



# POLICY POSITION

## MANDATORY NURSING CONTINUING EDUCATION FOR LICENSURE

### 2023 BOARD OF DIRECTORS AND ADVOCACY COMMITTEE

Endorsed & Cosigned by DNA Organizational Affiliates:

- Delaware Organization for Nursing Leadership



The Delaware Nurses Association (DNA) has served all Delawareans for over 100 years with a focus on restoring optimal health, alleviating suffering, and preventing illness and diseases through the art and science of nursing. Nurses are the most trusted professional group from any sector as rated by the public. Additionally, nurses are the largest sector of the licensed healthcare workforce in Delaware, nationally, and internationally. In Delaware, there are 4 nurses for every 1 physician.

This policy position statement was created and approved to inform nurses licensed in Delaware about the current requirements for state-specific mandatory continuing education (CE) to renew their nursing license. Mandatory nursing CE is a strategy, but not the only, to ensure the ongoing competency of nurses. Additionally, this policy position serves as a reference and guidance document for nurses, leaders, and law/policy makers related to DNA's beliefs surrounding mandatory nursing CE for licensure.

### BACKGROUND

Mandatory CE for licensed professionals is a practice that developed in the 1970s "as a result of actions by state legislatures and professional organizations" (Young & Willie, 1984). Extensive research on the effectiveness of mandatory CE was completed starting in the late 1970s and throughout the 1980s. This research continues into current practice across all licensed health professions. Samuel et al. (2021) noted a significant cost of CE in America but concluded that more research from specific disciplines needs to be completed to demonstrate continued impact on patient and health outcomes.

Professional consensus and recommendations vary on the practice of mandatory CE for clinical outcome improvement, especially as practices for delivering CE have significantly changed over the last decade. In 2014, the American Nurses Association (ANA) released a position statement entitled "Professional Role

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Competence.” DNA adopts and reaffirms the position statement and notes the following relevant excerpts to our policy position statement.

"ANA believes the registered nurse is individually responsible and accountable for maintaining professional competence. ANA further believes that it is the nursing profession's responsibility to shape and guide any process for assuring nurse competence. Regulatory agencies define minimal standards for regulation of practice to protect the public. The employer is responsible and accountable to provide an environment conducive to competent practice. Assurance of competence is the shared responsibility of the profession, individual nurses, professional organizations, credentialing and certification entities, regulatory agencies, employers, and other key stakeholders."

"ANA believes that in the practice of nursing, competence is definable, measurable and can be evaluated. No single evaluation method or tool can guarantee competence. Competence is situational, dynamic, and is both an outcome and an ongoing process (Competency and Credentialing Institute [CCI], 2008). Context determines what competencies are necessary."

"Competence can be evaluated by using tools that capture objective and subjective data about the individual's knowledge base and actual performance and are appropriate for the specific situation and the desired outcome of the competence evaluation. Such tools and methods include but are not limited to: direct observation, patient records, portfolio, demonstrations, skills lab, performance evaluation, peer review, certification, credentialing, privileging, simulation exercises, computer simulated and virtual reality testing, targeted continuing education with outcomes measurement, employer skills validation and practice evaluations. However, no single evaluation tool or method can guarantee competence."

## STATEMENT OF DNA POSITION

DNA believes that mandatory CE for nursing license renewal is a reasonable process to ensure the ongoing professional development and competence, expansion of knowledge, development of new skills, and high quality, evidence-based practice of all nurses. However, we do have specific and strong recommendations related to the regulation of the content of mandatory CE for licensure. We do not endorse nor support the inclusion of disease-specific CE for licensure. Examples of disease-specific CE include Alzheimer's, specific forms of cancer, Crohn's, peripheral neuropathy, rare diseases, etc. DNA and nurses recognize the significant impact these diseases have on those afflicted and have empathy for the individual and their support network.

It is our professional consensus that regulating CE to this level is practically impossible and not valuable to the profession nor those we serve. Nursing and healthcare has evolved into a highly specialized ecosystem with specific education, training, and certifications for the licensed clinicians in

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each specialty. We do find it acceptable and of professional and public value to potentially include mandatory CE related to societal issues such as health inequities (e.g., impact of unconscious bias on marginalized populations) and widespread public health issues (e.g., opioid epidemic).

DNA affirms that:

- Ongoing practice competence is an individual and professional matter directly related to the outcomes achieved by those served by nurses.
- Competence affects the quality of care patients receive and the nurse's own self-respect, self-esteem, and the meaningfulness of work.
- No single evaluation method or tool can guarantee competence.
- Competence is situational, dynamic, and is both an outcome and an ongoing process.
- Competence can be evaluated by using tools that capture objective and subjective data about the individual's knowledge base and actual performance and are appropriate for the specific situation and the desired outcome of the competence evaluation.
- Mandatory nursing CE for licensure is one way, out of numerous, to evaluate ongoing competence.
- Mandatory nursing CE for licensure must not be leveraged by special interest groups, elected officials, and/or policy makers to advance a platform and/or specific cause, particularly for specific diseases.
- We will continuously monitor and lead the state's nurses to ensure ongoing alignment with this policy position statement, while incorporating evidence-informed changes, advancements, and innovations.

## ETHICAL DUTY

The ANA Code of Ethics for Nurses (the Code) defines expectations related to the primary goals, values, and obligations of our profession. ANA and DNA believe that the Code is nonnegotiable and that each nurse has an obligation to uphold and adhere to its ethical precepts.

Provision 5 of the Code states, "The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth" (ANA, 2015, p19). Furthermore, no matter the nurse's role or setting, "nurses must maintain competence and strive for excellence in their practice" (ANA, 2015, p22). "Professional growth requires a commitment to lifelong learning. Such learning includes continuing education and self-study, networking with professional colleagues, professional reading, achieving specialty certification, and seeking advanced degrees" (ANA, 2015, p22).

## DELAWARE LAW (AS OF APRIL 1, 2023)

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Title 24 Professions and Occupations, Chapter 19 Nursing of the Delaware Code is enacted law that established and maintains the Delaware Board of Nursing and all associated functions, licensure and qualifications for Delaware nurses, nursing education programs, and more. Additionally, Delaware Regulations establish Administrative Code in furtherance of Title 24, Chapter 19 that establishes the “rules and regulations” for nursing. Section 9.2.1.1.1. states, “During each biennium, each Registered Nurse must earn 30 contact hours and each Licensed Practical Nurse must earn 24 hours, to be credited to that biennium. At least 3 of these contact hours must be in the area of substance abuse. All contact hours must be earned through an approved method or by approved provider.” (State of Delaware, 2023).

On September 8, 2022, the 150<sup>th</sup> Delaware General Assembly passed legislation that enacted a fourth contact hour requirement for nurses “who work in adult gerontology in a healthcare setting must complete at least 1 hour of continuing education in each reporting period on the topic of diagnosis, treatment, and care of patients with Alzheimer’s disease or other dementias.” (Del. C. § 83:422, 2022)

DNA strongly encourages Delaware nurses to review section [9.0 Rules and Regulations Pertaining to Mandatory Continuing Education of the 1900 Board of Nursing Administrative Code](#) as there are several “approved methods to earn contact hours” beyond the traditional course-based approach. Examples of approved methods to earn contact hours include academic studies; authoring an article, book chapter, or independent study; certification/recertification; educational presentations; and a research project.

## REFERENCES

American Nurses Association. (2014). *Position statements: Professional role competence*. Accessed March 27, 2023, from <https://www.nursingworld.org/globalassets/practiceandpolicy/nursing-excellence/ana-position-statements-secure/nursing-practice/professional-role-competence.pdf>.

American Nurses Association. (2015). *Code of ethics for nurses with interpretive statements*. Nursesbooks.org: Silver Spring, MD.

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Samuel, A., Cervero, R. M., Durning, S. J., & Maggio, L. A. (2021). Effect of continuing professional development on health professional’s performance and patient outcomes: A scoping review of knowledge syntheses. *Academic Medicine*. 96(6), 913-923. doi:10.1097/ACM.0000000000003899

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