GNCC
Gerontology Nursing Certification Commission

REACH FOR EXCELLENCE

Gerontological Specialist Certification

Certification Exam Application and Guidelines

Gerontology Nursing Certification Commission (GNCC)
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The Gerontological Nursing Certification Commission (GNCC) would like to congratulate you on your decision to take the Gerontological Specialist – Certified (GS-C) exam. If you need further information on GS-C certification, please email gncc@gerocert.org or visit gerocert.org.

■■■ Certification and Credential ■■■

Certification is awarded to advanced practice registered nurses (APRNs) who meet the eligibility criteria and pass the multiple-choice exam. It is based on assessment of knowledge in gerontology. The exam consists of 175 questions. The time allotted for the exam is four (4) hours.

The designated credential is GS-C (Gerontological Specialist – Certified). This credential may be used in all correspondence or professional activities. Those who earn the GS-C credential obtain objective validation of their expertise.

GS-C certification is valid for 5 years.

■■■ Eligibility Criteria ■■■

To be eligible to participate, applicants must meet the following criteria:

- The applicant must hold a full and unrestricted RN license in the United States or its territories.
- The applicant must have current recognition or must meet the requirements by the state board of nursing to perform as an advanced practice registered nurse (APRN).
- The applicant must hold current national certification in an advanced practice registered nurse (APRN) role.
- The applicant must have a minimum of 2500 hours of experience in an advanced practice role, working with older adults during the last 5 yearswhen applying for initial certification.
  – When applying for recertification by exam, the applicant must have a minimum of 1000 hours of experience in an advanced practice role working with older adults during the last 5 years, or have equivalent alternative professional proficiency activities as outlined on gerocert.org.
- The applicant must have completed fifty (50) contact hours of approved continuing education in gerontology* within the 3 years prior to submitting the exam application. Continuing education hours must be accredited by a provider or approver of continuing nursing education, or medical education, such as the American Nurses Credentialing Center (ANCC), a state board of nursing, nursing association, Accreditation Council for Continuing Medical Education (ACCME), or American Academy of Nurse Practitioners. (AANP).
  – When applying for recertification by exam, the applicant does not need to provide proof of continuing education hours.

* For initial GS-C certification, continuing education contact hours include online or on-campus coursework, attending conferences, lectures, etc., **where the applicant is the learner**. Alternatively, precepting hours, writing entries or articles for publications, giving presentations or lectures, etc., are considered professional contact hours.

■■■ Statement of Nondiscrimination ■■■

It is the policy of GNCC that no individual shall be excluded from the opportunity to participate in the Gerontological Specialist Certification process on the basis of age, sex, race, religion, national origin, ethnicity, disability, marital status, sexual orientation, or gender identity.

■■■ Application Process ■■■

The testing agency currently hosting the GS-C examination is C-NET. They can be contacted by phone at 1-800-463-0786.

Submission for Computer-Based Testing (CBT):
Computer-Based Testing (CBT) exams are offered year-round. Applications are accepted on a rolling basis.

Examination Permit

Complete the exam application in its entirety. Be sure to sign and date your application. Upon approval of an examination application, the applicant will receive an examination permit by email. The emailed permit will include a link to an online scheduling portal for the applicant to schedule the exam at the computer-based testing location of choice. The computer–based testing agency will send a follow-up email to the applicant confirming the exam site, date, and time that the applicant has chosen. If the applicant does not receive an examination permit within 4-6 weeks of submission, contact the testing agency directly

<u>NOTE</u>: If the application is incomplete, illegible, or the criteria cannot be verified, the candidate will be contacted to provide the missing information. If the requested information is not received within the stated time frame, the application process will stop and a refund will be provided less the refund administrative fee.

Taking the Examination

Applicants will not be admitted to the examination without an examination permit and proper ID. Substitution of an applicant cannot be made and no such request will be honored. The examination permit will remain active for a period of 90 days (from the date of issue). The applicant must test within the 90-day window printed on the permit. If the applicant does not test by the end of the 90-day window, both the examination permit and exam application will expire. The applicant must then submit a new application and fee for the exam before being allowed to test.

You should arrive at the testing location on your examination permit at the report time listed. Bring your valid government-issued photo ID and the examination permit. The name on your ID must match the name on your exam permit. You need only bring your examination permit and your ID. Pencils and all other testing materials are provided. No drinks or food are permitted in the testing area. Cell phones and all other electronic devices are not permitted.

The certification examinations are multiple-choice tests. It is important to read each question carefully and choose the one answer that you think answers the question correctly. There is no penalty for guessing, so an educated guess is appropriate if you are unsure of the answer. Four (4) hours are allotted to complete the examination.

■■■ Refund, Reschedule, or Cancellation ■■■

Reschedule Requests

To reschedule a CBT exam, the applicant must contact the computer-based testing agency by calling the number provided on the CBT examination permit no less than 48 hours prior to the scheduled exam. Reschedule requests or cancellations made less than 48 hours prior to the scheduled exam will not be accepted, and the applicant must either test as scheduled or be considered a 'no-show.' No-show applicants may still qualify for a 90-day extension, but the applicant must contact the testing agency in writing before the close of their 90-day testing window. A 90-day extension fee will apply.

Special 90 Day Permit Extension

The testing agency will grant a 90-day extension to untested applicants who require a new 90-day window. Only one 90-day extension will be granted per qualifying applicant and the permit extension will only allow for testing in the CBT format. Applicants requesting a 90-day extension must contact the testing agency in writing before the close of the 90-day testing window. A 90-day extension fee will apply.

Refunds

Applicants requesting a refund must first cancel any scheduled exam date previously booked with the computer–based testing agency. Written refund requests must be submitted by the payee and received by the testing agency no later than two (2) weeks prior to the close of the 90-day testing window printed on the permit. Refund requests received after this time will not be considered. A refund request must include the applicant's full name, the last four digits of the social security number, and the name of the exam being cancelled or the request will not be considered.

All requests will be considered individually by the testing agency, whose decision shall be final. In the event of an approved refund, the fee will be refunded, less the refund administration fee of $50. Failure to complete the certification process within 12 months of the original exam date will result in forfeiture of application fees.

Special Arrangements

<u>**Disability:**</u> Reasonable testing accommodations are provided to candidates with documented disabilities recognized under the Americans with Disabilities Act (ADA). The disability must be documented by a qualified professional whose credentials are appropriate for the particular disability. GNCC and the testing agency will make special arrangements to accommodate candidates with disabilities that interfere with test taking.

To request special arrangements, complete and submit the exam application to the testing agency with the appropriate documentation. Please allow 6 weeks for special arrangements. Every effort will be made to accommodate your request. To accommodate some requests, a change of exam date or exam location may be required. For questions about acceptable documentation, contact the testing agency directly.

■■■ Fees ■■■

Membership in the Gerontological Advanced Practice Nurses Association (GAPNA) is not required to take the exam. However, GAPNA members may take the exam at a reduced fee. Prices are subject to change without notice. To ensure you have the most updated information, visit gapna.org/certification.

	Exam Fee
GAPNA member:	$295
Non-GAPNA member:	$395

Returned check fee - $35 if a check is returned by the bank, remittance of all fees thereafter must be in the form of a money order, certified check, or credit card.
Hand score of an examination request of test results - $50
Refund Administration Fee - $75
Incomplete Application Fee - $50
90-Day Extension Fee - $100
Late Fee - $50

■■■ Exam Blueprint ■■■

The test specifications or blueprint is based on the results of a survey which identified the practice patterns of APRNs in gerontology. The blueprint is valuable to the test taker because it breaks down the sections of the test. Use it to help you focus your study as you prepare for the exam.

APRN Gerontological Specilist
Test Specifications
175 Items

Area	Gerontological Specialist Proficiency	% of Test	# Items
I	Performs comprehensive assessment of the complex older adult.	20%	35
II	Performs appropriate screening, diagnostic testing, treatment, and planning of care for the complex older adult.	20%	35
III	Prescribes medications, including consideration of risks and benefits of pharmacotherapy for complex older adults.	20%	35
IV	Uses a system-based approach to design and implement educational strategies to optimize health outcomes.	13%	23
V	Coordinates/manages palliative and end-of-life care congruent with goals and values of older adult and family/carers.	13%	23
VI	Anticipates and manages transitions of care between site and providers.	9%	15
VII	Uses a systems-based approach to anticipate and deploy resources to optimize outcomes for older adult populations.	5%	9

■ ■ ■ Confidentiality of Application, Exam, and Scores ■ ■ ■

All application information is considered confidential and is not shared with ANY outside party. It is used by GNCC and the testing agency for certification processing purposes. To insure the security of the exam, the test materials are confidential and will not be released to any person or agency.

Pass/fail status will be released to outside parties only when submitted with a written authorization signed by the candidate. Any additional information about a candidate's individual test results will be released only to the candidate, upon written request.

■ ■ ■ Notification of Exam Score ■ ■ ■

Applicants taking a computer-based test will receive a score immediately upon completion. If you pass the exam, the report will reflect your score and inform you when to expect your certificate in the mail. Successful candidates will receive a wall certificate with their name and GS-C credential. Current passing score approved by the GNCC board for the GS-C exam is 76%.

If you were unsuccessful on the exam, you will receive a report that provides your total score and a breakdown of the test subareas with the percent of questions you answered correct in each. This breakdown of subarea scores will help you determine the areas in which you need further study.

Certification granted by GNCC is a voluntary process intended solely to test for special knowledge. GNCC does not license or define the qualifications of any person to practice nursing. The significance of certification in any jurisdiction or institution is the responsibility of the candidate to determine. The candidate should contact the appropriate state board of nursing or institution in order to determine practice implications.

■ ■ ■ Recertification ■ ■ ■

The GS-C credential is valid for five (5) years. Recertification is available by exam or by continuing education. Certified individuals receive courtesy recertification notices prior to the expiration of their certification. It is the certificant's professional responsibility to know his or her certification expiration date.

Recertification applications should be submitted to GNCC no later than 30 days prior to your expiration date. For more information on GS-C recertification, visit www.gerocert.org under the recertification section.

■ ■ ■ Denial, Suspension, or Revocation of Certification ■ ■ ■

The occurrence of any of the following actions will result in the denial, suspension, or revocation of certification by the GNCC Certification Board:

1. Falsification of information on the GS-C examination application
2. Falsification of any material or information requested by GNCC
3. Any restrictions such as revocation, suspension, probations, or other sanctions by a health care registry, a certifying organization, or a nursing authority which grant a professional license, registry, or certification
4. Misrepresentation of certification status
5. Cheating on a GS-C exam
6. Falsification of information on the GS-C recertification application

Any other claims or causes for denial, suspension, or revocation will be decided on a per case basis by the GNCC after thorough investigation. If certification is denied, suspended, or revoked for any reason, no fee will be refunded.

■ ■ ■ Right of Appeal ■ ■ ■

A candidate who has had certification denied, suspended, or revoked or has failed the exam has the right of appeal. An appeal must be submitted in writing to the President of GNCC within 30 days of notification. The appeal shall state specific reasons as to why the applicant is entitled to certification or recertification. The President shall review the appeal and make recommendations to the GNCC commissioners. Discussion of the appeal will be conducted. The final decision of GNCC will be communicated in writing to the candidate within one (1) month of the decision.

Failure of the candidate to request an appeal shall constitute a waiver of the right to appeal. Documentation of the appeal process and outline will be placed in a permanent file at the GNCC National Office.

The mission of GNCC is to improve the quality of care provided to older adults by promoting and acknowledging the highest standards of advanced practice nursing through the certification process. The Gerontology Nursing Certification Commission (GNCC) supports individuals, families, and communities seeking gerontological health care who expect and deserve a standard of excellence. We believe that excellence may be enhanced by certification of those professionals entrusted to deliver that care. We also believe that certification should be awarded following successful completion of a comprehensive examination assessing a broad scope of knowledge applicable to the field of gerontological health care.

The Gerontology Nursing Certification Commission (GNCC) was established in 2018 to develop and implement certification examinations for gerontological nursing.

GNCC is separately incorporated, and an independent organization that collaborates with the Center for Nursing Education and Testing (C-NET) in certification testing and recertification services. GNCC also works collaboratively with the Gerontological Advanced Practice Nurses Association (GAPNA) to promote, advertise and offer the certification examination and to recognize certified individuals. The APRN Gerontological Specialist-Certification (GS-C) certification examination is endorsed by GAPNA.

It is the goal of GNCC to promote the highest standards of the Advanced Practice Registered Nurse (APRN) in Gerontology through the development, implementation, coordination and evaluation of all aspects of the certification and recertification processes. GNCC recognizes the value of education, administration, research, and clinical practice in fostering personal and professional growth and currently provides the APRN GS-C examination to validate clinical knowledge at the proficient level of practice. GNCC collaborates with the Center for Nursing Education and Testing (C-NET) whose expertise in the areas of test development, administration, and evaluation is unequaled. C-NET works with the GNCC to ensure that the examination offered is reliable, valid, and meet industry standards. C-NET provides a full range of test development and test administration services, including:

- Certification testing and recertification services for specialty nursing practice
- Test construction workshops for nurse educators.
- Practice analysis studies
- Accreditation assistance

GNCC promotes professional growth by developing and implementing certification examinations for gerontological nursing.

GNCC is composed of five commissioners, including one public member. The commission is comprised of board members representing as wide a geographical distribution, educational levels and clinical specialties as possible. GNCC is managed by an association management firm, Anthony J. Jannetti, Inc. (AJJ), located in Pitman, NJ. Staff from AJJ include an Executive Director and a Certification Services Manager. A Nursing Test Committee is responsible for writing and reviewing questions relevant to the examination. Members of the Nursing Test Committee have a variety of gerontology nursing experience, meet licensing and education requirements, and must be GNCC certified. Along with the testing agency representative, members review current item statistics and develop and revise items as needed.

Contact information:

GNCC National Office
East Holly Avenue, Box 56
Pitman, NJ 08071-0056
Phone: 856-256-2345
Fax: 856-589-7463
gncc@gerocert.org
gerocert.org

Testing Agency
C-Net
35 Journal Square, Suite 901
Jersey City, NJ 07306
Phone: 800-463-0786
Fax: 201-217-9785
info@cnetnurse.com

■■■ Change of Contact Information/Record Maintenance ■■■

The applicant will not be able to request a name change after the examination permits have been issued. The name that the applicant used on the certification examination application and government official ID is the name that will be used for test administration. When the applicant appears at the test site, the name on the examination permit **must** match the other forms of identification. The applicant will not be allowed to sit for the examination without proper identification. If an applicant changes his or her name and/or address, the testing agency and the GNCC should be notified in writing by fax or by email.

Please Note: GNCC and the testing agency must determine that the applicant's name and the name provided in any and all supporting documentation refers to one and the same person. If this is not evident, you must include proof of a legal name change when submitting an application.

GNCC and the testing agency will retain electronic records of all candidates and certificants for at least five (5) years. It is the professional responsibility of the applicant to notify GNCC of any change in name, mailing address, phone number, and/or email address. GAPNA and GNCC share the same database. These changes may be made online by updating your account at GAPNA.org after logging in. Changes may also be directed to the GNCC National Office, East Holly Avenue Box 56/Pitman, NJ 08071-0056. Phone: 856-256-2345; Email gncc@gerocert.org.

■■■ Reference List ■■■

The list may be helpful in preparing for the GS-C certification exam.

Books
Ferrell, B.R., Coyle, N., & Paice, J. (Eds). (2015). *Oxford textbook of palliative nursing* (4th ed.). New York, NY: Oxford University Press.
Halter, J.B., Ouslander, J.G., Studenski, S., High, K.P., Asthana, S., Supiano, M.A., & Ritchie, C. (Eds.). (2017). *Hazzard's geriatric medicine and gerontology* (7th ed.). New York, NY: McGraw-Hill Education.
Ham, R.J., Sloane, P.D., Warshaw, G.A., Potter, J.F., & Flaherty, E. (Eds.). (2014). *Ham's primary care geriatrics: A case-based approach* (6th ed.). Philadelphia, PA: Saunders/ Elsevier.
Harper, G.M., Lyons, W.L., & Potter, J.F. (Eds.). (2019). *Geriatrics review syllabus: A core curriculum in geriatric medicine* (10th ed.). New York, NY: American Geriatrics Society.
Kennedy-Malone, L., Martin-Plank, L., & Duffy, E. (Eds.). (2019). *Advanced practice nursing in the care of older adults* (2nd ed.). Philadelphia, PA: F.A. Davis Company.
Morley, J.E., Ouslander, J.G., Tolson, D., & Velias, B. (2013). *Nursing home care*. New York, NY: McGraw-Hill Education.
Reuben, D.B., Herr, K.A., Pacala, J.T., Pollock, B.G., Potter, J.F., & Semla, T.P. (2018). *Geriatrics at your fingertips*, (20th ed.). New York, NY: American Geriatrics Society.
Semla, T.P., Belzer, J.L., & Higbee, M.D. (Eds.). (2016). *Geriatric dosage handbook* (21st ed.). Hudson, OH: Lexicomp/Wolters Kluwer.
Singelton, J.K., DiGregorio, R.W., Green-Hernandex, C., Holzemer, S.P., Faber, E.S., Ferrara, L.R., & Slyer, J.T. (Eds.). (2015). *Primary care: An interprofessional perspective* (2nd ed.). New York, NY: Springer Publishing Company.

Other references - Examples
American Geriatrics Society. (2015) Updated Beers criteria for potentially inappropriate medication use in older adults.

Medicare Benefit Policy Manual
https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/bp102c08.pdf

Quality Assurance & Performance Improvement
https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/QAPI/downloads/GuidanceforRCA.pdf

The National Long-Term Care Ombudsman Resource Center
https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_q_immedjeopardy.pdf

Revised National Pressure Ulcer Advisory Panel Pressure Injury Staging System (2016)
https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5098472/

■■■ **Exam Application** ■■■

☐ CBT Exam Only

1. Name: Last   Maiden   First   Middle Initial

2. Last four digits of social security number:

3. Home Address:

   City: State: Zip:

4. Home Phone: (   )   Work Phone: (   )   Ext.

5. E-mail Address:

6. Check the appropriate application fee:

   ☐ $295 GAPNA members   ☐ $395 non-members

   Include payment method (check one):
   ☐ **Check/Money Order payable to the testing agency, C-NET**

   Credit Card Authorization:
   ☐ **Charge my Visa or MasterCard**

   Card number: _____ - _____ - _____ - _____   Exp date: _____   CVV: _____

   Name on card: _____

7. Complete the following:

a.   RN License #: _____ State: _____

     Expiration Date: _____   Date of Original License: _____

b.   Advanced Practice Registered Nurse License #: _____ State: _____

c.   List type of APRN current national certification: _____

d.   I have 2500 hours of experience in an advanced practice role, working with older adults during the last
     5 years. Yes ☐

e.   I have completed fifty (50) contact hours of approved continuing education in gerontology within the 3 years prior to
     submitting the exam application. I have completed the attached form listing my contact hours. Yes ☐

8. Employment history beginning with present employment. Please do not send resumes. (Use a blank sheet of paper if additional space is needed.)

From - To (Month & Year)	Employer & Address	Position Title	Supervisor	Hrs/Wk
–				
–				
–				
–				

YOUR SUPERVISOR MUST COMPLETE THIS SECTION IN ITS ENTIRETY:
As indicated above, the applicant has 2500 hours of experience in an advanced practice setting, working with older adults during the last five (5) years. Yes ☐

Employer/Collaborating MD: _____

City:_____ State: _____ Zip code: _____

Signature: _____ Date: _____

Title: _____ Facility/Institution: _____

Phone: (_____) _____ Fax: (_____)_____ E-mail: _____

9. I hereby attest that I have read and understand the GNCC policy on Denial, Suspension, or Revocation of Certification and that its terms shall be binding on all applicants for certification for the duration of their certification.

I hereby apply for certification offered by the GNCC. I understand that certification depends upon successful completion of the specified requirements. I further understand that the information accrued in the certification process may be used for statistical analysis and for evaluation of the certification program. I further understand that the information from my certification records shall be held in confidence and shall not be used for any other purpose without my permission; however, upon passing the examination, GNCC reserves the right to publish my name and certification expiration date by state on the GNCC website.

To the best of my knowledge, the information contained in this application is true, complete, and correct and is made in good faith. I understand that the GNCC reserves the right to verify any or all information on this application.

Signature: _____ Date: _____
          (sign before mailing)

10. Print the application, sign and attach the following items:

1) A photocopy of current license(s) or verification of licensure from the licensure board, with license number(s) and expiration date clearly visible.
2) A photocopy of current GAPNA membership card, if applicable.
3) A copy of the diploma from the master's or post-master's APRN program.
4) Evidence (current certificate or letter from board) of current certification as an advanced practice registered nurse from a national certifying board with expiration date clearly visible.
5) Photocopy of your valid, government-issued photo ID (e.g., driver's license or passport)

Attach the photocopies to this application. Send all forms, along with credit card information or check/money order, **payable to C-NET:**

C-NET
35 Journal Square, Suite 901 Jersey City, NJ 07306
Phone: 800- 463-0786 — Fax: 201-217-9785

Verification of 50 Hours of Continuing Education in Gerontological Nursing

The applicant must have completed fifty (50) contact hours of approved continuing education (CE) in gerontology within the 3 years prior to submitting the exam application. This completed form(s) attesting to the 50 hours of continuing education in gerontology must be returned with the certification application. If necessary, use additional copies of this form.

Please print or type and avoid using abbreviations. If necessary, use additional copies of this form.

Program Title	Date of Program (chronological order)	Activity Sponsor (include provider # if applicable)	Type of Contact Hours*	Number of Approved CE Hours	Office Use Only

*Type of Contact Hour:
H = Home Study
M = Meeting

Name: _____

Total contact hours this page: _____

Minimum 50 Contact Hours

Please print or type and avoid using abbreviations. If necessary, use additional copies of this form.

Program Title	Date of Program (chronological order)	Activity Sponsor (include provider # if applicable)	Type of Contact Hours*	Number of Approved CE Hours	Office Use Only

*Type of Contact Hour:
H = Home Study
M = Meeting

Name: _____

Total contact hours this page: _____

Minimum 50 Contact Hours

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