

Implementation Date: January 1, 2026

# **Standard 4.2: Oncology Nursing Credentials**

### **Definition and Requirements**

Oncology nursing care is delivered by nurses with specialized knowledge and skills in providing care for patients with cancer.

The cancer program must demonstrate compliance with this standard by assessing oncology nursing continuing education and oncology nursing competency for all nurses providing direct oncology care:

• Confirmation of current cancer-specific certification in the nurse's specialty through an accredited certification program

#### OR

- Completion of 18 Nursing Continuing Professional Development (NCPD) contact hours each accreditation cycle
  - o The required NCPD contact hours must be relevant to oncology nursing care

#### AND

 Completion of oncology nursing competency assessment in the nurse's specialty, administered by the CoC-accredited facility each calendar year

#### **Oncology Nursing Protocol**

The cancer program must develop and implement a protocol addressing the following requirements to review and assess oncology nursing continuing education and oncology nursing competency:

- A process for identifying oncology nurses required to hold cancer-specific certification or complete cancer-specific continuing education
  - All oncology nurses must also complete assessment of oncology nursing competency
- A process for confirming nursing compliance with the protocol
- The methods of assessment for oncology nursing competency and practice skills
  - For example: testing, return demonstration, and/or simulation
- Competency assessment(s) relevant to oncology nursing specialties and areas of practice
- Time intervals for competency assessment
  - For example: At initial hire, at the time of transfer to an oncology nursing unit, and/or required annual assessment
- An action plan for nurses who do not satisfactorily hold certification or complete continuing education
- An action plan for nurses who do not satisfactorily complete oncology nursing competency assessment



- A timeline for newly hired or newly onboarded oncology nurses to meet compliance with this
  protocol, which is no later than one calendar year from the nurse's onboarding to an oncology
  care position
- Review of the facility's oncology nursing protocol and competency assessment program once each accreditation cycle

### **Oncology Nursing Certifications**

Oncology nursing certifications that qualify for this standard include, but are not limited to:

- Advanced Oncology Certified Nurse Practitioner (AOCNP®)
- Advanced Oncology Certified Clinical Nurse Specialist (AOCNS®)
- Advanced Oncology Certified Nurse (AOCN®)
- Blood & Marrow Transplant Certified Nurse (BMTCN®)
- Certified Pediatric Hematology Oncology Nurse (CPHON®)
- Certified Pediatric Oncology Nurse (CPON®)
- Certified Breast Care Nurse (CBCN®)
- Oncology Certified Nurse (OCN®)
- Breast Health Clinical Navigator (BHCN™)
- Oncology Nurse Navigator-Certified Generalist (ONN-CG<sup>SM</sup>)
- Certified Registered Nurse Infusion (CRNI®)

A certification qualifies under this standard as long as it is accredited for nursing education and includes cancer-specific criteria. For example, a palliative care certification meets the certification expectations under this standard as long as it contains cancer-specific criteria.

#### Reviewing Oncology Nursing Protocol and Competency Assessment

Each calendar year, the cancer committee must evaluate the facility's current compliance with assessing oncology nursing continuing education and oncology nursing competency. The annual evaluation may be presented and discussed with the cancer committee at any time during the calendar year under evaluation or at a meeting during the first quarter of the following year. The annual evaluation is documented in the cancer committee meeting minutes.

This evaluation must include the following:

- The total number of oncology nurses required to hold cancer-specific certification or complete cancer-specific continuing education
- The number of oncology nurses who hold cancer-specific certification
- The number of oncology nurses who are not in compliance with the oncology nursing protocol

Each accreditation cycle, the cancer committee must review the facility's oncology nursing competency assessment program and its protocol for oncology nursing competency. The content of the review and any recommendations for improvement are documented in the cancer committee meeting minutes.

#### Scope of Standard

This standard applies to all nurses and advanced practice nurses who provide direct oncology care within the CoC-accredited facility. Specifically, nurses in medical oncology, nurses who give antineoplastic

treatments, nurses in radiation oncology, clinical trials nurses, nurse navigators, nurses assigned to inpatient units which are dedicated or designated to the care of patients with cancer, and nurses in the cancer center or cancer clinic within the accredited facility.

This standard does not apply to nurses within the CoC-accredited facility who might have occasional contact with patients with cancer, and it does not apply to operating room or recovery room nurses. This standard does not apply to nurses working in a private practice office and/or nurses who are otherwise not employed by the CoC-accredited facility.

#### **Documentation**

#### **Reviewed On-Site**

• The site reviewer will review the facility's documentation confirming oncology nursing continuing education and oncology nursing competency for two (2) pre-selected nurses from the nursing rosters

#### **Submitted with Pre-Review Questionnaire**

- Rosters of oncology nurses in each required unit or designated area of the facility
- A protocol that addresses the requirements to review and assess oncology nursing continuing education and oncology nursing competency
- Cancer committee meeting minutes documenting the required evaluation of the facility's current compliance with assessing oncology nursing continuing education and oncology nursing competency once each calendar year
- Cancer committee meeting minutes documenting the required review of the oncology nursing protocol and competency assessment program once each accreditation cycle

## **Measure of Compliance**

Each calendar year, the program fulfills the compliance criteria:

1. The cancer program evaluates the facility's current compliance with assessing oncology nursing continuing education and oncology nursing competency and the evaluation is documented in the cancer committee meeting minutes. The evaluation meets the requirements outlined on page vi under "Standards Requiring Annual Review."

Each accreditation cycle, the program fulfills the compliance criteria:

- 1. The cancer program has in place a protocol that ensures oncology nursing continuing education and oncology nursing competency are reviewed and assessed by the CoC-accredited facility.
- 2. The cancer program reviews the protocol for oncology nursing education and competency once each accreditation cycle with documentation in the meeting minutes.



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