**NCCA Certification Accreditation: Self-Assessment Checklist**

This self-assessment tool is intended to provide guidance on your program’s readiness to submit an application for accreditation to the National Commission for Certifying Agencies (NCCA). The NCCA Standards apply to certification programs, not certificate of attendance or participation, or certificate programs.

The checklist below is intended to identify any gaps in evidence or documentation that should be addressed *before* an application is submitted in order to demonstrate the rigor and completeness needed to achieve or to maintain accreditation. The checklist provides a short summary of the actual Standard; for a complete description of the Standard and its Essential Elements and Commentary, please review the *NCCA Standards for the Accreditation of Certification Programs.*

Self-assessed responses in the “working toward” or “do not currently have” columns will likely indicate that a program does not currently meet all of the Standards. The NCCA strongly advises that your program be able to respond favorably to *all* of the criteria below prior to your application submission.

Please note that a *self-assessment* of “having complete evidence to support this criterion” does not guarantee that the evidence will be interpreted by the NCCA as fully complying with the Standard. It is only intended as an organizing framework for your program. Once your program believes that the evidence is complete and submits its application for accreditation, the NCCA will review each application relative to the intent of the Standard to evaluate compliance and render an accreditation decision.

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| **Self-Assessment Criteria** | **Have complete evidence to support this criterion** | **Working towards completion of evidence**  | **Do not currently have evidence** |
| **Standard 1-5: Purpose, Governance, and Stakeholders** |
| Well-defined purpose, population being certified, and justification for appropriateness of activities. (Standard 1) |  |  |  |
| Autonomy in essential certification decisions, prevention of undue influence, and management of conflict of interest. (Standard 2 A through E) |  |  |  |
| Distinct firewall between education and certification activities; no conflict of interest or unfair practices (Standard 3) |  |  |  |
| Certification program is financially viable (Standard 4) |  |  |  |
| There is sufficient staff resources/expertise and use of consultants to conduct an effective program (Standard 5) |  |  |  |
| ***Illustrative sources of supporting evidence:*** *proof of legal status, governance documents, bylaws, policies and procedures, organizational charts, candidate handbooks, publicly available information about certification preparation, financial statements.* |
| **Standards 6-7: Responsibilities to Stakeholders** |
| Certification information must be readily available to existing and prospective certificants (Standard 6):* + Application and eligibility
	+ Description of exam
	+ All modes of test delivery
	+ Testing accommodations policy
	+ Nondiscrimination and fairness
	+ Retesting policy
	+ Reconsideration of adverse decisions
	+ Annual reports of statistics
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| Evidence of periodic review of all programs policies related to certification: * Eligibility
* Complaints and disciplinary action
* Fees or other requirements that might unreasonably limit access
* Retesting policy
* Policy for accommodations
* All policies and procedures to obtain and maintain certification (including reconsideration of adverse decisions
 |  |  |  |
| ***Illustrative sources of supporting evidence:*** *policies and procedures manual, website pages, candidate handbook.* |
| **Standard 8: Awarding of certification** |
| Certification is awarded after appropriate evaluation of knowledge and skills only, and grandfathering is not permitted once accredited(Standard 8A). |  |  |  |
| Reciprocity of certification without testing can only be done with demonstration of content and empirical equivalence (Standard 8B). |  |  |  |
| Policy for protection of use and misuse of certification marks, logos. |  |  |  |
| ***Illustrative sources of supporting evidence:*** *candidate handbook, policies and procedure, website.* |
| **Standards 9-12: Records, Confidentiality, Conflict of Interest, and Security** |
| 1. Records retention and management policies and practices follow legal guidelines (Standard 9)
 |  |  |  |
| 1. Confidentiality agreements and policies and procedures must protect privileged and confidential information (Standard 10)
 |  |  |  |
| 1. Demonstration of avoidance of conflict of interest in certification decisions or actions (Standard 11)
 |  |  |  |
| 1. Secure retention of records pertaining to candidate and examination (Standard 12)
 |  |  |  |
| ***Illustrative sources of supporting evidence:*** *Secure records retention, destruction policies, confidentiality and conflict of interest statements and agreements.* |
| **Standards 13-18: Assessment Instruments** |
| Qualified, representative panels of subject matter experts for exam development and validation. (Standard 13) |  |  |  |
| Job analysis (Standard 14):* Published summary
* Clearly defined, appropriate methodology
* Documentation of all methods, results, outcomes
* Conducted frequently enough to reflect current practice
 |  |  |  |
| Exam specifications (Standard 15)* Define objective, intended purpose
* Address critical elements of the exam
* Weightings of exam are aligned to job analysis and exam blueprint
 |  |  |  |
| Examination development (Standard 16):* Systematic, accurate, appropriate item development plan
* Appropriate design, documentation, execution so that sampling plan meets exam specifications
* Appropriate translation methods when applicable
* Comparability of content across forms
 |  |  |  |
| The cut or passing score has been set using accepted criteria, and a technical report is published, outlining the methods, procedures, subject matter expert and consultant involvement, and results (Standard 17) |  |  |  |
| ***Illustrative sources of supporting evidence:*** *Reports of job task analysis, cut score study, examination development, and examination specifications, and policy for frequency of cycle.* |
| **Standard 18: Examination Administration** |
| Secure, confidential protocols for exam from storage to conveyance, administration, and disposal, irregular behavior reporting and handling (Standard 18A) |  |  |  |
| Standardized procedures for all modes of test delivery for comparability of results, fairness (Standard 18B) |  |  |  |
| Trained proctors are used that do not have a conflict of interest or vested interest in the outcome of exams (standard 18C) |  |  |  |
| Monitoring of ongoing compliance with exam administration and security procedures (Standard 18D) |  |  |  |
| ***Illustrative sources of supporting evidence:*** *security manuals, proctor manuals, candidate handbooks, exam administration manuals, QAS policies, non-disclosure agreements* |
| **Standards 19-21: Score reporting, Reliability, and Equating** |
| The program has documented the psychometric procedures used to score, interpret, and report assessment results that let the candidate know their performance against the passing standard (Standard 19).For responses scored by judgment, judge qualifications and selection, standards, and training materials are documented.  |  |  |  |
| There must be evidence of sufficient reliability of candidate scores (Standard 20).  |  |  |  |
| Different forms, test delivery methods must be fair and not advantage or disadvantage candidates (Standard 21), including translated forms. |  |  |  |
| ***Illustrative sources of supporting evidence:*** *technical reports showing pass/fail letters, reliability, equating and evidence of comparability.* |
| **Standard 22: Maintaining Certification** |
| Periodic recertification is required:* Definition of continuing competence
* Time-limited
* Criteria for recertification (retesting or continuing education) with appropriate rationale
* Verification that candidates meet requirements
* Publicly available requirements
 |  |  |  |
| ***Illustrative sources of supporting evidence:*** *candidate handbook, websites, policies and procedures* |
| Standard 23: Quality Assurance |
| Quality assurance program with:* monitoring of program activities
* process for dealing with errors
* policies and procedures for regular review of exams and results and corrective actions
 |  |  |  |
| ***Illustrative sources of supporting evidence:*** *policies and procedures, quality assurance policies, meeting minutes, calendars or schedules, training logs.* |
| **Standard 24: Maintaining Accreditation** |
| I am aware that an annual report must be submitted by June 1 of each year, and will routinely report substantive changes to any aspects of my program(s) throughout the year as well as aggregate statistical data and reports of appeals or complaints. |  |  |  |