General Information

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I. Welcome and Introduction:
The Breast Patient Navigator Certification Program is a certification that has been developed by a peer review team of the National Consortium of Breast Centers (NCBC). The Navigator program identifies the purpose of certification as a means to: [1] set standards of achievement and the navigator’s role; [2] enhance patient safety, quality of care and delivery of services through recognition and resolution of barriers to care; and [3] recognize professionals who advance beyond basic knowledge in a specialty field.

Mission of NCBC: The mission of the National Consortium of Breast Center’s nonprofit Navigator Certification program is to optimize care of patients affected by diagnostics and cancer of the breast. Through standardized certification, we recognize highly skilled navigators who excel in communication, support, education, assessment and elimination of barriers to care from initial screening imaging to survivorship or end of life care, with a goal of continual support offered for every patient, every time.

Governance (Standard 2): The governance of the Breast Patient Navigator (CN-B*) certification is a function of the NCBC Board of Directors, with operational oversight provided by the Navigator Core Committee. A list of Board members can be found at www2.breastcare.org/board-of-trustees.

A. 2014 Navigation Certification Core Committee
   Janelle Clark, MSN, ANP-BC, CN-PB, CBEC
   Cathy Cole, NP, MPH, CN-BP
   Melissa Hopkins, RN, BA, CN-BN [Chair]
   Linda Kramer-Hall, Community Liaison
   Andrew Newman, RT, CN-BI
   Jaci Nore, RN, LPN, CN-BC
   Becky Olson, CN-BA
   Julie Shisler, LPN, BS, CN-BM
   Dr. John Bell, Medical Advisor
   Kimberly Samuels, RT, Executive Director
   Jennifer Cobb-Hayes, MSM, Certifications Manager
Certification Core Committee and Task Forces (Standard 3)
The current Navigator certification committee consists of 27 volunteers who are certified navigators who practice the spectrum of navigation across the U.S. This team has one public member, a breast cancer survivor and one NCBC staff member whose job it is to administer the exam and manage the day-to-day operations of certification, renewal, and recertification of breast patient navigators.

**Navigator Task Force Members**

<table>
<thead>
<tr>
<th>Task Force</th>
<th>Name</th>
<th>Designation</th>
<th>Licensure</th>
<th>Location</th>
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<tr>
<td>N</td>
<td>Jeannine Arias</td>
<td>CN-BN</td>
<td>RN</td>
<td>Hinsdale, IL</td>
</tr>
<tr>
<td>N</td>
<td>Amy Beazizo</td>
<td>CN-BN</td>
<td>RN</td>
<td>Roseville, CA</td>
</tr>
<tr>
<td>I</td>
<td>Linda Bell</td>
<td>CN-BN</td>
<td>RN</td>
<td>Rochester, NY</td>
</tr>
<tr>
<td>N</td>
<td>Marie Borsellino</td>
<td>CN-BN</td>
<td>RN</td>
<td>Sarasota, FL</td>
</tr>
<tr>
<td>I</td>
<td>Nina Clapp</td>
<td>CN-BN</td>
<td>RN</td>
<td>Los Angeles, CA</td>
</tr>
<tr>
<td>N</td>
<td>Janell Clark</td>
<td>CN-BN</td>
<td>ANP, Core Committee</td>
<td>Philadelphia, PA</td>
</tr>
<tr>
<td>P</td>
<td>Cathy Cole</td>
<td>CN-BP</td>
<td>NP, Core Committee</td>
<td>Thousand Oaks, CA</td>
</tr>
<tr>
<td>A</td>
<td>Alisa Domb</td>
<td>CN-BN</td>
<td>RN</td>
<td>Phoenix, AZ</td>
</tr>
<tr>
<td>A</td>
<td>Melissa Hopkins</td>
<td>CN-BN</td>
<td>RN, BA, Chair</td>
<td>Kalama, WA</td>
</tr>
<tr>
<td>I</td>
<td>Tori Kochiss</td>
<td>CN-BI</td>
<td>RT(R)(M)(BS)</td>
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<tr>
<td>M</td>
<td>Nikki Levinson-Lustgarten</td>
<td>CN-BN</td>
<td>RN</td>
<td>Jacksonville, FL</td>
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<tr>
<td>M</td>
<td>Sandra Mascari-Devitt</td>
<td>CN-BM</td>
<td>CSW, Lead</td>
<td>Whitewater, WI</td>
</tr>
<tr>
<td>I</td>
<td>Andrew Newman</td>
<td>CN-BI</td>
<td>RT(T), Core Committee</td>
<td>Tampa, FL</td>
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<tr>
<td>A</td>
<td>Sara Parise</td>
<td>CN-BN</td>
<td>RN</td>
<td>Lake Success, NY</td>
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<tr>
<td>I</td>
<td>Lisbeth Sestina</td>
<td>CN-BI</td>
<td>RT(M)(MR)(CT)</td>
<td>Denver, CO</td>
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<tr>
<td>I</td>
<td>Cindy Stewart</td>
<td>CN-BI</td>
<td>RT(R)(T)(M)</td>
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<td>N</td>
<td>Lori Stewart</td>
<td>CN-BN</td>
<td>RN</td>
<td>Oklahoma City, OK</td>
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<tr>
<td>N</td>
<td>Cathie Sublett</td>
<td>CN-BN</td>
<td>RN</td>
<td>Houston, TX</td>
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<tr>
<td>N</td>
<td>Diana Vasquez</td>
<td>CN-BN</td>
<td>RN</td>
<td>Nassau Bay, TX</td>
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<tr>
<td>I</td>
<td>Lisa Warner</td>
<td>CN-BI</td>
<td>RT(R)(M)</td>
<td>Smyrna, TN</td>
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<tr>
<td>P</td>
<td>Kimberly Wilcox</td>
<td>CN-BI</td>
<td>RT(R)(M)(RM)(ARRT)</td>
<td>Caribou, ME</td>
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<tr>
<td>C</td>
<td>Julie Shisler</td>
<td>CN-BM</td>
<td>LPN, BS, Core Committee</td>
<td>Williamsville, NY</td>
</tr>
<tr>
<td>A</td>
<td>Becky Olson</td>
<td>CN-BA</td>
<td>Volunteer Advocate</td>
<td>Tigard, OR</td>
</tr>
<tr>
<td>P</td>
<td>Jaci Nore</td>
<td>CN-BN</td>
<td>RN, BSN, Core Committee</td>
<td>Hastings, NE</td>
</tr>
</tbody>
</table>

B. **History and Acknowledgements**

Initial Certification (2009) - The initial Breast Patient Navigator Certification (or beta certification) was offered at three sites in 2009. Individuals, who passed the certification examination in the beta year, were certified for one year and were required to sit for the official certification examination in 2010. Official certification is now considered a “Life Time” certification, as long as requirements are fulfilled, including: annual renewals and recertification every five years.
This certification program has been made possible through the dedicated service and efforts of professionals whose knowledge, opinions and critiques helped to create this program. The program would not be a reality without the pilot program presented at the 19th Annual National Interdisciplinary Breast Center Conference through Genomic Health, Inc. Genomic Health, Inc. is recognized for initial and continued investment in this program and underwriting some of the costs with the goal of providing health care professionals with breast health/cancer education thereby raising the bar and setting standards for breast patient navigation. The professionals who have had a part in the development of this program are listed below.

Founders of the Original Program
Shireen L. Braner, PA, RT(R)(M)(QM), CBEC, CN-BI
Susan M. Gardner, RN, CBEC, CN-BN
Diana Gaughan, RN, OCN, CN-BN
Colleen Johnson, RN, NP, CBPN-IC
Gina Leffert-Paige, ARRT, RTM, CN-BI
Lillie Shockney, RN, BS, MAS, CN-BI
Colleen Sullivan-Moore, RN, MS, CN-BN
Sandra M. Walters, RN, CN-BN
Meridith Mendelsohn, MPA, CN-BM

C. About the Navigation Program
Breast cancer is the second leading cause of cancer deaths in women today. With the sudden onset of oncology information and life-altering decisions to be made, barriers in education, finances, emotional and mental status, family support, and a myriad of other issues drive the demand for a trained navigation system to assist the patient during these most troubling times.

Mission of the Navigation Program: The mission of the National Consortium of Breast Center’s nonprofit Navigation Certification program is to optimize care of patients affected by diagnostics and cancer of the breast. Through standardized certification, we recognize highly skilled navigators who excel in communication, support, education, assessment and elimination of barriers to care from initial screening imaging to survivorship or end of life care, with a goal of continual support offered for every patient, every time.

Vision: To be recognized and acknowledged as the foremost national and world leader in Certification for Navigators.

Goals of Navigation:
• Provide continual navigation support for breast care and cancer patient and their family – Assess for patient needs and barriers.
• Address identified needs and barriers through available programs and support systems. Identify areas of individual strengths for patients to use in empowering them to help themselves.
• Assist patients with transition from diagnostics through treatment by coordinating appointments through advocacy, education, and continued assessment of needs and barriers. Address barriers to timely care.

Education: (Standard 2)
Navigator training or education is not provided by the NCBC. The NCBC collaborates with the Harold P. Freeman Patient Navigation Institute to offer training for new patient navigators. Only for convenience is the training and the certification exam offered in the same location. The PNI training is
Definition of a Navigator: A certified breast patient navigator (CBPN) is a dedicated person experienced in the flow of events in the screening, diagnostic breast care, treatment, and survivorship setting of breast cancer. The certified breast navigator uses specific navigation tools to assess barriers, educate, and support the patient throughout the continuum of breast care with a set of holistic standards. These standards include ongoing assessment and support of the patient’s physical, mental, emotional, spiritual, educational, sexuality, and family needs. The certified breast health navigator effectively utilizes assistance from facility, community, and national sources to lessen the severity of impact on a diagnosis of breast cancer.

Definition of who can be certified: A certified breast patient navigator (CBPN) is a dedicated person experienced in the flow of events in the screening, diagnostic breast care, treatment, and survivorship setting of breast cancer. The certified breast navigator uses specific navigation tools to assess barriers, educate, and support the patient throughout the continuum of breast care with a set of holistic standards. These standards include ongoing assessment and support of the patient’s physical, mental, emotional, spiritual, educational, sexuality, and family needs. The certified breast health navigator effectively utilizes assistance from facility, community, and national sources to lessen the severity of impact on a diagnosis of breast cancer.

D. Exam Development
Job Analysis and Review (Standard 10)
The CBPN test was developed by a core group of nurses and RTs in 2008. The BPN Matrix® is based on the results of a role delineation study of breast patient Navigation in 2008. Job descriptions can be found in the study guide and at http://www2.bpnc.org/job-descriptions. Each subject area is represented in every test with the appropriate percentage of items. However, not all content sub-areas on the BPN Matrix® are included on every form of the test due to the published scope of practice within each one’s licensure.

Each year, job performance data is collected during the certified navigator renewal process to verify that the information being tested on is relevant to current practice. Data is typically received from 700+ certified navigators in all 50 states and the District of Columbia. Respondents are 99% female and work experience generally falls between 2 and 10 ten years. Based on this data, a hierarchy of experts, in the navigation field, in a peer review process analyzes exams for accuracy, content, and pertinence. These experts are volunteers that are currently certified navigators following the beta year of testing.

Annually, each test is reviewed by an experienced lead navigator specific to that designation. All test questions and answers are reviewed by a minimum of five task force members for content and updates based on nationally recognized organizations, such as the American College of Radiology (ACR), National Comprehensive Cancer Network (NCCN), American Cancer Society (ACS), and the National Institute of Health (NIH). All references needed for study are based solely on nationally standardized and recognized organizations, which are free to all participants online or through library systems. While other books are referenced for use by the tester’s discretion, none are required to pass the test. All participants are given access to the study guide.

Questions are also reviewed by the Medical Advisor(s) before being finalized as an accepted test question. Medical Advisors are medical doctors or nurse practitioners in the breast health and cancer field.
Test components

The previous CBPN exam consisted of 100 multiple-choice items (a question or incomplete statement, followed by four answers or completions) or true-false questions. The CBPN imaging and cancer tests, overhauled in 2014 during the addition of the new designations, and now reflected as CN-B*, now consist of the original 100 questions plus 35 navigation specific questions, as well as 15 other questions from other appropriate matrix sections. The imaging and cancer tests were not piloted further because the original test, which is part of the new test, has been updated every year and given to over 1000 participants. The four tests added this year (and slated for accreditation in 2015) were piloted by practitioners in each field.

Breakdown: Each test has a variety of elements based on the Matrix® as developed by NCBC. The Matrix® is first divided into two parts: Imaging and Cancer. The full Matrix® can be found in the study guide and at http://www2.bpnc.org/navigation-matrix (member only access). These two sections are additionally divided down into subsets that define the pathway patients take through breast health and breast cancer care. All navigators, regardless of designation, are required to understand the full extent of patient movement through this documented system of care. Each test reflects a proportionate amount of questions within each individual designation’s questions for a fair spread of acquired knowledge indicating the tester’s knowledge base. While each CN-B* test has the 150 questions, the questions are divided in this manner:

<p>| | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Navigation</td>
<td>25</td>
</tr>
<tr>
<td>Diagram of breast</td>
<td>5</td>
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<tr>
<td>Matrix® specific questions</td>
<td>5</td>
</tr>
<tr>
<td>Questions/Answers based on National Standards</td>
<td>115</td>
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<tr>
<td>TOTAL Questions</td>
<td>150</td>
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</table>

It is important to note that while each test has similar national standards and common knowledge test questions, the questions are written specific to the scope of practice as recognized by the individual designation.

The Breast Patient Navigation Certification examination is based upon the role of a breast patient navigator and the Breast Patient Navigation Matrix. A peer review team of breast patient navigators, selected by discipline, facility and program type and geographical area participated in the role and Matrix demarcation. The Breast Patient Navigation Certification examination reflects the knowledge and skills a breast patient navigator should understand in order to successfully navigate a breast patient through the breast health/cancer continuum of care. See survey and analysis below.

<table>
<thead>
<tr>
<th>MATRIX STAGES</th>
<th>(lowest)</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5 (highest)</th>
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<tr>
<td>2. Scheduling/Intake</td>
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<tr>
<td>3. Welcome/Data</td>
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<tr>
<td>4. Pre-screening</td>
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<tr>
<td>5. Screening</td>
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<td>6. Diagnostic Imaging</td>
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<tr>
<td>7. Diagnostic Intervention</td>
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<td>9. Pathology Consultation I</td>
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<td>10. Pathology Consultation II</td>
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<td>11. Diagnostic Work up Consultation</td>
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12. Work up testing
13. Treatment Consultation
14. Treatment
15. Survivorship
16. Recurrence
17. End of Life Support

NOTES: Subject Matter Experts were asked to read the descriptors of each matrix stage and rate their designations involvement at that stage from 1 to 5 (1 = lowest involvement and 5 = highest involvement). This should be BEST practice and not necessarily the STATUS QUO. All aspects of a licensure, for example, techs will be certified for knowledge in both diagnostic and treatment (mammography/US/MRI and radiation oncology) are included. Navigators may work in one particular area of their expertise, but will be required to know the spectrum of care relating to their specific duties. A navigator is able to instruct a patient on the spectrum of care, what just occurred, and what is going to happen next, in order to be an effective navigator.

Analysis based on responses received from Navigators in the field.

The assessment measures an individual’s competency as a navigator through a series of 150 questions based on navigational skills by job specific scopes of practice. While it is important to note that the tests are not designed to assess licensure knowledge, licensure plays a role in specifying the areas needed to work effectively as a patient navigator.

The Matrix® was developed to identify the linear stages a patient experiences from breast screening, diagnostics, cancer treatment, and survivorship or end of life care. Set by national trends and navigation advocates there are specific points in time when a navigator enters or leaves a patient’s continuum of care. Navigators have a specific function at any given space in time during patient care, but to be an effective navigator is to have knowledge of the full spectrum of care. The National Consortium of Breast Center’s test bases questions then on these criteria:
1. Matrix ® stage (1-17) knowledge
2. Licensure/non-licensure status
3. Scope of practice
4. Facility and State regulations
5. Nationally recognized guidelines

It is important to note that while navigators must understand the spectrum of care, proper use of this Navigational model includes the understanding that no one is allowed to work outside their specific scope of practice as defined by licensure, state regulations, or facility protocol. Anyone working outside these perimeters is subject to inquiry and disciplinary action.

Tests are developed with the aforementioned criteria by peer experts in the respective designations. Navigation Certification Core Committee members are all established in their respective fields as managers or directors having personally worked in those fields prior to or concurrently in their administrative roles. Additionally, a medical advisor remains dedicated and available for questions, comments, and direction regarding products produced and recommended by the core committee. For any major changes or additions to the program, a presentation, review, and vote is requested of the NCBC Board of Directors for final approval before use. Each core committee member represents a distinct designation and leads the designation task force for tests, test reviews, study guidelines, and annual test updates based on national guidelines. Task forces are comprised of primarily peers to the designation, but also selections from other designations to balance the product and support continued continuum of care between the respective navigators. Guidelines are constantly monitored for changes or upgrades to patient care based on evidenced based practices in patient care. Testing navigators are informed that while some facilities may deviate from national practice standards, but the test will remain fair and impartial based on following these guidelines at all times. Guidelines include:

1. NCCN : National Comprehensive Cancer Network
2. ASCO : American Society of Clinical Oncology
3. ACR : American College of Radiology
4. ACS : American Cancer Society
5. NIH : National Institute of Health
6. MQSA : Mammography Quality Standards Act
7. NCI : National Cancer Institute

Test validity is supported by continual test review and annual review for changes to nationally accepted practice and protocol. Consistency between tests is gauged by reviews of the tests immediately following test completion looking for a maximum of no more than a 10% failure rate of any given test. If any question on a test has more than 50% missed answers, it goes to the respective task force for review, edit, and recommendation to revise, throw out, or keep as-is. If revised or thrown out the question is deleted off all test scores of same test date/location participants and final scores revised. At no point is individual candidate information shared with the core committee or task force eliminating any possibility of discrimination in decisions made regarding the test.

The main principle of the test is garner communication and collaboration between navigators under the auspice of SEE ME, ATTEND MY NEEDS, LIGHT MY WAY employment NCBC standards of excellence for the highest quality of care for every patient, every time.

E. Processes and Procedures
How to Become a CN-B* through the NCBC Breast Patient Navigator Certification Program:

Certification Eligibility Requirements: The applicant must:

- Be a licensed medical professional and hold a valid medical license as a physician, nurse practitioner, registered nurse, certified physician assistant or social worker OR
- Be a certified medical professional and hold a valid certification as a radiologic technologist, radiology practitioner assistant, social worker, or advanced practice nurse OR
- Be a medical technician, licensed practical/vocational nurse, volunteer or lay navigator; AND
- Navigate breast patients for at least 25% of annual time worked; OR
- Work at least 500 hours per year in breast patient navigation; AND
- Provide proof of valid license or certification, where applicable; AND
- Pay the certification fee of $300 registration for current NCBC members or $450 registration for non-NCBC members (this includes a 1 year membership). You must maintain NCBC member to renew your certification.
- NOTE: an applicant without valid medical credentials at the time of testing will be offered the ADVOCATE test. To change from one designation to another will require re-application, payment of the certification fee, and passing the test at 80% or better. Proof of licensure will be required as noted above.

Certification Eligibility Recommendation but not a Requirement:

- The applicant applying for certification should have a minimum of two years’ experience of navigating breast patients, but no less than 6 months experience. This is based upon the review of the experience levels of those sitting for the exam and their ability to pass the examination. The examinations cover knowledge the navigator has gained through licensures or certifications and career experience to efficiently and effectively navigate breast care/cancer patients. Reminder: this test is for currently practicing navigators.
  - In collaboration with Dr. Harold Freeman’s Navigation Patient Institute, a separate coursework specifically designed for breast navigators is offered the day before NCBC Navigation Certification in some locations. Enrolling in this course is not mandatory to take the test if you fit the criteria for eligibility noted. However, the information and course review may be beneficial prior to taking the test. Enrollment with PNI can be done by going to their website at www.hpfreemanpni.org
- For applicants with 3-6 months of the required experience, an alternative is to obtain a certificate of attendance for a breast care/cancer navigation course, from an approved organization. Please contact the Certification Manager for course approval prior to enrolling for the course.

Certification Special Requests:
If a medical professional holds a license or certification other than anyone mentioned above and would like to be considered to attend the program or be eligible for certification, please contact NCBC office.

Refunds:
No refunds will be given once the study material is sent.

Interested participants contact the National Consortium of Breast Centers office by phone, fax, or email. Once the participant is deemed eligible to test and has submitted the required application and fees, a policy guide and list of reference material is sent to their listed address at least three weeks prior to the testing. Tests are held multiple times per year: in March at the main NCBC conference and at varying regional sites spaced across the country.
The morning of the test offers the certification test for each specific navigator designation. Examinations consist of a three-hour written test, formatted as multiple choice and true-false questions. The tests are developed and updated on a continual basis by peer review. All navigators are expected to understand the full spectrum of breast and cancer care that a patient may undergo. The test is designed to verify navigational knowledge from the initial onset of care (scheduling) and through 17 specific stages to survivorship or end of life care based on a Matrix® system that delineates each crucial step and available resources. All six individual designation tests carry essentially the same information on imaging and treatment care, but questions and answers are modified to the specific designation and scopes of practice.

Historically, the NCBC graded test scores at a percentage rate of pass (85% or above) or fail (84% or below) with exception made by the Chair or Core Committee based on individual circumstances and requests. This was deemed too inconsistent for use in 2012. NCBC currently utilizes a variation of the 1-2-3-4 system of grading. (The examination does not contain questions that need to be scored by judgment nor are there sub-scores to be reported.) In this system, testers can achieve a passing score by answering at least 80%, or grade three, of the test questions correctly putting them into a ‘meets standards’ or above score. Any tester achieving 79% or less has failed the test and has the option of retaking the test within one year at no additional charge.

<table>
<thead>
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<th>Percentage</th>
<th>Grade/Mark</th>
<th>Assigned Meaning</th>
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<tbody>
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<td>90-100</td>
<td>4</td>
<td>Advanced, exceeds standards</td>
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<tr>
<td>80-89</td>
<td>3</td>
<td>Meets standards</td>
</tr>
<tr>
<td>70-79</td>
<td>2</td>
<td>Partially proficient</td>
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<tr>
<td>0-60</td>
<td>1</td>
<td>Not proficient</td>
</tr>
</tbody>
</table>

If an individual does not pass the examination, he/she may sit for the examination again during the next 12 months with no additional fee. A summary of areas to continue studying is available upon request. If an applicant desires to sit for the examination again after 12 months of their first registration (or examination) they will need to pay the registration fee again to take the examination. Certification materials are provided as early as possible and generally no later than three weeks before the test date. With a passing score of 80% or higher, you will receive the credential:

**CERTIFIED NAVIGATOR – BREAST (CN-B)**
- (I) = Imaging: including all technologists from mammography, breast ultrasound and MRI, and radiation therapy.
- (M) = Management/Social Work: includes Social Workers and Managers of breast navigators
- (A) = Advocate: includes all Lay/Volunteers, Community Health Workers (CHW), spiritual advisors/chaplains
- (C) = Clinical: includes all certified Medical Assistants, technicians, Licensed Practical Nurses
- (P) = Provider: includes all diagnosticians, such as Nurse Practitioners, Physician Assistants, Doctors, and PhD
- (N) = Registered Nurse: all RNs from diagnostic imaging, treatment, survivorship, genetics, and end of life care
An easy way to remember the designation initials is by the acronym: **IM A CPN** (**I'M A Certified Patient Navigator**). The designations are added to the base navigator credentials CN-B*, hence:

CN-BI = Imaging  
CN-BM = Management/Social Work  
CN-BA = Advocate  
CN-BC = Clinical  
CN-BP = Provider  
CN-BN = Registered Nurse

Completion of Evaluation Form  
The evaluation form will be distributed on site or in an email following the test. Attendees are asked to complete the evaluation form and return to the designated areas.

Posting of Test Scores  
Test Scores will be emailed within three weeks of the test date. Scores are located by using your unique I.D. number that was provided to you at the time of registration. Reports of aggregate assessment data in summarized form are available upon request.

Since the time NCBC started certifying individuals in 2008, approximately 1400 RTs and RNs have been certified as breast patient navigators in imaging and/or cancer. Average pass rate on the first attempt is 90%. There are currently 900+ NCBC certified Navigators (CN-B*). NCBC certifies approximately 200 new navigators every year.

The Breast Patient Navigator Certification requires annual renewals and periodic recertification, a failure to renew or recertify will result in decertification.

**F. Certification Renewal and Recertification Instructions**

**Completing the Annual Renewal Form (Page 3 of 6)**

Applicant Information:  
Complete this section with information about the applicant to maintain current certification records.

Certification Information:  
Enter the Month and Year the applicant took his/her initial Certification,

Choose the type of certification being requested. Individuals may hold the certification in one of the following status. The requirements for each are noted below.

**Active Certification:**  
To maintain an active certification status all certified individuals must annually submit current licensure or certification validation accompanied by the following completed forms:  
Annual Renewal Form  
Performance/Data Form  
CEU Validation Form
**Inactive Certification:**
Individuals may apply for Inactive Certification Status. The individual must annually submit current licensure or certification validation accompanied by the Annual Renewal Form completing the sections: Applicant Information, Certification Information and Active and Inactive Certification Requirements. Individuals applying for Inactive Certification are not required to complete the Active Certification section of the Annual Renewal Form. Also, the Performance/Data and CEU Validation Forms are not required. Individuals holding Inactive Certification status will not be listed as Navigators on the Internet. An individual who has, but is not currently performing as a Breast Patient Navigator may choose to hold an Inactive Certification. Individuals holding an Inactive Certification may become active again, upon submission of required forms and documentation for Active Certification without taking another examination as long as NCBC membership has been maintained throughout Inactive Status. Inactive Certification requires active membership in the NCBC.

**Decertification:**
Should a Certified Breast Patient Navigator fail to complete the requirements for an Active or Inactive Certification, within 60 days of expiration or he/she will be decertified. Once decertification occurs, the individual is required to reapply for the exam as a new candidate.

**ACTIVE AND INACTIVE CERTIFICATION REQUIREMENTS:**

**Licensure/Certification:**
Active or Inactive Certification requires an applicant to provide a copy of a valid license or certification.

**Membership:**
Active or Inactive Certification requires an applicant to hold a current NCBC membership.

**ACTIVE CERTIFICATION REQUIREMENTS:**
Active Certification applicants are required to complete the remainder of the application.

**Performance/Data:**
Complete the Performance/Data Form and check this requirement as completed.

---

**COMPLETING THE PERFORMANCE/DATA FORM (PAGE 4 AND 5)**

**COMPLETING THE PERFORMANCE DATA SECTION**
The applicant must complete the questions under the Performance Data Section of the Form.

**Completing the CEU Validation Form (Page 6 )**
Complete the CEU Validation Form and then check this requirement as completed. If additional pages are required, please make extra copies. It is acceptable to just include a copy of the CEU certificate if you attended the NCoBC Annual Breast Center Conference. For other conferences or CEUs, please use the template on page 5.
Name of Conference: Identify the conference name, if the CEU was for a session which was part of a conference.

Conference/Session Host: The name of the organization/business hosting the conference or if the session is not part of a conference, the entity hosting the session.

Session/Course Title: Self-explanatory

Faculty Names: Name of speaker(s), presenter(s) or instructor(s).

CEU Provider: The name of the entity that stands behind the CEU and awards the CEU certificate.

The purpose of the continuing education credits requirement is to ensure the Certified Breast Patient Navigator continues to provide enhanced breast patient care, through the annual expansion his/her knowledge base of both general breast patient care and specifically in the care of patients they are/will be navigating.

The individual applying for Active Certification Renewal is required to have earned, between certification applications, **4 CEUs whose content reflects general breast patient information** and **4 CEUs whose content is specific to breast patient navigation**. Attendees of the NCoBC National Pre-Conference Navigator Program may list these CEU credits to renew certification. Even if the total number of CEU’s offered by this program is less than the required 8 CEU’s, attendance at all sessions of this program will fulfill the CEU requirements for Active Certification renewal.

General breast patient credits may include content that includes administration, personal growth or general medical information. This may cover content such as billing and coding of patient procedures/care, handling work related stress, anger/grief management, male breast cancer, balancing work and personal time, goal setting, etc. These examples reflect content that will assist the professional with their personal growth and expand a professional’s general knowledge base that we believe will result in enhanced patient care.

Specific breast patient navigation credits reflect information that a breast patient navigator would use at some point when navigating a breast care/cancer patient. This might include: lymphedema treatment; complications of breast surgery, breast patient treatment planning, communicating and interacting with the patient, patient information flow, role of the navigator, fatigue and its management, cancer’s impact on all family members, etc. The best way to determine if the course content relates to the navigation of a patient is to ask yourself if the knowledge will be used during any of the stages in which you would be navigating a breast care/cancer patient. Referencing the care Matrix will reacquaint individuals with the various stages of breast patient navigation.

Renewal Fee:
Identify and complete the required method of renewal fee payment.

Submit:
Based upon the type of certification being requested, submit the completed application accompanied by the required forms. Renewal information must be received no later 15 after certificate expiration of the year for which renewal is being requested.
Applicant Information:
First and Last Name
ID Number
Professional Credentials
Address
City, State, ZIP
Facility Name
FACILITY ADDRESS
City, State, ZIP
Professional License/Certification
Current email
Certification

Month and Year of Applicant’s Initial Certification
Year for which Renewal of Certification is being requested
Applying for Inactive Certification (Initial or Renewal) OR
Applying for Active Certification Renewal

ACTIVE AND INACTIVE CERTIFICATION REQUIREMENTS

Licensure/Certification:
I have met this requirement and enclose a copy of my valid professional

ACTIVE CERTIFICATION REQUIREMENTS
I meet this requirement as a member of NCBC (must be current for year)

Membership:

I meet the performance/data requirement by:
Navigating breast patients for at least 25% of my job responsibility OR
I have supervision of breast patient navigators AND
Having completed and enclosed the Performance Data Form

Performance/Data:
I have met the CEU requirement and enclose the completed CEU Validation

CEUs:

Payment for the annual renewal fee of $50.00 is being made by
Enclosed check (Payable to: NCBC or National Consortium of Breast
Credit Card: Charge My
Visa
MasterCard
Discover
American Express
Card Number: _____________________________
Name on Card: _____________________________
Signature: _________________________________

Renewal Fee:

DO NOT EMAIL THIS FORM IF IT CONTAINS CREDIT CARD INFORMATION!

SUBMIT:
US Mail
National Consortium of Breast Centers
P.O. Box 1334
Warsaw, Indiana 46581-1334

Federal Express/UPS
NCBC
1017 E. Winona Ave
Warsaw, Indiana 46580

Contact us
Phone: 574-267-8058 or Fax: 574-267-8268
Email: Jennifer@breastcare.org
Read the descriptors of each matrix stage and rate your designation’s involvement at that stage from 1 to 5 (1 = lowest involvement and 5 = highest involvement). Please refer to the NCBC Navigation binder for clarification of the Matrix stages. This should reflect your BEST practice and not necessarily the STATUS QUO. REMINDER: A navigator is able to support a patient on the spectrum of care: what just happened, and what is to happen next, in order to be an effective navigator, but is still limited by scope of practice and licensure.

Your job title: ________________________________

Navigator Designation: (circle one)   I – M – A – C – P – N

<table>
<thead>
<tr>
<th>MATRIX STAGES</th>
<th>(lowest)</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5 (highest)</th>
<th>None</th>
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<tbody>
<tr>
<td>1. Patient recruitment</td>
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<td>3. Welcome/Data</td>
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<td>4. Pre-screening</td>
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<td>5. Screening</td>
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<td>6. Diagnostic Imaging</td>
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<td>7. Diagnostic Intervention</td>
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<td>8. Biopsy</td>
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<td>9. Pathology Consultation I</td>
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<td>10. Pathology Consultation II</td>
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<td>11. Diagnostic Work up Consultation</td>
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<td>12. Work up testing</td>
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<td>13. Treatment Consultation</td>
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<td>14. Treatment</td>
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<td>15. Survivorship</td>
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<td>16. Recurrence</td>
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<td>17. End of Life Support</td>
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</table>
FACILITY INFORMATION

1. At which of the following types of facility or specialty department do you practice? (Check all that apply)
   - Outreach Center
   - Imaging
   - Treatment
   - Survivorship
   - Palliative Care/End of Life
   - OTHER: ______________

2. At which of the following types of facility or specialty department does the **majority** (over 50%) of your navigator role take place?
   - Outreach Center
   - Imaging
   - Treatment
   - Survivorship
   - Palliative Care/End of Life
   - OTHER: ______________

3. Does your current position require **supervision** of navigators?  □ YES □ NO

4. What types of navigators practice at your facility?
   - Imaging
   - Management/SW
   - Advocate/Lay
   - Clinical/LPN/MA
   - Provider
   - Nurse
   - OTHER: ______________

5. Estimate the total number of your hours (volunteer and/or job-related) spent annually on:
   - Community outreach ______
   - Program marketing ______

6. Does your facility offer breast cancer survivor support groups?  □ YES □ NO
   If yes, on average how many attend routinely? ______
   If not, how else do you support this service? ____________________________________________

7. Does your facility offer programs for health improvement other than survivorship programs? (Examples: nutrition, spiritual, physical activity, heart health or any other health and wellness programs)  □ YES □ NO
   If yes, please describe_______________________________________________________________

NAVIGATOR PROGRAM INFORMATION

8. Estimate how many patients are referred to your facility because of your navigation program?  □ <25% □ 26-50% □ 51-75% □ 75-100%

9. How many newly diagnosed patients do you navigate per year? ______

10. Out of those patients, how many continued their in treatment at your facility? ______
11. How many patients with recurrent breast cancer do you navigate per year? ____

12. Out of those patients, how many continue their treatment at your facility? ____

13. Approximately what percentage of your navigation patients currently meet or exceed the national poverty level? ☐ <25%  ☐ 26-50%  ☐ 51-75%  ☐ 75-100%

14. Do you navigate other women’s cancers in addition to breast? ☐ YES  ☐ NO
   If so, which__________________________________________

15. Do you offer Quality of Care or Navigation Satisfaction Surveys to patients? ☐ YES  ☐ NO

16. Are your navigation services currently reimbursed or a paid service? ☐ YES  ☐ NO

GENERAL PROGRAM INFORMATION
17. What are the top 3 identified patient barriers to care, treatment and/or support? (i.e.: financial, cultural…)
   A. _______________________________________________________
   B. _______________________________________________________
   C. _______________________________________________________

18. What are the top 3 barriers for you as a navigator? (i.e.: documentation, tracking, administrative support…)
   A. _______________________________________________________
   B. _______________________________________________________
   C. _______________________________________________________

PERSONAL INFORMATION (FOR STATISTICAL USE - KEPT CONFIDENTIAL)
19. Did you receive any formal navigator training prior to being certified? ☐ YES  ☐ NO
   If so, where?________________________________________________________________

20. Current Licensure_______________________ Issuing State or Body_____________________

21. Current salary: ☐ Part time  ☐ Full time  ☐ Per Diem
    ☐<25k  ☐ 26-35k  ☐ 36-45k  ☐ 46-55k  ☐ 56-65k  ☐ 66-75k  ☐ >75k

22. Did you receive any additional benefits or compensation once certified? ☐ YES  ☐ NO

23. My facility assist with payment of: ☐ NCBC membership  ☐ Certification fee
    ☐ Renewal fee  ☐ Conference or Educational costs
## Recertification

Recertification (re-testing) is required every five years. This will roll out with the 2014 updates to the Navigator Certification program. The first re-certification exams will be given starting in June 2019. The committee chose five years as an acceptable range because of the new information being introduced into the field every year. It will be important for navigators to keep their skills and knowledge up to date; therefore, they will be tested to make sure they are staying current. Recertification exams will be offered online only and for a reduced fee. The test will be specific to the renewal process and include 50 questions from the test taken by new applicants. Those exams will be evaluated for reliability and validity annually. Anyone not recertified in the 5th year will be decertified.

### III. Discipline, Appeals, Test Integrity, and Privacy

Equitable disciplinary policies to address complaints or ethics issues:

The National Consortium of Breast Centers Navigator Certification test is designed to validate the skill set of breast cancer navigators. The individual scope of practice of navigators is emphasized as the primary job description based on facility, state regulations, and national standards. Navigators are instructed and expected to work within those parameters. Any complaints brought to the attention of NCBC of a certified patient navigator will be determined in the following manner:

<table>
<thead>
<tr>
<th>Required Hours – 4 general navigation, 4 breast specific</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Conference</td>
</tr>
<tr>
<td>Conference/Session</td>
</tr>
<tr>
<td>Host</td>
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<tr>
<td>Session/Course Title</td>
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<tr>
<td>Faculty Name(s)</td>
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<tr>
<td>CEU Provider</td>
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<tr>
<td></td>
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<tr>
<td>Total CEUs to meet Active Certification Renewal Requirement</td>
</tr>
</tbody>
</table>

May attach conference CEU certificate in lieu of filling out form
1. Complaint received.
2. Letter to Navigator/Supervisor detailing the complaint received. Request rebuttal to complaint.
3. Complaint and rebuttal to be reviewed by Navigator Certification Core Committee.
4. Findings and recommendations forwarded to Executive Director.
   Possible recommendations:
   a. No fault found. No further intervention required.
   b. Fault found. (See discipline standard for possible action)

Discipline (Standard 6D), non-discrimination, and accommodation following applicable laws and regulations:
If fault is found, disciplinary action will be applied as follows:
   1. Minor offense: written warning given. Follow up in one month for resolution.
   2. Major offense or two or more minor offenses: revocation of certification.
   3. If certification is revoked:
      a. No refund of fees,
      b. Navigator may not apply for retesting for a period of 1 year.

Major offense is defined as an action or words that cause harm or undue stress on a patient based on state regulations.
Minor offense is defined as an action or words that have the potential of causing harm or undue stress on a patient based on state regulations.
Example: [1] Complaint by a provider that a navigator routed a patient away from their practice.
Appeals to fault/no-fault recommendations by the Core Committee will be sent to the Executive Director for review of appeal. All decisions made are final.

Appeals policies and procedures to question eligibility, exam results, certification status:
Test results will be emailed to the participant. Questions and concerns regarding score or test are directed to the Certification Manager for review. Requests for hand scoring of Scranton test sheets will be honored. Testers are not allowed to review missed test questions following the test. Following each test, all questions that were missed over 50% of the time are task force reviewed by peers for accuracy, knowledge content, and appropriate verbiage based on region. If a question is deemed inappropriate or unacceptable, it is removed from the final scores for that testing period and individual total scores are adjusted for everyone. The question is then returned for peer review for future use through editing of questions/answers or deletion. Tests must be passed by correctly answer 80% or higher on the test scores. Anyone who fails the test is allowed to retake the test at no additional charge for one year from the initial test date.

Grandfathering (Standard 8)
The National Consortium of Breast Center’s Breast Patient Navigator Certification expanded its reach by adding four additional designations to the certification program. The additional designations of Navigator certification (total of six), recognize the comprehensive nature of navigating cancer patients.
The new navigator certification designations are based on the navigator’s licensure, not based on the test(s) passed. Current certified breast patient navigators will transition to their new credentials without being re-tested. For those navigators certified in Imaging and/or Cancer (CBPN-I, CBPN-C or CBPN-IC), their designation will automatically change to the new designation as a Certified Navigator as a Breast Imaging (CN-BI), Management (CN-BM), Clinical (CN-BC), Provider (CN-BP) or Nurse (CN-BN) based on current licensure.

These new designations recognize both the unique differences of navigators as well as the comprehensive knowledge needed to care for patients from diagnosis to end of life support.

There will be no grandfathering after June 1, 2014.

Security and Integrity of exam (Standard 16)
Only the Certification Manager or Committee Chair, or their personal designees can administer the examination.

Information and Data Retention (Standard 17)
The National Consortium of Breast Centers maintains copies of electronic files, including communications with participants, decisions made by the committees regarding discipline, appeals, or other requests on a password required secure server protected by a firewall.

Result Retention (Standard 18)
NCBC policy is to maintain physical records of examination results for 7 years after the last certification renewal of the Navigator. Electronic files will be retained permanently or until the Certification program is no longer administered by the NCBC. Physical and electronic files will only be accessed by paid NCBC staff. Requests for information regarding a certified navigator can be made from outside auditing organizations; however, NCBC will maintain private information and only release the current status of that navigator.