the office.
- Moving return to office date since March. Current "soonest" date is 7/30/21.
- Staff will continue to work remotely through June 2021, potential changes to remote policy once return to the office
- We have a small office staff and are able to socially distance in the office setting.
- This is still being determined by the management company.
- Remote work with rotating as needed in office.
- Still remote and working on plan for return to office
- Undetermined at this time. Executive staff are discussing hybrid model of in-office and remote and reducing office space
- We had planned to relocate our offices at the end of 2020. Once the pandemic hit we were able to negotiate a very good rate and we moved to a more desirable location which markedly lessened commutes for the majority of staff. We decreased our office space from 5200sq ft to 1700 sq ft.
- No decision has been made
- The office will be doing a phased in approach from voluntary office attendance to rotation with the aim that each employee will be in the office 5 days per month at a minimum.
- I expect some return to the office later in 2021 but the details have not be decided upon.
- Dependent on conditions.
- currently exploring as our lease ends in October 21. Expect we will either stay where we are or move to smaller space but do not envision a future "all virtual" scenario. We need to have some face to face interaction when it is safe to do so.

With a shift to remote work, organizations made adjustments to promote team building, communications, and productivity by leveraging technology. Regularly scheduled video conference staff check-ins were the most common tactic (82%, N=59). Other frequently used approaches included scheduled social times using a video conferencing platform (53% N=38), increased or expanded use of existing tools/technology for collaboration (53%, N=38), and the addition of new technology tools to facilitate communication (39%, N=28) (see Figure 24).

Figure 24

If your staff are, or were, primarily working from remote locations, what actions were implemented to promote team building, communications, and productivity? Check all that apply

Answered: 72 Skipped: 3



ANSWER CHOICES	RESPONSES
▼ Scheduled social times via a video conferencing platform	53% 38
▼ Periodic onsite staff meetings in a space that allows for social distancing	8% 6
▼ Regularly scheduled video conference staff check-ins	82% 59
▼ Addition of new tools to facilitate communication (examples: Slack, Jjabber, MS Teams, Skype for Business, etc.)	39% 28
▼ Increased or expanded use of existing tools and/or technology for collaboration	53% 38
▼ Created dedicated communication or chat channels for projects, teams, and social engagement	22% 16
▼ Changes to employee performance monitoring and/or time tracking	6% 4
▼ Replaced longer meetings with shorter, more frequent meetings	19% 14
▼ Not applicable	6% 4
▼ Other (please specify)	Responses 10% 7
Total Respondents: 72	

“Other” responses included:

- Increased use of weekly reporting to monitor productivity and progress.
- Weekly staff meetings via Zoom or Teams, and a quarterly onsite meeting if distance could be arranged.
- Increased # of organization wide meetings to educate staff on pandemic but also provide positive messaging and support.

- All staff activities - scavenger hunt, trivia contest, gingerbread decorating for holidays
- budget for tech and furniture needs; flexible return to work promise
- regularly scheduled conference calls
- I am a 1-person shop, so it was all OK for me

Looking Ahead

Continued use of virtual/remote meetings for governance and committee work (56%, N=40) and for other volunteers that cannot, or do not want to travel (53%, N=38), is anticipated by most organizations for the next two to three years along with reduction in staff and volunteer travel (43%, N=31). Continued use of remote proctoring is anticipated by 43% (N=31) of programs (see Figure 25).

Figure 25



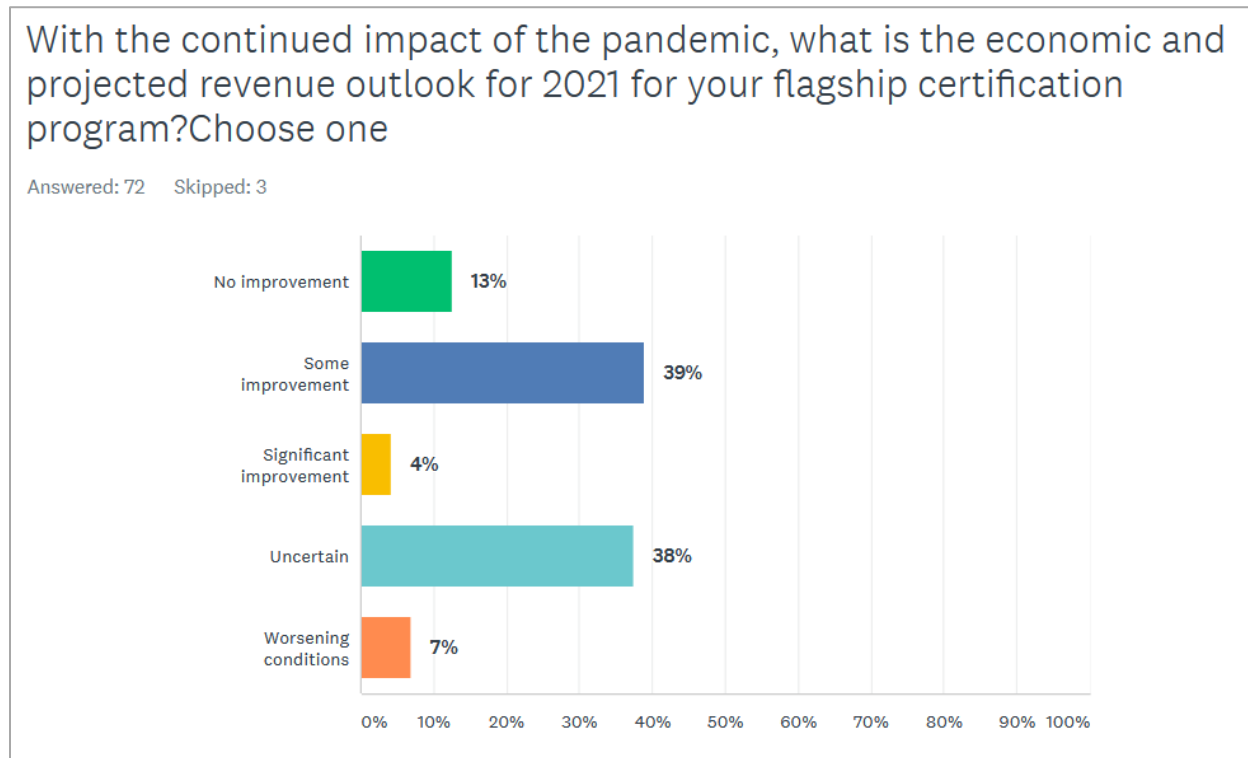
ANSWER CHOICES	RESPONSES	
Requiring remote work	3%	2
Improving remote work infrastructure	35%	25
Offering the option of remote work	33%	24
Process automation	35%	25
Reduction or elimination of paper-based applications and processes	26%	19
Continued use of remote proctoring	43%	31
Continuing or increasing the use of virtual/ remote governance board and committee meetings	56%	40
Continuing or increasing the use of virtual/remote technology for volunteers that cannot, or do not want to, travel	53%	38
Reducing travel for staff and volunteers	43%	31
Making significant changes to eligibility and/or recertification requirements to accommodate impacts related to COVID-19	10%	7
Updating or changing the organization's strategic plan	26%	19
Not applicable	0%	0
Other (please specify)	Responses 14%	10
Total Respondents: 72		

“Other” responses included:

- Our Board is still considering what the 2-3 year plan will be.
- 2021 was already the year for strategic planning to occur, though - but now it will be with added emphasis.
- Created and continue to report out 3 budget scenarios
- Restructuring our continuing certification program
- unknown at this time
- Plan for remote online proctoring as option for required recertification exam beginning in 2021
- Depending on how the remote practical exam goes, we may be interested in offering this in the future.
- we are looking into remote proctoring
- Adding remote proctoring
- expect that we will offer remote proctoring

When asked about the continued economic impact of the pandemic, 39% (N=28) of programs anticipate some improvement for projected revenue in 2021 while 38% (N=27) are uncertain. Only 4% (N=3) expect significant improvement (see Figure 26).

Figure 26



Lessons Learned

Respondents were asked two open-ended questions.

- Please briefly share lessons learned related to your organization’s COVID-19 response and/or changes made that impact the value proposition of your organization’s certification(s). The topics listed below are prompts. You may add relevant comments to any of the topic boxes below or use the “other” open-ended response box at the end of the list for comments related to any topic area not listed (see Figure 27 and [Appendix I](#)).
- Please briefly describe any situations or responses not addressed in this survey that you would like to share (for example issues related to customer service, performance/practical exams, multiple exams, different responses for different programs) (see Figure 28 and [Appendix J](#)).

In general, respondents recommended frequent and clear communications with a focus on empathy, flexibility, and value; an increased use of paperless and automated processes; a willingness to make adjustments to policies and procedures without sacrificing key standards; embracing new technology tools and providing training to support their use; patience, careful planning, and coordinated vendor communications for the transition to live remote proctoring; and collaborative relationships and information sharing.

Programs shifted to provide additional support, understanding, and flexibility for their certificants including increased communications and information resources, free and/or easier to access continued education options, and waived or lowered fees.

Some of the unanticipated opportunities noted by respondents included adoption of new technologies sooner than would have otherwise been planned, benefits from increased communications, and expense savings from reduced travel.

Volunteer engagement experiences ranged widely with the shift to virtual meetings. Respondents advised patience and understanding for volunteers balancing increased work demands, additional planning for recruitment, shorter meeting times and formats suitable for a virtual environment, and finding ways to recognize and appreciate volunteer contributions.

Figure 27

Please briefly share lessons learned related to your organization's COVID-19 response and/or changes made that impact the value proposition of your organization's certification(s). The topics listed below are prompts. You may add relevant comments to any of the topic boxes below or use the "other" open-ended response box at the end of the list for comments related to any topic area not listed.

Answered: 57 Skipped: 18

Responses from 57 organizations are included in [Appendix I](#).

Figure 28

Please briefly describe any situations or responses not addressed in this survey that you would like to share (for example issues related to customer service, performance/practical exams, multiple exams, different responses for different programs).

Answered: 22 Skipped: 53

Responses from 22 organizations are included in [Appendix J](#).

Appendix A – Survey Advisory Group

Terri Hinkley EdD, MBA, BScN, RN, CAE
Chief Executive Officer
Medical-Surgical Nursing Certification Board

Karen Plaus, PhD, CRNA, FAAN, CAE
Chief Executive Officer
National Board of Certification and Recertification for Nurse Anesthetists

Denise Roosendaal, CAE
Executive Director
Institute for Credentialing Excellence

Dennis Spence, PhD, MS, CRNA, FAAN
Chief Research Officer
National Board of Certification and Recertification for Nurse Anesthetists

Appendix B – Survey Development Participants

Liz Grater
Senior Director, Certification
HRCI

Mina M. Larson, M.S., MBA, CAE
Chief Executive Officer
National Certification Commission for Acupuncture and Oriental Medicine

Anne Minton, MA, MBA
Chief Executive Officer
Board of Certification, Inc.

Jerry B. Reid, Ph.D.
Chief Executive Officer
The American Registry of Radiologic Technologists

Emily Schoenbaechler
Certification & Communications Manager
Association for Applied Sport Psychology

Sheri Sesay-Tuffour, PhD, CAE
Chief Executive Officer
Pediatric Nursing Certification Board

Becky Stiggins
Chief Operating Officer
Collegiate Strength and Conditioning Coaches association

Lori M. Tinkler, MBA
Chief Executive Officer
National Board for Respiratory Care

Sheryl Traficano, MBA, CAE
Chief Executive Officer
Certification Board for Diabetes Care and Education

Pam Weber, MPA, CAE
Chief Operating Officer
International Board of Lactation Consultant Examiners

Appendix C – Survey Instructions

Thank you for participating.

This survey is designed to collect baseline information from certification programs across multiple industries and professions. Your responses and comments will help all participants understand the impact of COVID-19 on certification programs and help inform responses and future plans.

All participants will receive a copy of the summary report, so we encourage you to provide information with this in mind.

As you respond to the survey items, please follow these instructions:

Please coordinate to submit only one response per organization

- Responses should address only the certification program/certification department within your organization
- Provide responses for your certification program/department as a whole. Where responses may be specific to one credential -- if you have multiple certifications, provide responses only for your organization's flagship certification program (i.e., most recognized or valued program as your organization defines it)
- When responding to the survey, include any changes made since March 2020
- The terms "staff" and "employees" include all staff (full time and full time equivalents) including contracted individuals (for example, staff that work for the organization through an association management company)
- All survey items and comment fields are optional. We encourage you to provide detailed information, however you may choose to skip items

The survey will take approximately 30 minutes to complete.

A summary report with aggregate data will be sent via email to all respondents that provide contact information. We anticipate that the report will be available in February. No identifying information will be included in the summary report.

Appendix D – Survey Invitations

Invitation from the American Board of Nursing Specialties to all ABNS members:




Mon 1/18/2021 4:01 PM

ABNS <abns@nursingcertification.org>

Covid Survey Request

To Janice Moore

 If there are problems with how this message is displayed, click here to view it in a web browser.



Survey Request

The NBCRNA has developed a *COVID-19 Impact on Credentialing Survey*. The full details can be found at the link below. Please complete the survey (participation is voluntary) on or before the January 27 deadline.

[View Details & Complete the Survey](#)



Invitation from the Certification Networking Group to the CNG database:




Sat 1/16/2021 9:00 AM

Certification Network Group <Support@certificationnetworkgroup.org>

COVID-19 Impact - Credentialing Survey

To Janice Moore

 If there are problems with how this message is displayed, click here to view it in a web browser.



Dear Janice Moore,

I.C.E. member the National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA) developed a survey to gather information about how certifying organizations responded to COVID-19.

The impacts of the pandemic have evolved over time and will likely continue to shift. The purpose of the survey is to gather data related to the shifting response of organizations offering certification programs at this defined point in time, across multiple industries and professions. The survey will capture this unprecedented moment in history for the credentialing industry and help inform future decision making.

The survey was developed by NBCRNA with support from SeaCrest Consulting and extensive input and pilot testing by an advisory panel of 13 credentialing CEOs and Executive Directors.

All certifying organizations are invited to complete the survey at <https://www.surveymonkey.com/r/COVIDcredimpact>. The survey takes approximately 30 minutes to complete. All participants that complete the survey can receive a copy of the summary report. Responses must be received by January 27.

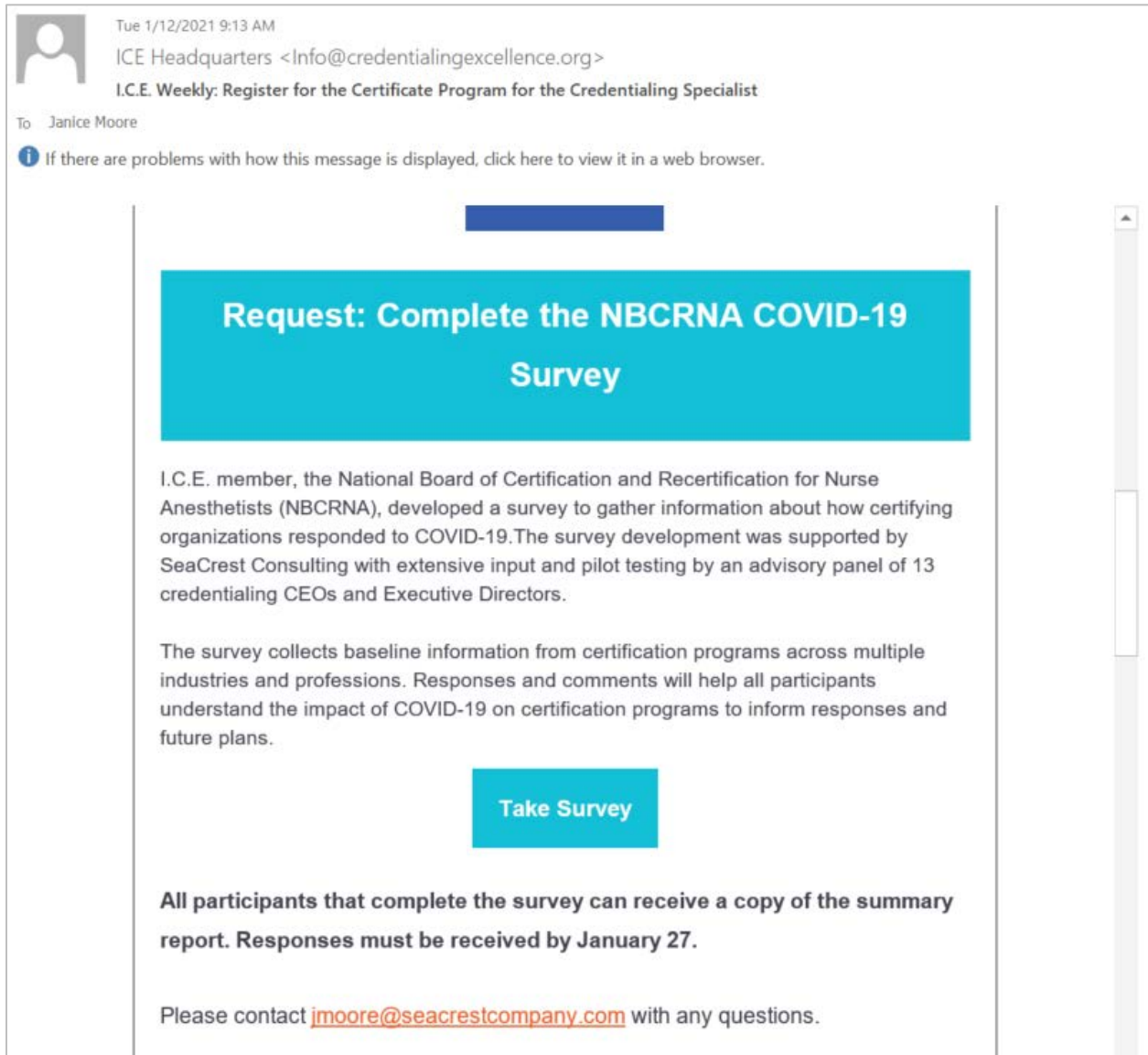
Please contact jmoore@seacrestcompany.com with any questions.

Certification Network Group

[Unsubscribe](#)

Invitation from the Institute for Credentialing Excellence to the I.C.E. database:

An invitation and two follow-up email reminders were sent in the I.C.E. weekly email blast.




The image is a screenshot of an email. At the top left, there is a placeholder for a profile picture. To its right, the text reads: "Tue 1/12/2021 9:13 AM", "ICE Headquarters <Info@credentialingexcellence.org>", and "I.C.E. Weekly: Register for the Certificate Program for the Credentialing Specialist". Below this, it says "To: Janice Moore". A small information icon is followed by the text: "If there are problems with how this message is displayed, click here to view it in a web browser." The main body of the email features a large blue header box with the text "Request: Complete the NBCRNA COVID-19 Survey". Below this, there are two paragraphs of text explaining the survey's purpose and the support provided by SeaCrest Consulting. A prominent blue button labeled "Take Survey" is centered below the text. At the bottom, there is a bolded statement: "All participants that complete the survey can receive a copy of the summary report. Responses must be received by January 27." and a final line of text: "Please contact jmoore@seacrestcompany.com with any questions."

Tue 1/12/2021 9:13 AM

ICE Headquarters <Info@credentialingexcellence.org>
I.C.E. Weekly: Register for the Certificate Program for the Credentialing Specialist

To: Janice Moore

 If there are problems with how this message is displayed, click here to view it in a web browser.

Request: Complete the NBCRNA COVID-19 Survey

I.C.E. member, the National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA), developed a survey to gather information about how certifying organizations responded to COVID-19. The survey development was supported by SeaCrest Consulting with extensive input and pilot testing by an advisory panel of 13 credentialing CEOs and Executive Directors.

The survey collects baseline information from certification programs across multiple industries and professions. Responses and comments will help all participants understand the impact of COVID-19 on certification programs to inform responses and future plans.

[Take Survey](#)

All participants that complete the survey can receive a copy of the summary report. Responses must be received by January 27.

Please contact jmoore@seacrestcompany.com with any questions.

I.C.E. Weekly: Renew Your Membership Today!



ICE Headquarters <Info@credentialingexcellence.org> (ICE Headquarters via n
To Janice Moore

Reply Reply All Forward

Tue 1/19/2021 2:50 PM

If there are problems with how this message is displayed, click here to view it in a web browser.
We could not verify the identity of the sender. Click here to learn more.
The actual sender of this message is different than the normal sender. Click here to learn more.

Request: Complete the NBCRNA COVID-19 Survey

I.C.E. member, the National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA), developed a survey to gather information about how certifying organizations responded to COVID-19. The survey development was supported by SeaCrest Consulting with extensive input and pilot testing by an advisory panel of 13 credentialing CEOs and Executive Directors.

The survey collects baseline information from certification programs across multiple industries and professions. Responses and comments will help all participants understand the impact of COVID-19 on certification programs to inform responses and future plans.

[Take Survey](#)

All participants that complete the survey can receive a copy of the summary report. Responses must be received by January 27.

Please contact jmoore@seacrestcompany.com with any questions.



I.C.E. Weekly: Register for the Credentialing Specialist Certificate Program by January 31



ICE Headquarters <Info@credentialingexcellence.org>(ICE Headquarters via n
To Janice Moore

Reply

Reply All

Forward



Mon 1/25/2021 2:55 PM

i If there are problems with how this message is displayed, click here to view it in a web browser.
We could not verify the identity of the sender. Click here to learn more.
The actual sender of this message is different than the normal sender. Click here to learn more.

[Register Now](#)

Last chance: Complete the NBCRNA COVID-19 Survey

I.C.E. member, the National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA), developed a survey to gather information about how certifying organizations responded to COVID-19. The survey development was supported by SeaCrest Consulting with extensive input and pilot testing by an advisory panel of 13 credentialing CEOs and Executive Directors.

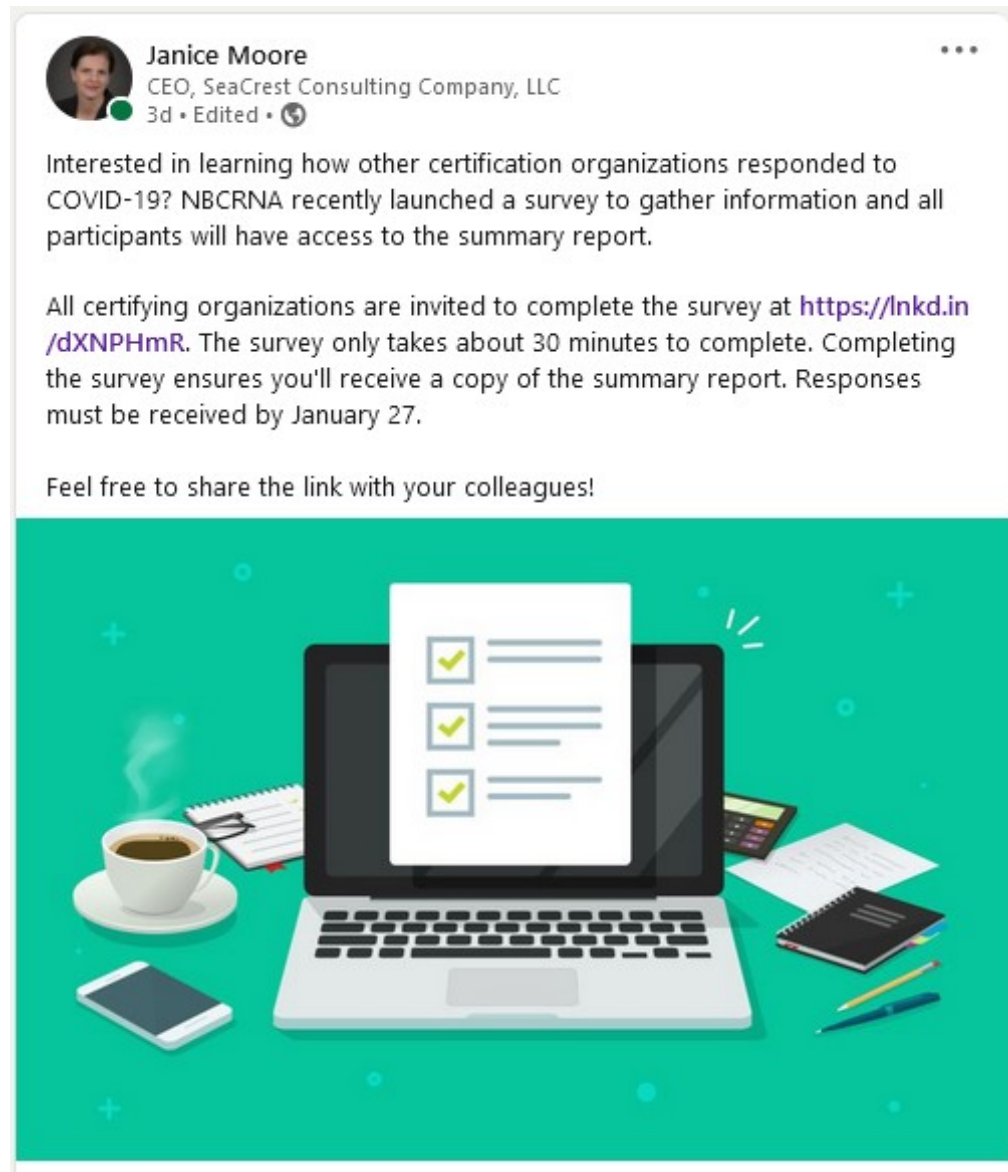
The survey collects baseline information from certification programs across multiple industries and professions. Responses and comments will help all participants understand the impact of COVID-19 on certification programs to inform responses and future plans.

[Take Survey](#)

All participants that complete the survey can receive a copy of the summary report. Responses must be received by this Wednesday, January 27.

Please contact jmoore@seacrestcompany.com with any questions.

Sample LinkedIn Post:



Janice Moore
CEO, SeaCrest Consulting Company, LLC
3d • Edited • 🌐

Interested in learning how other certification organizations responded to COVID-19? NBCRNA recently launched a survey to gather information and all participants will have access to the summary report.

All certifying organizations are invited to complete the survey at <https://lnkd.in/dXNPHmR>. The survey only takes about 30 minutes to complete. Completing the survey ensures you'll receive a copy of the summary report. Responses must be received by January 27.

Feel free to share the link with your colleagues!

Appendix E – Additional Comments for Figure 12

Respondents had the option to provide comments for the item: ***How did you certification program's messaging and marketing communications directed toward potential applicants change.***

Comments related to marketing:

- We usually do a lot of marketing at conferences and other in-person events. With some events being cancelled and others going virtual, we did less of that type of marketing this year. In addition, we usually have business development staff conduct a fair number of site visits and companies and educational institutions to promote our credentials. We did not make any such in-person visits after March 2020.
- Traveling to meetings and advertising/marketing expenses were reduced when meetings/conferences were canceled or changed to virtual.

Comments related to test administration:

- One of our 4 exams which is required for licensure had moved temporarily from year round testing to defined windows. Because of the pandemic and limited testing CBT vendor space, those windows were expanded and plans changed to use a post-equated administration.
- We allowed candidates to test any time that was available. Waived late fees
- We increased our communication with the test candidates significantly due to closure of testing facilities to make sure candidates were able to schedule and complete their testing appointment. We have not made any changes regarding the marketing of our certification.
- Communications were developed on credential extensions due to COVID and information on where testing sites were closed.
- We increased communications to address the changes to both exam administration and recertification due to COVID.
- We added remote proctored exams, but basically we said "we're still here, no changes"
- We communicated weekly to our candidates and program directors to inform them of test site closure information

Comments related to customer service:

- The customer service between March 2020-November 2020 was a drain physically and mentally.

Comments related to requirement changes and deadline changes:

- Unbelievable incentives, reduced requirements and discounts
- We had to extend many people's exam deadlines. All who are approved take exam have two years in which to do so; those at the end of their term were extended until we were able to offer remote testing.
- We heavily marketed our scholarship program and changed the rules around it's usage to attempt to make it financially appealing to retain certification or apply for certification.
- Extended a reduced application fee period for new graduates from 6 months to 12 months after graduation.

Appendix F – Additional Comments for Figure 15

Respondents had the option to provide comments for the item: ***How was your capacity to test and certify new applicants impacted (across all test administration modalities used by your flagship certification program?)***

Comments related to testing volume:

- We saw a 57% decrease in the number of exams administered in 2020. We also validated a new form of the exam in 2020 so had incentives in place to secure enough testers. But the combination of delayed scoring for a month and testing center interruptions significantly impacted our exam numbers.
- We had no testing capacity and then very limited capacity this Spring. We had 1 month where we had no test takers
- We have two testing windows each year with one being in March which was the start of the stay at home orders. We had significant exam cancellations as a result.
- We had to wait to get online remote proctoring implemented; it affected 4 candidates

Comments related to site availability:

- Many testing sites continue to be unavailable. Outside of the U.S., travel bans have prevented some candidates from being able to travel to sites that are available.
- Centers closed, hold times at call centers were hours and hours long.
- Without an online testing option, this left us at a standstill especially during April-May when all testing centers were closed. Our contract with our testing vendor ends 12/31/20, and then we're partnering with a different vendor to offer both online AND onsite testing going forward.
- We were unable to host any oral exams in 2020, but we were able to move all other exams to testing centers when they re-opened.
- In-person testing required for initial high-stakes certification. In March test centers were closed and gradually re-opened with limitations. Our certification is required for an "essential" worker in health care and we were provided a high priority status by the testing vendor.
- Our test window was expanded from 3 weeks to 4 months to accommodate closed testing centers. In addition, we were unable to offer our in-person practical exam and are now in the process of offering our practical exam remotely.
- Test centers closed for a brief period of time due to the pandemic. Remote proctoring was already in place (launched in October 2019), however the proctors for LRP were primarily located in one country and were unavailable when that country shut down completely due to the pandemic. The vendor pivoted and LRP proctors were available within a few weeks.
- Ours is an essential profession. limitation was by number of test takers allowed at a time
- Testing sites were temporarily unavailable, then slowly re-opening with limited seats. This caused longer wait time for appointments and the need for additional travel. We added an additional exam window for each certification program to help accommodate for some of this.
- As our exams were considered "essential," delivery was stopped for roughly one month. However, some testing sites have closed temporarily since due to COVID outbreaks.

- Test vendor temporarily shut down operations nationally and internationally. The vendor categorized certification programs as essential or non-essential and only essential programs could resume testing right away at a limited capacity.
- Testing centers closed for several months. Once open, long phone wait times to schedule an exam and limitations on capacity at test centers.
- Once re-opened, appointments were hard to get.
- Testing sites were unavailable through the end of May 2020. After they reopened, there were changes to procedures and appointments that made appointments harder to get.
- we do two test administrations a year- April and October. April was cancelled. October happened but extremely challenging due to candidate anxiety and test center logistics (social distancing, travel restrictions, test center shut-downs, etc.
- Capacity limits at testing centers caused significant delay to May exams. Volunteers were not able to attend a testing component that they do, ending up in delayed and remote process.
- Test centers were closed for 6 weeks or so but most reopened and live remote proctoring became available.

Other comments:

- Proctoring quality took a dip. In-person, non-test center exams no longer available.
- N/A; new program development
- cancellation of testing window and delay of form development and launch.
- When testing did resume, it was harder for our candidates to make an appointment.
- We were already using remote proctoring.
- No in-person testing -- however, cancellation of in-person events made requirements harder to complete.
- We accelerated our online offerings that were already being developed since 2019, albeit within a limited scope (USA only)
- Our exam based certification is not the flagship certification, but our exam paper-based exam was postponed from spring to fall in a different testing format.

Appendix G – Additional Comments for Figure 16

Responses from 48 organizations are included below for the question: ***If your primary certification program experienced any interruptions to operations, briefly describe the knowledge, skills, or capabilities that were missing or not sufficient to allow for uninterrupted operations. Examples of interruptions include, but are not limited to: exam development activities, testing center closures, cancelled meetings, lack of IT support or technology tools, etc.***

Comments related to remote/virtual operations:

- We have always operated virtually very efficiently. Half of the staff always works remotely and the majority of our leadership, vendor and SME work was always done remotely.
- VPN access for remote workers, hardware for remote workers, COVID exposure of employees from spouse who had to work on site

Comments related to test administration:

- Test vendor closure of sites due to state regulations. As sites reopen, social distancing decreased the number of available seats at a test center.
- Test center closures
- test center closures
- Test center capacity has been an issue for us since March 2020
- Testing center closures had a significant impact on our ability to deliver exams.
- Testing center closures.
- Test center closure
- testing center closures
- Lack of remote proctoring
- Issues implementing live remote proctored exams initially
- Testing centers were closed and/or closed on a moments notice and not notifying candidates.
- Testing centers were closed for a few months this spring. Even when they reopened, some candidates were hesitant to enter onsite facilities and are postponing their test dates accordingly. We did not have online testing and will be implementing this effective January 2021 with new vendor.
- Test centers restricted capacity to comply with social distancing and state/local requirements.
- We have never fully performed a secure oral exam and we found few vendors had an acceptable program.
- We had temporarily closed test centers but now they are only impacted in reduced capacity at centers. No other interruptions
- Test center closures was the primary disruption - candidates unable to schedule to take the examinations
- Testing center closures affected our candidates ability to sit for the written exam in a timely manner. The in-person practical exam was cancelled because our national conference had to be cancelled.

- Since test centers were closed and/or limited, we added Live Remote Proctoring
- Over half of the testing centers closed during our first exam administration of 2020 in March/April, so we closed that window which was a big disruption to our candidates ability to get jobs
- test centers, wait times for communicating with testing agency, longer wait times for open seats, ongoing changes to state mandated situations
- Test centers closed for a brief period of time due to the pandemic. Remote proctoring was already in place (launched in October 2019), however the proctors for LRP were primarily located in one country and were unavailable when that country shut down completely due to the pandemic. The vendor pivoted and LRP proctors were available within a few weeks.
- Test center closures and not enough bandwidth at the testing company to handle the customer's phone calls with scheduling. Also, lack of communication from testing center if they had to close last minute.
- Prior to the pandemic we had no Remote Secure Testing capacity. We had to develop that quickly.
- Test Center closures created some interruptions to testing
- testing sites were closed for extensive times or have very limited availability- applicants would register and sites would close and very long wait lists problematic
- testing center site closures for more than 3 months.
- Testing center closures. Limited appointment time slots for test centers when they did start to open. Some candidates had to travel further to test sites that were open.

Comments related to examination development:

- launch delays; exam development activity delays - activities stretched over greater periods of time to accommodate schedules and challenges.
- Exam development was delayed and forced to change to virtual once resumed.
- We have moved item analysis to later in the year to account for the few number of exams taken in 2020
- exam development activities

Comments related to travel restrictions and cancelled events:

- travel restrictions placed on examinees by their employers or states
- Conferences were cancelled which impacted our ability to connect with potential certificants and provided challenges for current certificants to obtain the required CE for recertification.

Appendix H – Additional Comments for Figure 19

Responses from 33 organizations are included below for the question: ***Did your organization modify any of the following policies or procedures regarding the flagship certification program?***

Comments related to program deadlines:

- Extended certification dates Increased test window from 90 days to 120 days
- mostly changes were related to extensions with supporting and documented rationale. For example, if the reinstatement policy was no longer than 60 days, a blanket policy to allow an additional 60 days was granted due to COVID.
- Our exams are offered twice a year. We allowed candidates to forward their application and fee to a subsequent exam window without charge
- Waived late fees and changes fees for certification exams. Extended 10 year certification deadlines, Extended deadline for annual renewal and waived late fees.
- extension to continued certification (recertification) deadline from July 31 to November 30
- We normally have 3, 1-month long exam windows each year. We added an additional 1-month exam window towards the end of the year.
- Extended authorization dates to take the exam. Extended deadlines due to testing site closure.
- Extended eligibility for exam access and moved item analysis and new exam development to later in 2021
- Extended testing eligibilities from 3 months to 6, extended expiring certifications, extended ability to recertify by continuing education for those with expired certifications, temporarily waived the policy that states that completing students may take the exam no earlier than 30 days prior to completing their formal education and practicum (only intended for students who have completed all aspects of their formal education except the practicum).
- We also provided a 6-month extension for recertification.
- Certification expiration dates were extended to allow more time for recertification.
- Extended length of testing windows.
- A one-time temporary extension was allowed to meet recertification requirements.
- We didn't exactly change deadlines, but we made it known that if a certificant couldn't meet the recertification requirements by the deadline due to COVID-19, they should reach out to us about getting an extension or other consideration on a case-by-case basis. We had maybe 5% of our certificants do this; most recertified on time.
- Extending certification expiration deadlines.
- Expanded existing testing window and added a new testing window. Extended deadline for exam applications.
- Extended the deadline for new [certificant] graduates to receive a reduced price application fee from 6 months to 12 months following graduation.

- We extended exam deadlines for 90 days because of COVID closures, allowed 90 days of free CE access, and added live remote proctoring.
- We did not extend our recertification deadlines (certificants have three years to accumulate 60 CPEs). We did heavily market virtual activities that would count for credit.

Comments related to eligibility requirements:

- Temporarily waived minor eligibility requirement and also provided a better portal for recertification. Extended two deadlines for two programs
- We require in-person CPR/AED courses but these are hard for many candidates to find right now. Consequently, we are allowing them to complete 100% online courses prior to sitting for the exam but they will be required to provide proof of completion of in-person courses for CPR/AED once they are available. We are not sure what to do about withholding certification results until we receive in-person course verification. This has not been an issue until now with the offering of our remote practical exam. Once we get the results, we will have to determine how we are going to handle this. This will also be a concern for our December test candidates who have taken the written exam.
- Board just approved some possible changes to initial cert experience requirements, but need to submit to accreditation body to assess possibility of implementing those changes
- tweaked residency requirements to allow substitutions for certain activities.

Comments related to recertification requirements:

- We temporarily allowed practice hours to count toward recertification because nurses were having difficulty finding CE and having the time to obtain them.
- We provided remote access to the exam development construction meetings, and we opened up a continuing education pilot on professional goals assessments to the all-certified group, instead of the smaller sample
- Have had biweekly conversations with credential holders that also count toward continuing education
- [organization] moved many of the planned conference programs to our LMS platform as CE offerings.

Comments related to exam administration:

- We pilot tested live remote proctoring for another exam, not the flagship one, and are considering whether or not it is safe to also do this for the flagship one in 2021 or beyond.
- Added time (doubled) for test windows and renewal completion. Waived late fees.
- We implemented a Live Online Proctoring option for the second exam.
- The practical exam was offered remotely.
- [Test administration vendor] added remote proctoring, which helped a little but we are not getting the applicants we used to. Most of our industry members are furloughed or laid off and don't have the funds to apply. We have made our education free in many cases to assist with recertification and application education points required. We changed our scholarship rules to cover costs it would not normally cover to try to assist those with keeping or obtaining certification.
- We took advantage of remote proctoring for the exam.

- Remote proctoring was offered once waivers were approved.
- Moving to also provide online remote proctoring
- We added remote online proctored exams; all else stayed the same. We still offer exams in testing centers, but will continue remote proctoring post-pandemic

Comments related to program fees:

- We were planning to increase our exam and recertification fees but due to COVID-19, these plans were put on hold.
- Waived the recertification late fee and implemented live remote proctoring.
- relaxed refund policies and flexibility with the ability to roll-over exams to next administration at no charge

Appendix I – Additional Comments for Figure 27

Responses from 57 organizations are included below for the question: ***Please briefly share lessons learned related to your organization's COVID-19 response and/or changes made that impact the value proposition of your organization's certification(s). The topics listed below are prompts. You may add relevant comments to any of the topic boxes below or use the "other" open-ended response box at the end of the list for comments related to any topic area not listed.***

Responses are listed below and grouped in topic categories that correspond to the prompts listed on the survey.

Certificant/stakeholder communication

- Frequent, anticipatory, just in time written communications for consistent messaging
- Communicated robustly about test delivery changes and support
- Increased these and provided more information about why changes.
- Increased our emails & presence on social media
- It is important to stay in touch with certificant, but not overdo it; important to be sensitive to the work environment for them, like with layoffs, extreme work demands, etc.
- Stay positive and mission focused. Supportive messaging.
- Importance of contact via phone and email increased significantly
- Importance of addressing COVID/how that impacts them, providing resources to assist in their work
- Communicate so they don't make unfounded assumptions
- More communications to each stakeholder and also posters on our website
- More frequent using multiple methods - email, website
- Increased these with more information about why changes were happening
- over communication worked well and added value
- Empathy and kindness go a long way in communicating
- Leverage the flexibility of remote testing and options for recertification.
- Communications go out to stakeholders monthly to let them know where we stand and what we are doing to mitigate COVID obstacles and restrictions.
- should have provided more targeted communications on hardship options
- Be there for them, be flexible, do what we can
- Better self service options
- We have widely advertised the startup of Remote Secure Testing.

- Increased the frequency of communications
- No change
- reinforced the value and importance of keeping close contact with certificants during stressful times
- We have increased communications so the members know we are here for them. We added quarterly zoom chats as well to hear from the members/certificants and see if there is something more we can do to assist them.
- The importance of constant communication was key to keep candidates updated.
- must happen frequently
- Frequent remote communications with stakeholders increased collaboration
- Increased communications were needed to keep certificant informed of changes.
- Sent weekly emails with CEU offerings
- people want free
- Simplify language - many times, we tried to include too many details in communications and they would be lost/ignored. Simpler language with links out to details on specific topics gives better results
- Update frequently- make sure it's in plain language
- More, more, more
- New and increased communications are important.
- Increased
- requires more frequent and concise communications
- communicate as clearly and as often as you can
- Be accommodating with refund and transfer requests
- Started a quarterly newsletter in Nov 2020
- Regular communications to those whose testing date was affected
- We messaged the remote proctoring option

Efficiency changes

- Increased use of secure messaging platforms including use of DocuSign when signatures required
- The months between March and June when ~ 60% of staff were temporarily layed off -- underscored the bare minimum we can do to keep operations going.
- Though most processes are automated, we do have a paper option that slows things down due UPS and limited access to office.

- Transitioned to all online applications
- We are planning to have [vendor] send automatic scores as soon as the candidate is done testing. Examinees currently have to wait one week to get their results.
- We accelerated our transition of the last paper processes to online processes that were already underway
- Paperless and automated application processes
- efficiency of staff communications and oversight
- Can be done
- We had just instituted on-line proctoring when the pandemic hit. We were lucky to be in front of it. Though our program took a hit, we were able to recover as we had the protocols already in place.
- Learned some things we thought were important are not so much
- Always looking for greater efficiency as part of our QI process
- No change
- may have decreased efficiency. Need to consider these issues when everything is remote
- Flexibility and patience were mandatory.
- Increased use of automation and remote work enable new staffing models
- Obtained budget approval to make major website improvements to automate functions
- covid created much more admin work
- working at remotely has helped productivity
- Continuous improvement is critical.
- identify which to make permanent
- New AMS platform allows for online applications & renewals, implemented May 2020
- We have explored and implemented digital processes that are previously paper and in-person

Eligibility requirements

- Allowed clinical practice hours temporarily
- Remain committed to integrity of the credential. Stakeholders are adamant that inspite of demand for credential, the policies remain consistent.
- Review to see if added flexibility is possible while maintaining intent and rigor
- We temporarily waived one requirement and continued into 2021
- remained the same, but hindsight, we should have looked at some changes

- We'll be assessing these more carefully if we can implement changes to be studied; may result in more permanent changes with strong data to back up whatever path we end up taking in the long run
- Need to be expanded
- For 2020 we temporarily waived the requirement for active employment.
- We did away with our recertification requirements around live events and changed the presentation event to be online or through writing articles or blogs and also added Vlogs.
- Needed to be responsive to dynamic conditions in different areas
- governing board determined that elig requirements need to remain as is
- Allowed for OnDemand webinar programming to be included in certification, rather than Live since we released more webinars immediately after conference cancellation
- Relaxed
- don't let standards slip
- Extending deadline to complete requirements was appreciated

Government affairs

- Coalitions are invaluable. We all have common goals and achieve results when we work together.
- in-office lobbying visits replaced by more online contacts
- Significantly increased government affairs and provided more support for stakeholders re COVID 19 resources
- Need to be engaged as impact of COVID unfolds
- Collaborative work with government was needed
- concerns that opposition is using COVID as an excuse to undermine regulation

Marketing and communications

- We became much more proactive and consistent with our communications with recertification and new exam candidates
- Increased communication around covid and increased supportive messaging
- Had to change the way we reached out as no in person conferences.
- Increased marketing
- mission driven. Use of influencers.
- Altered existing text to fit the time
- Importance to address the issues certificants are facing related to COVID, not just market the credential.

- We communicated an extension to the 2020 recertification deadline of two extra months.
- Shorten and increase frequency of messaging
- Increased from beginning as there is no such thing as over communicating. We held town hall meetings and sent out communications in all forms
- need for multiple stakeholder communications
- not only blasting info, but checking in their well being was a value
- Don't back off, stay on course, just acknowledge where people may be
- Increase messaging around flexibility and value of the certification for those seeking new opportunities.
- Marketing resources were significantly reduced. Wanted to do more.
- Focus on individual and organization
- need for providing more resources that offer support versus asking more from them
- we increased this to more than double communications.
- We held webinars to provide information regarding remote proctoring and address questions. We held virtual sessions in place of the in-person we would have held for outreach activities.
- completely impacted
- Couldn't communicate too much during the pandemic
- Expanding advertisements to employer groups
- increased covid specific communication
- Placed more distance between promotional materials, greater emphasis on value and offering discounts
- Specific efforts to explain changes due to Covid
- New and increased marketing initiatives are important.
- Streamlined

Technology

- We've been working on ongoing improvements to our custom database to foster automation and scale. This continued throughout the pandemic.
- Added Zoom
- There is definitely a learning curve to hosting virtual group meetings, small and large, and formal instruction is a must.
- Be discerning when implementing new technology. Ensure adequate training and support. Leadership check in with adoption/barriers is essential.

- Examinees like Live Online Proctoring
- Were in the process of implementing MS Teams before pandemic hit and will continue to use it liberally after pandemic ends
- We implemented MS TEAMS and used chat and video chat features for all meetings
- automation, etc.): initially switched to cell phones for certificant calls - plan to add internet phone system in 2021
- Zoom and Teams were new to us as of March, both work very well
- Give people time to adjust; always more time than you think
- We had virtual communications in place previously. Most in-person meeting have been cancelled and we have moved to a mostly virtual work environment. We hope that will change later this year and we can safely have more in-person meetings.
- Zoom
- Remote Live Proctoring Added, working well after a few bumps in the beginning.
- Zoom is our friend; Now we know what our remote employees experienced
- Increased elearning platforms
- Zoom was new but it was embraced quickly.
- New technology wasn't a barrier, but culture needed to keep up
- Moving to MS Teams for remote phone use
- already were using remote/virtual collab tech
- We liked the option for remote item writing, though it resulted in fewer items submitted than when we get people to commit to sit in a room together for 8 hours writing items
- Slack, use of zoom expanded
- New and increased technologies are important.
- Additional investments
- Fill-in PDF candidate applications helped candidates apply for the exam
- AMS platform allows for certificants to self-report CEUs and print updated certificates
- Realized we could conduct virtual SME meetings, which are actually less expensive!
- Better use of digital communication and engagement for staff and trainings
- Added remote proctoring

Test administration

- Applied for and was approved for temporary remote proctoring. Hoping to implement this fully in the future.
- Extensive research into remote proctoring has lead us to postpone implementation indefinitely despite the current environment. Time to implement and required technical support for our candidates creates challenges that we currently don't have the capacity to address nor is there sufficient demand for the service to justify the expenditure of time and money.
- Processes to add a new testing modality were time intensive.
- We implemented greater flexibility in deadlines for scheduling exams, due to the reduced availability/capacity of exam sites.
- switched to individual exams only; no group administrations; will reinstate in person exams when possible.
- difficult to take advantage of remote proctoring due to candidate volume and challenges with testing vendor platform (vendor now speculates option not available until 2023)
- Testing vendors relaxed the client preferences document in order to cope with PPE. Staff then had to be increasing vigilant about reviewing score files and DVR footage.
- Never say never. LRP was low on the boards list 2 years ago. Now recognize the need.
- Examinees like Live Online Proctoring
- Develop a strong relationship with your test administrator, ensure they are prepared for unexpected situations/crises.
- Candidates responded very favorably to the introduction of LRP
- We will begin to offer online testing, which many candidates like having the option for. Especially during the pandemic but it's also valuable for our rural and international test takers.
- Will consider live remote proctoring
- weekly calls and communication with our test provider on getting sites open and scheduling kids to new sites was helpful
- Leverage the flexibility of remote testing and options for recertification. Need to improve on the business continuity issues that may come up from vendors, particularly those that sub-contract to other vendors (e.g. primary vendor to a sub-contracted vendor)
- Test administration will continue to be done in test centers as safety allows and on-line.
- Remote proctoring was not without a few hiccups, but generally positively received
- had to be flexible with the 1 year window to take the exam b/c of testing center closures
- Need to explore LRP for future Plan B!
- Remote proctoring and how to handle use of books

- Remote secure testing and assessment will be the default setting for a credential we have in development.
- Studying the results of LRP on our certifications
- Eproctoring
- year around testing
- We added remote proctoring.
- We knew there would be bumps in the road when we moved to remote proctoring. We had more patience with our vendor regarding issues with the platform.
- consideration of online proctoring, when needed
- Whole new challenges with live remote proctoring
- our experience was that those using remote proctoring performed poorer than those in trad'l testing centers
- Adding remote proctoring helped bring testing numbers up closer to pre-COVID.
- We tried remote proctoring for pilot testing items with existing certificants, and it was both expensive and full of technical hiccups. This gave us information to use regarding whether or not we decide to do remote proctoring in the future (we're not planning to right now).
- New technologies are critical.
- got to get to remote proctoring regardless of COVID
- frustrating at lack of control when capacity limits hit
- Applied to ANSI for ability to remote test. It was approved and we will continue to offer this after COVID is behind us.
- Migrated one in-person exam to in-like format

Partnerships with other organizations

- ABNS allowed the platform for us to share our experiences and policy changes as a result of COVID 19.
- We saw an increase in partnership engagement as a result of the pandemic. Our existing virtual heavy model helped to ensure we didn't experience any major down time or require any major adjustment.
- Relationships were tested, for sure! Some excelled at creative options and others did not.
- Collaboration and leadership is essential.
- Check to see how other orgs have solved the challenges you are facing
- We worked very closely with membership organizations on providing information and resources as well as advocacy
- It is important to understand the business continuity practices of primary and secondary vendors performing services on behalf of the program.

- Need more of these to share the risk and move forward together
- We have greatly enhanced the working relationship with our new testing vendor and psychometric partner.
- We extended recertification provider agreements for an additional year
- Collaborations were both important and easier in disaster conditions
- Partners became self-serving and greedy; step carefully before entering into agreements.
- Learning and virtual teaching
- personally and professionally benefited from engagement with sector related credentialing org leadership

Performance/productivity monitoring of employees

- Highly vested senior staff do not absolutely need an annual evaluation! After staff returned, they all seem to be enjoying remote work and are very productive. Grateful that all but 1 staff who were furloughed have returned!
- Leadership needs support to perform this essential function. Everyone is stressed, everyone is personally impacted. Bandwidth is narrow. Grace is needed.
- Implement a more robust tool to help remote employees assure that their activities are consistent with organizational expectations
- we changed how we monitor, we relaxed some goals for the year and made realistic adjustments
- Regular communication, clear expectations, and metrics are key
- Largely not an issue, people stepped up
- More frequent checkins were needed.
- change employee status to exempt
- Greater communications and feedback are important.
- they're grown-ups, I expect them to do their jobs as best they can and am not interested (and don't feel it necessary) to overlay a lot of policy around it
- we don't monitor, amazing how people will respond positively to assist with what has to be done. Treat everyone like an adult.

Resources for certificants

- We created and maintained a COVID 19 resources page on our website.
- Increased resources where applicable.
- We offered a free option to gain a limited number of recertification points.
- Certificants have a lower tolerance for routine practices and staff are increasingly applying de-escalation techniques for normal activities required for initial application and renewal processes.

- Increased, but not COVID-related
- We developed a mentoring best practices document as a guiding resource for those working on mentored experience hours during COVID.
- Online updates on changes such as deadline adjustments.
- Created resource page and weekly town halls. Helped them with recertification
- We provided additional materials for our certificants to help them in their jobs as they dealt with the ramifications of COVID-19.
- Adding bite-size information to help with understanding changes and the program requirements
- we worked one on one with candidates on resources, continued to grow our self assessment item bank
- Promoted free CE that is offered by the membership association.
- offered a month of free training for recertification
- Make it easy, remove barriers, be flexible where you can
- We continued to enhance our no-cost learning activities to be used for recertification requirements.
- Waived late fees
- increased COVID and EDI Social Justice resources
- We are allowing for more to be covered by the scholarship program.
- During this difficult time, there was room for every organization to offer some kind of resource for certificants.
- Many challenges to certificants needed flexible response
- Heads up on CEU offerings
- Providing as many free or low-cost activities for recertification was key
- new website
- Increased web-based CE opportunities
- Offered COVID-specific messaging that we'll no doubt use after COVID is history.

Unanticipated opportunities

- I am not sure that we would have pilot tested LRP so soon, so that was unexpected. The pandemic also created the push to try things outside of our routine, fairly comfortable routine.
- We are receiving requests for new credentials.
- Notification of exam results; Results of more contact with candidates
- Possibility of live remote proctoring and volunteer meetings held remotely.

- Our organization utilize this opportunity to connect more with our certificates and other stakeholders. We really promoted our certification and provided more help with all our programs. This was also a good time to have more synergetic relationships with other organizations.
- Remote proctoring, however, we were not able to implement due to the testing center bandwidth. Also, expense savings from having virtual Board meetings.
- savings on travel for exam development activities.
- Always be watchful for these, be quick to consider!
- Looking to move away from window-based testing to continuous testing
- While a board member was interviewed on highly watched news programs of her own accord, she still embraced the opportunity to promote the certification (subtly)
- Increased collaboration and flexibility of partners allowed innovation
- We were able to add remote proctoring more quickly than if it was done in a non-emergency situation.
- covid promotions; community offerings; free stuff
- Gaining experience with different virtual meeting platforms/apps.
- Using remote technology for item writing and pilot testing allowed a greater number and greater variety of certficants to participate
- Remote proctoring has increased our reach to regions in the world that did not have a [vender] test center.
- One positive outcome has been the implementation of the remote practical exam. We would have never tried this without being forced to by COVID-19 and this might be a good addition to our certification program.
- we took this opportunity to recruit volunteers and increase diversity, we gained 36 new item writers in one month

Volunteer engagement

- Our volunteers miss getting together and meeting!
- There has been increased interest in volunteer opportunities. We have always engaged with our volunteers through virtual meetings so nothing changed due to the pandemic.
- No or restricted travel.
- Plan to increase once we are able to travel.
- Steady! Understanding and tolerant of our need to pivot meetings to virtual.
- surprisingly, though essential workers, they remain committed to volunteering and completing assignments.
- Decreased a bit due to job loss and distractions
- Engage virtually (increase use of video conferences for volunteer meetings)

- Volunteers had more time to participate since they weren't spending time traveling.
- Volunteer engagement was difficult during this time. We used virtual meetings to continue to keep volunteers engaged, but it is much more difficult than face-to-face meetings.
- this is where we can use some help. we are developing a VEO department now, Volunteer, Engagement and Outreach!
- Again, like certificant communications, acknowledge where people are and may be, give people time to talk NOT about the work, but about their lives; set time aside for this in every meeting
- Adapt the meeting times and format to accommodate a virtual environment.
- Shortened Board meetings since they were virtual, but tried to incorporate Board bonding or activities to keep them engaged.
- always difficult and COVID added additional needs for flexibility, but our volunteers were capable of doing everything virtual.
- Make it worthwhile and efficient for them to contribute
- Improved quality as travel was not required
- We will not schedule in person test development before 2022. We may make this a permanent change.
- We are trying to be even more mindful of the demands made on volunteers
- We have none at this time. We have no funds to item write or do exam maintenance at this time.
- difficult with remote meetings
- Volunteers embraced the virtual participation options.
- Volunteers stayed engaged during very difficult conditions
- Sending gift boxes to volunteers doing lengthy virtual meetings raised morale and commitment to work that needed to be done.
- While volunteer Board members and SMEs commented that they missed the face-to-face Exam Development Meetings, the virtual meetings were found to be very productive, effective and efficient.
- More demands are placed on volunteers by their employers and we need to review how best to engage them.
- Increased
- be sensitive to what's going on in their profession.
- Added more SME to the item development committee because travel was not necessary.

Other comments

- Staff Flexibility - ability for staff to quickly pivot and address issues as they arise; successfully manage the unexpected.
- Customer service was a challenge due to phone system and will move to internet phones

- You can plan all you want, but fate will tell you otherwise and you have been nimble and flexibly and have a team that is ready to jump in and do what it takes.
- Very little changed in our structure. Travel and volunteer opportunities were the impacted areas.
- It's been tough for front line staff. Stress and emotions are running higher for candidates and the front line staff often have to deal with that, in addition to their own stress and worries. Trying to determine who is taking advantage of a bad situation or who genuinely needs some grace regarding a deadline, etc has been tough.
- We have both remote and in-person employees. Through the use of technology we were able to operate without interruption and respond to our certificants and candidates. The biggest lesson learned is to have constant communication with our constituents.

Appendix J – Additional Comments for Figure 28

Responses from 22 organizations are included below for the question: ***Please briefly describe any situations or responses not addressed in this survey that you would like to share (for example issues related to customer service, performance/practical exams, multiple exams, different responses for different programs).***

- COVID 19 forced us to re-think almost entirely every part of our organization. I shared some of these observations above, but there are still changes and conversations taking place that will impact our future. We appreciate the opportunity to participate in this survey and look forward to seeing what others have shared.
- Customer service impact cannot be understated. This includes increase need for phone and email coverage
- I have responded to the questions in light of our flagship program, but I will note an experience related to two of our other programs: Both were to have launched beta exams in the spring, and we have had to postpone the launch because we anticipated less interest in participating with so few exam sites being open or at full capacity.
- There was an increased need for legal review, input and expense as we laid off staff and tried new things.
- We are noticing a decreased tolerance by existing certificants and applicants for routine processes (routine application completion and processing time, audits, etc)
- Our exam candidates work primarily in emergency departments, mostly full time. They tend to practice part-time as [practice area](the certifications we offer). COVID has left these nurses tired, anxious, overworked. And many sick, particularly during the September exam. At least one examinee, sadly, has died. They needed extra support with empathetic communication and smooth accommodation regarding rescheduling their exams. We implemented a process that was essentially seamless--and welcomed. We also learned lessons about notification of exam results. We have delayed reporting. Previously, we mailed packages to all examinees. In an effort to save on mailing costs, however, we initiated a beta for the April exam, notifying our test-takers who did not achieve a passing score via confidential email. The feedback was that this method was "more personal." When repeated following the September exam, the result has been a significant increase in those who plan to retest, many quoting the text of the email they received. We plan to continue this. The other change was notification of those who achieved a passing score. We post the names of all our certificants in a searchable, publicly available database on our web site. We typically have mailed the exam results and then entered their names in the database within a week thereafter. For the September exam, we encountered a pandemic-related supply chain issue, which delayed the mailing of the results. Instead, we pivoted to posting the names in the database first. Because those who did not achieve a passing score had already received emails, those who searched the database were likely to find their names. They were thrilled. I received screenshots of the database from hospital administrators who were proud of their new certificants. We will continue with this new practice.
- How have test administrators adjusted to these unprecedented times? Is there any data on how these organizations performed?
- While candidate and staff well-being was primary concern more guidance from NCCA on what could potential impact our accreditation would have been helpful/
- All the issues that we've faced were addressed in the survey except perhaps the challenge of long-term volunteer engagement (for example, one volunteer compared the virtual meeting format to the in-person meeting format as "all the work, none of the fun.")
- Our organization became much more purposeful during this year in terms of providing more services and will communications to our stakeholders. We use this opportunity to partner with the membership

organization to provide more resources and move vacation. The beginning part of the very difficult as we were entering into the unknown but putting a hold on travel and needless expenses has helped her organization become more efficient. Although our board misses having a face-to-face meetings, I believe that we can greatly reduce volunteer and staff travel in the years to come.

- Impact on customer service and responsiveness was a challenge to address - due to heightened emotions - stress from restrictions - closures of test centers placed on our certification testing
- Difficulty in mailing certification packets to looking at digital options.
- One issue we had this year was with the exam/item development of our newest [specialty]. the item writers were new coming into this process this year so it was a challenge getting them onboarded remotely and virtually. We realize the value of face to face
- We have extended exam expiration dates as necessary, knowing that many test centers have restrictions and long wait times for testing appointments. We will continue to make as many adjustments as are necessary to ensure our candidates are able to test safely.
- Conducted a beta test in last two months of 2020 and ended up with 86% done remote. Our candidates are skilled with technology and internet connection issues so we had anticipated even more. The lesson seems to be that some people will still either prefer going to a test center or not have a good testing location.
- Did not plan for the variations of customer requests related to payment of fees
- We are interested in the ripple effect of the pandemic as we will feel the echoes for some time. It would be interesting to see if this survey is conducted multiple times over the next few years.
- Covid had an impact across the board for our certification programs. We had to shift everything from our current test development processes to how we provide customer service. All our current relationships with vendors came under scrutiny to determine value. We were able to accelerate some objectives, while sidelining objectives to a later date.
- Increased customer service a priority.
- Morale....keeping people interested/focused and reward accordingly. Pandemic showed who is and who was not "truly" vested/engaged/reliable
- Vendor relations were strained - had account manager changed twice, turnaround time for requests increased, exam specs were not followed as closely.
- Responses of the various vendors and the flooding of their customer service departments

Appendix K – COVID-19 Impact - Credentialing Survey

COVID-19 Impact - Credentialing Survey

Thank you for participating.

This survey is designed to collect baseline information from certification programs across multiple industries and professions. Your responses and comments will help all participants understand the impact of COVID-19 on certification programs and help inform responses and future plans.

All participants will receive a copy of the summary report, so we encourage you to provide information with this in mind.

As you respond to the survey items, please follow these instructions:
Please coordinate to submit only one response per organization

- Responses should address only the certification program/certification department within your organization
- Provide responses for your certification program/department as a whole. Where responses may be specific to one credential -- if you have multiple certifications, provide responses only for your organization's flagship certification program (i.e., most recognized or valued program as your organization defines it)
- When responding to the survey, include any changes made since March 2020
- The terms "staff" and "employees" include all staff (full time and full time equivalents) including contracted individuals (for example, staff that work for the organization through an association management company)
- All survey items and comment fields are optional. We encourage you to provide detailed information, however you may choose to skip items

The survey will take approximately 30 minutes to complete.

A summary report with aggregate data will be sent via email to all respondents that provide contact information. We anticipate that the report will be available in February. No identifying information will be included in the summary report.

COVID-19 Impact - Credentialing Survey

Demographic Items

1. Organization Name.

This information will be used to review survey results for duplicates and will not be published. Please enter the full name with no acronyms or abbreviations.

2. Indicate the structure of your certification organization.

Select one

- Stand-alone legal entity with the primary function of certification
- Division of a larger organization (for example a certification program within a membership association)
- Other (please specify)

3. Number of certification programs offered by your organization:

Select one

- 1 to 3
- 4 to 10
- 11 or more

4. Select the industry that best describes your primary certification program:
Select one

- Athletic training and coaching
- Buildings and Construction
- Business and Management
- Education
- Engineering
- Financial Services
- Fitness and Wellness
- Food and Beverage
- Healthcare
- Information and Technology
- Safety and Security
- Social Services
- Transportation
- Other (please specify)

5. What is your certification department's estimated annual gross revenue for 2020:

Select one

- \$500,000 or less
- \$500,001 to \$1,000,000
- \$1,000,001 to \$3,000,000
- \$3,000,000 to \$8,000,000
- More than \$8,000,000

6. How many full-time employees, or FTEs, work in your certification department:

Select one

- 2 or fewer
- 3 - 5
- 6 - 10
- 10 - 20
- More than 20

7. Is your primary/flagship certification program accredited by ANSI/ANAB, NCCA, IAS and/or ABSNC?

Select one

- Yes
- No

8. Is your primary/flagship certification program required for practice and/or licensure?

Select one

- Yes, required for practice and/or licensure in **all** states/provinces
- Yes, required for practice and/or licensure in **some** states/provinces
- No

9. Prior to March 2020, choose the response that best describes your certification department employees:

Choose one

- All employees worked entirely from an office setting
- Some employees worked in an office setting and some worked remotely
- Most employees worked remotely with few in an office setting
- All employees worked remotely with no central office location

COVID-19 Impact - Credentialing Survey

Operational Responses

10. Did your organization make any changes to certification department staffing related to the pandemic?

Check all that apply

- Reduction in employee hours (example: some full-time employees were changed to part-time)
- Reduction in employee pay (salaries were reduced for some, or all, employees)
- Reduction of benefits (for some or all employees, for example reduced 401k matching, reduced vacation time)
- Temporary furlough of employees (at least some full or part-time employees were temporarily furloughed with the intent to bring them back)
- Reduction of staff size (staff size was reduced through lay-offs or other means with the intent for these changes to last beyond 2020)
- No changes

11. Has the professional work setting location for your certification program employees changed?

Choose one response that best describes the location of employees.

- No change, employees were already working from remote locations.
- No change, employees remained working in the office with no changes to the physical space.
- No change, employees have remained working from a combination of remote and in-office locations in the same numbers as before the pandemic.
- Employees remained working in the office with changes to the physical space such as physical distancing, mask requirements, added barriers, etc.
- All employees moved from working in an office setting to remote work.
- Some employees moved from an office setting to remote work and some employees were already working remotely prior to the pandemic.
- Employees temporarily worked remotely, but have transitioned back into an office setting.
- Some employees moved from working in an office setting to remote work with some essential employees remaining in the office.
- All employees moved to a hybrid combination of working remotely and working in the office setting.
- Some employees moved to a hybrid combination of working remotely and working in the office setting.

12. What challenges have presented during COVID-19 that disrupted the ability of employees to conduct their normal work routine(s)?*Choose all that apply*

- Most employees were able to successfully continue working without significant disruption
- Access to PPE in the office setting
- Space to socially distance in the office setting
- Lack of policies for remote work
- Availability of in-home office space for remote work
- Access to equipment for remote work (laptop, printer, etc.)
- Access to technology for remote work (FTP access, email access, shared files, network drives, etc.)
- Access to technology support for remote work (IT department, help desk, help navigating set up and/or IT issues)
- Access to personal resources for remote work (child care, caring for family member)
- Access to HR resources and/or professionals to navigate questions and challenges
- Access to healthcare resources (mental health)
- Security for remote work systems, tools, and/or information sharing
- Illness (employee illness)
- Other (please specify)

13. How did your certification program's messaging and marketing communications directed toward potential applicants change?*Choose all that apply*

- We cut back on the amount of marketing and communications related to promoting certification and/or recertification
- We increased the amount of marketing and communications related to promoting certification and/or recertification
- We created COVID-specific resources and communications
- We increased customer service capacity to respond to applicant and certificant questions and concerns
- No change

Optional, briefly comment on the changes:

14. How was the facilitation of volunteer meetings impacted due to COVID-19? (examples include governing board meetings, SME meetings, exam development committee meetings, etc.)

Choose one response that best describes the impact.

- Not impacted
- Transitioned to a hybrid of in-person and virtual meetings
- Transitioned to all virtual meetings using technology we already had access to
- Transitioned to all virtual meetings and added technology we did not previously have in place (for example, solutions for secure remote item writing)
- Postponed activities, but completed then within 2020
- Postponed until 2021
- Indefinitely postponed
- Other (please specify)

15. How did travel bans or travel limitations impact certification program operations during 2020?*Choose all that apply*

- Our organization temporarily limited or restricted **employee** travel, but those limitations are no longer in place
- Our organization temporarily limited or restricted **employee** travel and those limitations are still in place
- Our **vendors and/or consultants** were limited or restricted by their company's travel rules, but those limitations are no longer in place
- Our **vendors and/or consultants** were limited or restricted by their company's travel and rules and those restrictions are still in place
- Our **vendors and/or consultants** are unwilling to travel
- Our **volunteers on the governing board** have been unable to travel due to travel restrictions placed on them by their employers
- Our **volunteers on the governing board** have been unable to travel or limited in their ability to travel due to state-mandated orders
- Our **volunteers on the governing board** are unwilling to travel
- Our **other volunteers (committee members, SMEs)** have been unable to travel due to travel restrictions placed on them by their employers
- Our **other volunteers (committee members, SMEs)** have been unable to travel or limited in their ability to travel due to state-mandated orders
- Our **other volunteers (committee members, SMEs)** are unwilling to travel

COVID-19 Impact - Credentialing Survey

Programmatic Responses

16. How was your capacity to test and certify new applicants impacted (across all test administration modalities used by your flagship certification program)?

Choose one

- No interruption to testing operations
- Testing sites were temporarily unavailable
- Limited interruptions related to testing availability (for example, longer wait times for appointments, or additional travel required to find an open testing site)
- Significant interruption to testing operations

Optional, add a brief explanation

17. If your primary certification program experienced any interruptions to operations, briefly describe the knowledge, skills, or capabilities that were missing or not sufficient to allow for uninterrupted operations.

Examples of interruptions include, but are not limited to: exam development activities, testing center closures, cancelled meetings, lack of IT support or technology tools, etc.

18. Were any of the following scheduled certification activities postponed due to COVID-19?*Choose all that apply*

- Solicitation of subject matter experts (SMEs)
- Job analysis study
- Item writing
- Item review
- Form assembly
- Establishing a passing point (standard setting, cut score study)
- Equating
- Form implementation (live launch)
- None of the above, planned activities were conducted without postponing
- No exam development activities were planned in 2020

19. Did your organization experience a change in volunteer attendance?*Choose all that apply*

- We suspended all non-exam related volunteer activity
- We suspended all exam-related volunteer activity
- Volunteer availability to participate increased
- Volunteer availability to participate decreased
- Volunteer availability to participate remained the same
- Other (please specify)

20. How was your practitioner workforce (including the candidate and certificant population for your primary program) impacted?*Choose all that apply*

- An overall increase in demand, workload, and/or similar factors
- An accelerated need to transition more candidates/practitioners into practice (for example expediting students entry into practice, transitioning retired professionals back into the workforce)
- Increased employer support for certification
- A short-term decrease in demand (examples: reduced workload, furloughs, layoffs, hiring freezes)
- A continuing decrease in demand (examples: reduced workload, furloughs, layoffs, hiring freezes)
- Reduced employer support for certification
- Addition of new reciprocal or accelerated licensing provisions, or changes to regulatory requirements, to increase entry into the workforce
- Other (please specify)

21. Did your organization modify any of the following policies or procedures regarding the flagship certification program?

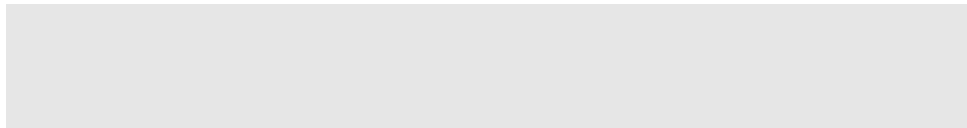
Choose all that apply

- Eligibility requirements (not including changes to fees and deadlines)
- Program fees
- Program deadlines
- Exam administration methods
- Recertification requirements
- Exam development activities
- Access to continuing education
- Access to preceptorships, internships, clinical work, mentorships, or other required work/experience
- Guidance related to use of telehealth to meet practice requirements

Optional, if you made any modifications, please briefly describe the changes made

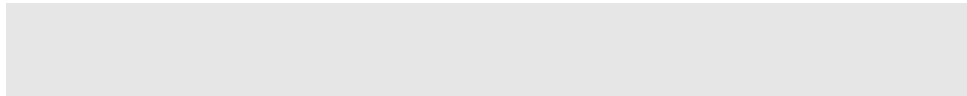
22. Did your organization make any changes to existing examination administration methods?*Choose one*

- No changes, the exam was administered as planned and scheduled
- Disruptions and delays were experienced but the exam continued to be offered when and where feasible without changing the test administration method(s)
- Switched to a different test administration vendor/service, with NO changes to test administration methods
- The organization added live remote proctoring as an option in addition to the existing test administration method(s)
- The organization added another method of remote proctoring as an option in addition to the existing test administration methods (record and review or other remote proctoring methods without a live proctor)
- The program transitioned fully to remote proctoring and discontinued other test administration method(s)

Optional Comments:

23. How did the introduction of remote proctoring impact the number of tests takers?*Choose one*

- The number of test takers increased compared to previous year(s)
- The number of test takers decreased compared to previous year(s)
- The number of test takers neither increased nor decreased compared to previous year(s)
- Significant changes in volume have not been observed yet, but we anticipate an increase
- We did not implement remote proctoring

Comments:**24. How has COVID-19 impacted the initial accreditation or reaccreditation of your primary certification program?***Choose one*

- Our program is not accredited and we are not planning to seek accreditation in the near future
- Our program is accredited and no change is expected
- We made program modifications that may risk our existing accreditation
- We delayed, or plan to delay, an initial accreditation application

COVID-19 Impact - Credentialing Survey

Changes to Address the Needs of Staff Members

25. What changes have been made in 2020, or are planned for the near future, to accommodate certification program staff in their work settings?

Check all that apply

- The move to virtual/remote work will remain in-place with no planned return to the office
- Return to the office is optional and voluntary with each staff member given the option to decide
- Staff will return to the office on a rotation and/or part-time basis to allow for increased distancing
- Office space will be expanded or re-designed to allow for increased distancing
- Office space will be reduced due to hybrid model of in-office and remote work
- New technology and/or communication tools will be available to support remote work
- Not applicable
- Other (please specify)

26. If your staff are, or were, primarily working from remote locations, what actions were implemented to promote team building, communications, and productivity?

Check all that apply

- Scheduled social times via a video conferencing platform
- Periodic onsite staff meetings in a space that allows for social distancing
- Regularly scheduled video conference staff check-ins
- Addition of new tools to facilitate communication (examples: Slack, jJabber, MS Teams, Skype for Business, etc.)
- Increased or expanded use of existing tools and/or technology for collaboration
- Created dedicated communication or chat channels for projects, teams, and social engagement
- Changes to employee performance monitoring and/or time tracking
- Replaced longer meetings with shorter, more frequent meetings
- Not applicable
- Other (please specify)

COVID-19 Impact - Credentialing Survey

Anticipated Long-Term Changes

27. What strategic changes is your organization planning for the next 2-3 years?
Choose all that apply

- Requiring remote work
- Improving remote work infrastructure
- Offering the option of remote work
- Process automation
- Reduction or elimination of paper-based applications and processes
- Continued use of remote proctoring
- Continuing or increasing the use of virtual/ remote governance board and committee meetings
- Continuing or increasing the use of virtual/remote technology for volunteers that cannot, or do not want to, travel
- Reducing travel for staff and volunteers
- Making significant changes to eligibility and/or recertification requirements to accommodate impacts related to COVID-19
- Updating or changing the organization's strategic plan
- Not applicable
- Other (please specify)

**28. With the continued impact of the pandemic, what is the *economic and projected revenue outlook* for 2021 for your flagship certification program?
*Choose one***

- No improvement
- Some improvement
- Significant improvement
- Uncertain
- Worsening conditions

COVID-19 Impact - Credentialing Survey

Open-Ended Items

29. Please briefly share **lessons learned** related to your organization's COVID-19 response and/or **changes made that impact the value proposition** of your organization's certification(s).

The topics listed below are prompts. You may add relevant comments to any of the topic boxes below or use the "other" open-ended response box at the end of the list for comments related to any topic area not listed.

Certificant/stakeholder communications:

Efficiency changes:

Eligibility requirements:

Government affairs:

Marketing and communications:

Technology (new tools or technology, new automation, etc.):

Test administration:

Partnerships with other organizations:

Performance/productivity monitoring of employees:

Resources for certifiants:

Unanticipated opportunities:

[Redacted]

Volunteer engagement:

[Redacted]

Other:

[Redacted]

30. Please briefly describe any situations or responses not addressed in this survey that you would like to share (for example issues related to customer service, performance/practical exams, multiple exams, different responses for different programs).

[Redacted]

COVID-19 Impact - Credentialing Survey

Contact Information

31. Provide your contact information to receive a summary report of the survey results. Contact information is used only for this purpose.

Name:

Email address: