

# 2010 Role Delineation Study: Nursing Case Management National Survey Results



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## **About this Report**

This report pertaining to the practice of nursing case managers was based on the results of a 2010 national study of practice of nursing case managers.

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## **Background**

The American Nurses Credentialing Center (ANCC), which was incorporated in 1991 as a subsidiary of the American Nurses Association, is the largest nursing credentialing organization in the United States. Its vision is to be a galvanizing force for quality healthcare through credentialing excellence. Currently, ANCC offers 25 examinations at various levels including diploma and associate degree, baccalaureate, and advanced practice. More than 12,000 candidates take an ANCC certification examination each year. In addition to certification, ANCC provides services such as the Magnet and Pathways to Excellence recognition programs for hospitals and other facilities that demonstrate excellence in nursing services, accreditation of continuing education programs, education and consultation services, and outreach to nursing organizations around the globe.

### **Role Delineation Study Overview**

Role delineation or job analysis studies are typically carried out at the national level with the goal of describing current practice expectations, performance requirements, and environments. ANCC has a current goal of conducting a study of each specialty approximately every three years in order to capture changes in work activities and the knowledge and skill areas required to perform those activities. The findings are used to update the content of its respective certification examination.

The 2010 Nursing Case Management Role Delineation Study involved two sets of processes or activities that ran more or less concurrently: a national web-based survey and a linking activity. The national survey was designed to collect information on the work activities nursing case managers actually perform in practice, while the linking activity identifies the major knowledge and skill areas required to perform the work activities listed in the survey. The results of both of these processes were used in the updating of the test content outline for the ANCC Nursing Case Management examination.

### **Updated Test Content Outline for Nursing Case Management**

The test content outline for the Nursing Case Management examination was updated using the results of this role delineation study. Examination forms will be produced based on this updated test content outline. A copy of the test content outline will be available on the American Nurses Credentialing Center website at least six months prior to the release of the new examination form.

### **Role of the Content Expert Panels**

The American Nurses Credentialing Center invited professionals in practice and educators who teach courses relevant to nursing case management to serve on a panel of content experts for this study. They developed the work activities and demographic items for the survey, linked knowledge and skill areas to the work activities list, and finalized the test content outline. All of the content experts serving on the panel were certified by ANCC in nursing case management and were invited to serve on the panel based upon expertise in the specialty.

## Survey Methodology

The purpose of the development and administration of the national survey was to collect information on the work activities nursing case managers actually perform in practice. The role delineation study panel met for three days in June 2010 to draft a pilot version of the survey and to construct the initial map of knowledge and skill areas relevant to the work activities included in the survey.

### Survey Chronology

The survey development and administration timeline was as follows:

June - August 2010

- The role delineation study panel along with staff from ANCC drafted the survey.
- The survey was pilot tested and revised.

September - October 2010

- The final survey was administered on the web.

October - November 2010

- The survey activity results were analyzed, and activity weights were determined.
- The role delineation study panel met to review the survey results and activity weights.

### Survey Development and Measures

On June 23-25, 2010, the role delineation study panel met in Silver Spring, MD in order to draft the national Nursing Case Management Role Delineation Study survey for the 2010 role delineation study. During the meeting, the group reviewed Case Management Society of America (CMSA) *Standards of Practice for Case Management (2010)* and discussed any additions, deletions, and changes they would make to convert the standards into work activities to be used on the survey. These deliberations resulted in a list of 66 work activities to be used in the 2010 pilot survey. The workgroup also identified and finalized a set of demographic items for inclusion as part of the survey.

During the same meeting, the workgroup reviewed and approved three scales that respondents would use to rate the work activities listed in the survey—Frequency (the frequency with which a work activity is performed), Performance Expectation (how soon on the job the performance of an activity is expected), and Consequence (the consequence of performing an activity incorrectly). The performance expectation scale was specifically designed to distinguish entry-level skills. These three questions and the instructions for answering them are presented in Table 2.

**Table 2. Survey Questions for Rating Work Activity Statements**

<p>Please respond to each activity with three separate responses, one response in each category. When considering a response for one category, do not consider the other categories. For example: When considering the consequences of incorrect performance of an activity, do not worry about whether you perform or are expected to perform the activity; the possibility exists that an activity has severe consequences, even if you never perform it.</p> <p><b>Performance Expectation:</b> When is a newly practicing case management nurse first expected to perform this activity?</p> <ul style="list-style-type: none"><li>-- Within the first 6 months of certification.</li><li>-- After the first 6 months of certification.</li><li>-- Never expected to perform this activity.</li></ul> <p><b>Frequency:</b> How often does a newly practicing case management nurse perform this activity (consider within a one year period)?</p> <ul style="list-style-type: none"><li>-- Frequently</li><li>-- Often</li><li>-- Occasionally</li><li>-- Seldom</li><li>-- Never</li></ul> <p><b>Consequences:</b> Does incorrect performance of this activity cause:</p> <ul style="list-style-type: none"><li>-- Little or no harm</li><li>-- Moderate harm</li><li>-- Severe harm</li></ul>
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The study design included combining each respondent's responses to each of the three rating scales in a hierarchical manner into one overall ranking of criticality. To select a procedure for combining the three scales, the role delineation study panel discussed the importance of each scale to the performance of the work activity. The panel determined that the performance expectation scale should be regarded as more critical than the other two scales for representing entry-level practice. The consequence scale was then regarded as more critical than the frequency scale. Therefore the panel agreed to combine the scales so that a particular value on the performance expectation scale would outweigh or outrank all values on the consequence and frequency scales. This hierarchical scheme emphasized the work activities that are required of new practitioners immediately on the job and have the greatest impact on public health or safety. Thus this scheme was selected as the organizing mechanism for combining the responses from the three survey scales into an overall measure of criticality.

### **Sample Selection**

On July 2, 2010, there were 1,034 actively certified ANCC nursing case managers. Seventy five were randomly selected to participate in the pilot survey and the remaining 959 were

invited to participate in the national survey. Table 1 presents the number of ANCC-certified nursing case managers invited to participate in the national survey per region.

**Table 1. Number of ANCC-certified Nursing Case Managers Invited per Geographic Region**

<b>Geographic Region</b>	<b>Number certified (percent of total pop.)</b>
<b>Northeast</b> – NY, CT, MA, NJ, ME, PA, NH, VT, RI	268 (27.95%)
<b>South</b> – TN, MS, TX, FL, LA, AL, GA, AR, OK, VA, MD, SC, DC, NC, WV, DE, KY	320 (33.37%)
<b>Midwest</b> – IA, NE, KS, OH, MO, MN, SD, ND, MI, IL, IN, WI	193 (20.13%)
<b>West</b> – WA, AZ, CA, OR, CO, AK, ID, NM, UT, HI, NV, WY, MT	178 (18.56%)
<b>Total</b>	<b>959 (100%)</b>

## **Data Collection**

*Pilot Testing.* Using the same procedures intended for administering the national data collection, the survey was piloted in July and August 2010. Seventy five ANCC-certified nursing case managers randomly selected from across the nation were invited to take the pilot survey. Twenty seven (36 percent) of the nursing case managers invited to take the pilot survey responded. The panel members revised the survey based on the results of the pilot survey and finalized 65 work activities to be used in the final survey. The complete text of the work activities are presented in **Appendix A**.

*National Survey.* In September and October 2010, the 959 ANCC-certified nursing case managers who were selected to take the national survey were sent three notifications via the United States Postal Service: an alert letter, and two follow-up reminders. The alert letter explained the purpose and importance of the study, the eligibility criteria of the study, and stated how to access the survey via the internet. The letter indicated that the participant's responses would be kept confidential. The letter also notified that respondents completing the survey would receive a 5 hour reduction of their continuing education requirement for their ANCC recertification.

The first follow-up reminder letter was sent approximately two-weeks after the alert letter. It thanked recipients if they had already submitted their completed survey and encouraged them to do so if they had not already.

The final follow-up reminder letter was sent out only to those who had not yet responded to the survey and was sent out approximately two-weeks prior to the end of the survey.

## **Data Analysis**

The three rating scales were combined into a single measure of overall criticality using a hierarchical method. As agreed by the initial study workgroup, the three rating scales were combined into a single measure in such a manner that a particular value on the performance expectation scale would outweigh or outrank all values on the consequence and frequency scales, and that a particular value on the consequence scale would outweigh or outrank all values on the frequency scale.

Table 3 displays how the values of the overall criticality rating were constructed according to all the possible survey response patterns that might be given to rate an individual work activity by its frequency, performance expectation, and consequence. For example, if a respondent indicated that a particular work activity was expected to be performed within the first six months of assuming the role of a nursing case manager, could cause severe harm to the patient if it was performed incorrectly, and is performed occasionally, the overall criticality rating for that response pattern would be 29. A score of 22 suggests that a work activity is generally expected to be performed within the first six months of assuming the role of a nursing case manager and have moderate consequences if incorrectly performed. Therefore, work activities with scores of 22 or higher on the overall criticality variable may be considered as highly critical. When a work activity was rated as *never expected* on the performance expectation scale, it would receive an overall criticality score of 1 as the bottom row in Table 3 indicates.

**Table 3. Construction of the Overall Criticality Variable**

Survey Response Options			Overall Criticality Score
Performance Expectation	Consequence	Frequency	
Within first 6 months	Severe	Frequently	31
		Often	30
		Occasionally	29
		Seldom	28
		Never	27
	Moderate	Frequently	26
		Often	25
		Occasionally	24
		Seldom	23
		Never	22
	Little or no	Frequently	21
		Often	20
		Occasionally	19
		Seldom	18
		Never	17
After first 6 months	Severe	Frequently	16
		Often	15
		Occasionally	14
		Seldom	13
		Never	12
	Moderate	Frequently	11
		Often	10
		Occasionally	9
		Seldom	8
		Never	7
	Little or no	Frequently	6
		Often	5
		Occasionally	4
		Seldom	3
		Never	2
Never expected	All options	All options	1

## Survey Results

The initial, total sample size included 959 ANCC-certified nursing case managers. A total of 388 valid surveys were returned for an overall response rate of 40 percent. Three hundred and fifty three of these respondents indicated they were currently working in nursing case management. The data analysis was based on these 353 responses.

Table 4 shows the percent of surveys returned in each geographic region compared to the number of ANCC-certified nursing case managers selected within the region.

**Table 4. Number of Surveys Returned per Geographic Region for Nursing Case Management**

Geographic Region	Number Selected (percent of total pop.)	Number Return (percent of total pop.)
<b>Northeast</b> – NY, CT, MA, NJ, ME, PA, NH, VT, RI	268 (27.95%)	122 (31.69%)
<b>South</b> – TN, MS, TX, FL, LA, AL, GA, AR, OK, VA, MD, SC, DC, NC, WV, DE, KY	320 (33.37%)	127 (32.99%)
<b>Midwest</b> – IA, NE, KS, OH, MO, MN, SD, ND, MI, IL, IN, WI	193 (20.13%)	82 (21.30%)
<b>West</b> – WA, AZ, CA, OR, CO, AK, ID, NM, UT, HI, NV, WY, MT	178 (18.56%)	53 (13.77%)
<b>Other</b>		
<b>Total</b>	<b>959</b>	<b>388</b>

## Demographic Information

**Appendix B** details the nursing case managers survey respondents' responses to the survey's demographic questions which included inquiry on the practitioner's background and practice setting.

### *Demographic Background*

Approximately 97 percent of the respondents were female and approximately 88 percent reported to be white. Approximately 83 percent of the respondents fell into the age group of 45 - 64 years of age.

Approximately 19 percent of respondents indicated that they held a Masters in Nursing as one of their highest degrees. Approximately 49 percent of the respondents had a Baccalaureate in Nursing as one of their highest degrees.

The average number of years of experience the nursing case managers had as an RN was 27.59 years. The respondents also reported on average 12.18 years of experience working within the specialty.

### **American Nurses Credentialing Center**

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**Practice Settings**

Approximately 33 percent of the respondents indicated that they practiced in cities (population between 50,000 - 249,999). Metropolitan (population between 250,000 - 999,999) areas came in second with approximately 20 percent of respondents.

In terms of practice setting, the highest percentage of respondents indicated they practice in a hospital-based facility (60 percent). Health plan and/or insurance company came in second with 11 percent.

**Practice Descriptions**

Descriptive statistics (means, standard deviations, and medians) for the three ratings of all 65 work activities—performance expectation, consequence, and frequency—and overall criticality are listed in **Appendix C**. The scales were highly reliable. Cronbach’s coefficient alpha estimates for the performance expectation, consequence, and frequency scales when applied to all the data were 0.93, 0.97, and 0.95 respectively. (Cronbach's coefficient alpha, a measure of internal stability, ranges in value between 0 and 1.)

In **Appendix D**, the mean overall criticality statistics are presented in rank order of criticality. As indicated in Table 5, 51 work activity statements were rated by the respondents as being highly critical (with a mean overall criticality rank of 22 or above).

**Table 5. Number of Work Activities by Mean Overall Criticality for Nursing Case Management**

	Mean Overall Criticality Score						Total number above 22
	27 and above	Between 22 and 26	Between 17 and 21	Between 12 and 16	Between 7 and 11	6 and below	
Number of Work Activities	1	50	0	1	11	2	51

Tables 6 and 7 display the 20 highest-ranking and the 20 lowest-ranking work activities by overall criticality.

**Table 6. Top 20 Work Activities Ranked by Overall Criticality for Nursing Case Management**

Work Activity Number and Name	Overall Criticality
47 Maintains client’s confidentiality	31
27 Documents the case management plan and on-going activities	26
8 Identifies client’s payor source(s) and/or coverage	26
9 Identifies client risk factors and/or barriers to care	26
7 Identifies client needs and current services	26
26 Addresses barriers to care	26
17 Collaborates with multidisciplinary team and other stakeholders (payors, providers, employers, organizations, patients, family member, etc)	26

<b>Work Activity Number and Name</b>	<b>Overall Criticality</b>
50 Evaluates client's/family/caregiver's understanding of treatment plan	26
40 Advocates for the client through the continuum of care	26
44 Communicates client care preferences	26
1 Screens client and/or population for health needs	26
12 Develops a client-focused case management plan	26
21 Links client to services and resources to meet established goals	26
46 Verifies that interventions are consistent with client's needs and goals of treatment	26
29 Educates the client/family/caregiver regarding the case management process	26
49 Evaluates client's/family's/caregiver's understanding of education provided	26
2 Identifies potential clients for case management services	26
11 Engages client in case management plan development	26
15 Identifies available resources to meet established goals	26
42 Promotes the client's autonomy and self-determination	26

**Table 7. Bottom 20 Work Activities Ranked by Overall Criticality for Nursing Case Management**

<b>Work Activity Number and Name</b>	<b>Overall Criticality</b>
16 Validates case management plan is consistent with evidence based practice, regulatory, accreditation, and jurisdictional guidelines	25
13 Develops client-focused outcome measures	25
19 Negotiates with clients, providers, and payors for services	25
37 Educates members of health care team on client's cultural beliefs.	24
22 Refers client for complex case management or disease management based on established criteria	24
10 Identifies risk factors and/or barriers within populations	24
28 Assists in the denial and appeal process	16
63 Performs on-going patient-specific evaluation for program quality and cost-effectiveness	10
53 Analyzes client outcomes in correlation to national standards	10
58 Collects data for variances	9
56 Develops patient-specific program-focused outcome measures	9
61 Collects quality indicators/core measures data	9
54 Conducts client cost benefit analysis	9
55 Collects aggregate data for tracking and outcomes management	9
62 Evaluates quality indicators/core measures data	9
64 Advocates for the expansion or establishment of services within the organization	9
60 Evaluates the case management program and/or system outcomes	9

Work Activity Number and Name	Overall Criticality
65 Advocates for client-center changes in organizational and/or governmental policy	8
59 Evaluates data for variances	5
57 Analyzes aggregate data for utilization	5

# **Appendix A**

## **Work Activities Statements**

### **Work Activity No. and Statement**

- 1 Screens client and/or population for health needs
- 2 Identifies potential clients for case management services
- 3 Verifies client's assignment for case management services is consistent with regulatory, accreditation, and jurisdictional guidelines
- 4 Obtains consent for case management service
- 5 Performs client biopsychosocial assessment
- 6 Assesses client's health literacy
- 7 Identifies client needs and current services
- 8 Identifies client's payor source(s) and/or coverage
- 9 Identifies client risk factors and/or barriers to care
- 10 Identifies risk factors and/or barriers within populations
- 11 Engages client in case management plan development
- 12 Develops a client-focused case management plan
- 13 Develops client-focused outcome measures
- 14 Designs a transitional case management plan based on level of care
- 15 Identifies available resources to meet established goals
- 16 Validates case management plan is consistent with evidence based practice, regulatory, accreditation, and jurisdictional guidelines
- 17 Collaborates with multidisciplinary team and other stakeholders (payors, providers, employers, organizations, patients, family member, etc)
- 18 Communicates case management plan to stakeholders (payors, providers, employers, organizations, patients, family member, etc).
- 19 Negotiates with clients, providers, and payors for services
- 20 Reviews level of care based on utilization review criteria
- 21 Links client to services and resources to meet established goals
- 22 Refers client for complex case management or disease management based on established criteria
- 23 Transitions client to next level of care
- 24 Facilitates communication, problem-solving and conflict resolution with stakeholders and/or involved parties (payors, providers, employers, organizations, patients, family member, etc)
- 25 Coordinates case management interventions with stakeholders (payors, providers, employers, organizations, patients, family member, etc)
- 26 Addresses barriers to care
- 27 Documents the case management plan and on-going activities
- 28 Assists in the denial and appeal process
- 29 Educates the client/family/caregiver regarding the case management process
- 30 Educates the client/family/caregiver regarding the identified disease process(es)
- 31 Educates the client/family/caregiver regarding treatment options, resources and services
- 32 Educates the client/family/caregiver regarding benefit coverage
- 33 Educates the client/family/caregiver regarding anticipated outcomes

**Work Activity No. and Statement**

- 34 Educates the client/family/caregiver regarding transitions across levels of care
- 35 Educates client/family/caregiver regarding self-management strategies.
- 36 Educates client regarding patient's bill of rights
- 37 Educates members of health care team on client's cultural beliefs.
- 38 Educates members of health care team about resources and benefits coverage
- 39 Educates the payor regarding treatment plans
- 40 Advocates for the client through the continuum of care
- 41 Promotes access to care that minimizes disparities.
- 42 Promotes the client's autonomy and self-determination
- 43 Promotes care that minimizes delays and variances in care delivery
- 44 Communicates client care preferences
- 45 Clarifies the goals of therapy and treatment
- 46 Verifies that interventions are consistent with client's needs and goals of treatment
- 47 Maintains client's confidentiality
- 48 Facilitates resolution of ethical conflict
- 49 Evaluates client's/family's/caregiver's understanding of education provided
- 50 Evaluates client's/family/caregiver's understanding of treatment plan
- 51 Evaluates the client's response to the case management plan/delivered services
- 52 Modifies the case management plan/services based on the evaluation of outcomes
- 53 Analyzes client outcomes in correlation to national standards
- 54 Conducts client cost benefit analysis
- 55 Collects aggregate data for tracking and outcomes management
- 56 Develops patient-specific program-focused outcome measures
- 57 Analyzes aggregate data for utilization
- 58 Collects data for variances
- 59 Evaluates data for variances
- 60 Evaluates the case management program and/or system outcomes
- 61 Collects quality indicators/core measures data
- 62 Evaluates quality indicators/core measures data
- 63 Performs on-going patient-specific evaluation for program quality and cost-effectiveness
- 64 Advocates for the expansion or establishment of services within the organization
- 65 Advocates for client-center changes in organizational and/or governmental policy

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## **Appendix B Demographic Data Summary**

\*Questions 7, 8, 9, and 10 are based on N = 388, and the rest on N = 385 due to the missing responses on the demographic questions that were located at the end of the survey.

1. What is the Zip code of your primary place of work?

	Recruitment		Respondents	
	Count	Percent	Count	Percent
Northeast	268	27.95%	122	31.69%
South	320	33.37%	127	32.99%
Midwest	193	20.13%	82	21.30%
West	178	18.56%	53	13.77%
Other	0	0.00%	1	0.26%
<b>Total</b>	<b>959</b>	<b>100.00%</b>	<b>385</b>	<b>100.00%</b>

2. What is your gender?

	Count	Percent
Female	365	96.56%
Male	13	3.44%
<b>Total</b>	<b>378</b>	<b>100.00%</b>
(Not Answered)	7	

3. What is your age?

	Count	Percent
25 - 34 years old	8	2.11%
35 - 44 years old	50	13.19%
45 - 54 years old	153	40.37%
55 - 64 years old	161	42.48%
65 and older	7	1.85%
<b>Total</b>	<b>379</b>	<b>100.00%</b>
(Not Answered)	6	

4. What is your racial/ethnic background? (Mark all that apply)

	Count	Percent
White	339	88.05%
Black or African American	19	4.94%
American Indian and Alaska Native	2	0.52%
Asian	11	2.86%
Native Hawaiian and other Pacific Islander	2	0.52%
Hispanic or Latino	7	1.82%
Middle Eastern	0	0.00%
Other	4	1.04%
(Not Answered)	7	

The percentage is computed using "Total = 385"

5. Indicate the highest completed degree in nursing

	Count	Percent
Diploma in Nursing	37	9.71%
Associate Degree in Nursing	71	18.64%
Baccalaureate in Nursing	185	48.56%
Master's in Nursing	71	18.64%
Ph.D. in Nursing	1	0.26%
DNS/DSN/DSNsc	0	0.00%
ND	0	0.00%
DNP	3	0.79%
Other	13	3.41%
(Not Answered)	4	
	381	100.00%

6a. Do you hold a non-nursing degree?

	Count	Percent
Yes	112	29.55%
No	267	70.45%
(Not Answered)	6	
	379	100.00%

6b. Indicate your highest completed non-nursing degree

	Count	Percent
Associate Degree	12	10.81%
Baccalaureate	48	43.24%
Master's	49	44.14%
Specialist	1	0.90%
Doctorate	1	0.90%
(Not Answered)	111	100.00%
	274	

7. How many years have you been:  
(This is a role question based on N = 388)

	a RN in the United States?		practicing in nursing case management?		ANCC certified in nursing case management?	
	Count	Percent	Count	Percent	Count	Percent
0 to 9	8	2.06%	126	32.81%	328	87.00%
10 to 19	75	19.33%	211	54.95%	48	12.73%
20 to 29	119	30.67%	41	10.68%	1	0.27%
30 to 39	154	39.69%	6	1.56%	0	0.00%
40 to 49	30	7.73%	0	0.00%	0	0.00%
50 to 59	2	0.52%	0	0.00%	0	0.00%
<b>Total</b>	<b>388</b>	<b>100.00%</b>	<b>384</b>	<b>100.00%</b>	<b>377</b>	<b>100.00%</b>
(Invalid Response)					7	
(Not Answered)			4		4	
<b>Mean</b>	<b>27.59</b>		<b>12.18</b>		<b>4.79</b>	
<b>Median</b>	<b>29.00</b>		<b>11.50</b>		<b>4.00</b>	

**8a. Do you currently hold any other case management/nursing certifications?**  
 (This is a role question based on N = 388)

	Count	Percent
Yes	189	48.84%
No	198	51.16%
<b>Total</b>	<b>387</b>	<b>100.00%</b>
(Not Answered)	1	

**9. Are you currently practicing in nursing case management?**  
 (This is a role question based on N = 388)

	Count	Percent
Yes	353	93.14%
No	26	6.86%
<b>Total</b>	<b>379</b>	<b>100.00%</b>
(Not Answered)	9	

**10. How many hours per week do you work in nursing case management?**  
 (This is a role question based on N = 388)

	Count	Percent
Less than 10	35	9.07%
10 to 20	19	4.92%
21 to 30	18	4.66%
31 to 40	136	35.23%
41 to 50	147	38.08%
Greater than 50	31	8.03%
<b>Total</b>	<b>386</b>	<b>100.00%</b>
(Not Answered)	2	

**11. What is the size of the population of your work service areas?**

	Count	Percent
Rural (population less than 2,500)	4	1.05%
Town (population between 2,500 - 49,999)	45	11.81%
City (population between 50,000 - 249,999)	127	33.33%
Metropolitan (population between 250,000 - 999,999)	75	19.69%
Greater Metropolitan (population greater than 999,999)	59	15.49%
Regional service area	44	11.55%
National service area	23	6.04%
Internationally service area	4	1.05%
<b>Total</b>	<b>381</b>	<b>100.00%</b>
(Not Answered)	4	

**12. Which of the following best describes your current primary employment setting?  
(you may mark more than one)**

	Count	Percent
Hospital-based facility (including hospital associated satellite centers)	227	59.74%
Telehealth/call center	3	0.79%
Community based outpatient provider	10	2.63%
Ambulatory care office (e.g., physician office, urgent care)	8	2.11%
Assistive living/skilled nursing	2	0.53%
Group home/residential facility	0	0.00%
Home health	9	2.37%
Health plan and/or insurance company	41	10.79%
Independent practice	12	3.16%
Case management company	27	7.11%
Other	41	10.79%
<b>Total</b>	<b>380</b>	<b>100.00%</b>
(Not Answered)	5	

13. Do you work for a:

	Count	Percent
For profit employer	86	22.81%
Non-profit/Not-for-profit employer	201	53.32%
State/Local government employer	22	5.84%
VA/DOD employer	26	6.90%
Federal	13	3.45%
Independent/Contractor	0	0.00%
Other	29	7.69%
<b>Total</b>	<b>377</b>	<b>100.00%</b>
(Not Answered)	8	

14. Approximately what percentage of your work time is spent in the following areas?

	Administrative tasks		Management		Direct case management		Direct clinical care	
	Count	Percent	Count	Percent	Count	Percent	Count	Percent
0%	68	18.53%	153	43.22%	32	8.79%	231	68.75%
1% to 19%	177	48.23%	103	29.10%	50	13.74%	55	16.37%
20% to 39%	87	23.71%	51	14.41%	64	17.58%	27	8.04%
40% to 59%	20	5.45%	29	8.19%	53	14.56%	16	4.76%
60% to 79%	10	2.72%	10	2.82%	58	15.93%	2	0.60%
80% to 100%	5	1.36%	8	2.26%	107	29.40%	5	1.49%
<b>Valid Responses</b>	<b>367</b>	<b>100.00%</b>	<b>354</b>	<b>100.00%</b>	<b>364</b>	<b>100.00%</b>	<b>336</b>	<b>100.00%</b>
(Not Answered)	18		31		21		49	
<b>Mean percent spent with each age group</b>		<b>15.02</b>		<b>13.51</b>		<b>49.15</b>		<b>6.84</b>

14. Approximately what percentage of your work time is spent in the following areas? (Continued)

	Professional development		Research		Quality management		Other	
	Count	Percent	Count	Percent	Count	Percent	Count	Percent
0%	64	18.60%	201	62.23%	90	26.09%	96	53.33%
1% to 19%	256	74.42%	113	34.98%	207	60.00%	57	31.67%
20% to 39%	20	5.81%	6	1.86%	34	9.86%	14	7.78%
40% to 59%	3	0.87%	2	0.62%	9	2.61%	7	3.89%
60% to 79%	1	0.29%	0	0.00%	1	0.29%	2	1.11%
80% to 100%	0	0.00%	1	0.31%	4	1.16%	4	2.22%
<b>Valid Responses</b>	<b>344</b>	<b>100.00%</b>	<b>323</b>	<b>100.00%</b>	<b>345</b>	<b>100.00%</b>	<b>180</b>	<b>100.00%</b>
<b>(Not Answered)</b>	<b>41</b>		<b>62</b>		<b>40</b>		<b>205</b>	
<b>Mean percent spent with each age group</b>	<b>6.61</b>		<b>3.05</b>		<b>8.86</b>		<b>8.86</b>	

## **Appendix C**

### **Work Activities Descriptive Statistics**

**Nursing Case Management(N=353)  
Survey Order**

Survey Order		Performance Expectation			Consequence			Frequency			Overall Rank		
		Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median
1	Screens client and/or population for health needs	1.95	0.26	2	1.08	0.66	1	3.67	0.66	4	25.56	4.8	26
2	Identifies potential clients for case management services	1.92	0.29	2	0.97	0.66	1	3.63	0.6	4	24.43	5.6	26
3	Verifies client's assignment for case management services is consistent with regulatory, accreditation, and jurisdictional guidelines	1.73	0.53	2	1.13	0.72	1	3.4	1	4	22.42	8.6	26
4	Obtains consent for case management service	1.7	0.71	2	1	0.83	1	3.25	1.41	4	22.72	9.8	26
5	Performs client biopsychosocial assessment	1.77	0.56	2	1.01	0.65	1	3.31	1.06	4	22.67	8.2	26
6	Assesses client's health literacy	1.87	0.41	2	1.1	0.66	1	3.42	0.9	4	24.28	6.8	26
7	Identifies client needs and current services	1.97	0.17	2	1.23	0.63	1	3.87	0.38	4	26.54	4.1	26
8	Identifies client's payor source(s) and/or	1.96	0.23	2	1.29	0.71	1	3.83	0.5	4	26.82	4.9	26

Performance expectation response options: 0 = never, 1 = after first 6 months, 2 = within the first 6 months; Consequences response option: 0 = little or none, 1 = moderate, 2 = severe; Frequency response options: 0 = never, 1 = seldom, 2 = occasionally, 3 = often, 4 = frequently

**Nursing Case Management(N=353)  
Survey Order**

		Performance Expectation			Consequence			Frequency			Overall Rank		
		Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median
	coverage												
9	Identifies client risk factors and/or barriers to care	1.96	0.2	2	1.29	0.63	1	3.8	0.45	4	26.75	4.6	26
10	Identifies risk factors and/or barriers within populations	1.59	0.62	2	0.84	0.68	1	2.94	1.14	3	18.93	10	24
11	Engages client in case management plan development	1.88	0.34	2	1.1	0.65	1	3.61	0.69	4	24.39	6.6	26
12	Develops a client-focused case management plan	1.91	0.3	2	1.16	0.64	1	3.74	0.56	4	25.19	5.9	26
13	Develops client-focused outcome measures	1.68	0.56	2	0.93	0.66	1	3.29	1.06	4	20.75	8.8	25
14	Designs a transitional case management plan based on level of care	1.72	0.51	2	1.04	0.62	1	3.33	0.91	4	21.64	8.3	25
15	Identifies available resources to meet established goals	1.88	0.34	2	1.09	0.61	1	3.65	0.58	4	24.32	6.2	26
16	Validates case management plan is consistent with evidence	1.68	0.49	2	1.15	0.71	1	3.45	0.79	4	21.51	8.8	25

Performance expectation response options: 0 = never, 1 = after first 6 months, 2 = within the first 6 months; Consequences response option: 0 = little or none, 1 = moderate, 2 = severe; Frequency response options: 0 = never, 1 = seldom, 2 = occasionally, 3 = often, 4 = frequently

**Nursing Case Management(N=353)  
 Survey Order**

	Performance Expectation			Consequence			Frequency			Overall Rank		
	Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median
17	1.95	0.21	2	1.17	0.63	1	3.75	0.47	4	25.89	4.8	26
18	1.85	0.43	2	1.08	0.68	1	3.53	0.79	4	23.93	7.4	26
19	1.56	0.62	2	1.06	0.69	1	2.88	1.1	3	19.49	9.7	25
20	1.81	0.45	2	1.14	0.68	1	3.42	0.88	4	23.58	7.9	26
21	1.91	0.31	2	1.17	0.63	1	3.57	0.64	4	25.08	5.9	26

Performance expectation response options: 0 = never, 1 = after first 6 months, 2 = within the first 6 months; Consequences response option: 0 = little or none, 1 = moderate, 2 = severe; Frequency response options: 0 = never, 1 = seldom, 2 = occasionally, 3 = often, 4 = frequently

**Nursing Case Management(N=353)  
Survey Order**

Survey Order		Performance Expectation			Consequence			Frequency			Overall Rank		
		Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median
22	Refers client for complex case management or disease management based on established criteria	1.69	0.55	2	1.01	0.65	1	2.92	1.05	3	20.82	8.6	24
23	Transitions client to next level of care	1.84	0.4	2	1.22	0.61	1	3.44	0.76	4	24.25	7.1	26
24	Facilitates communication, problem-solving and conflict resolution with stakeholders and/or involved parties (payors, providers, employers, organizations, patients, family member, etc)	1.73	0.49	2	1.1	0.61	1	3.22	0.87	3	21.86	8.1	25
25	Coordinates case management interventions with stakeholders (payors, providers, employers, organizations, patients, family member, etc)	1.77	0.48	2	1.01	0.62	1	3.28	0.89	3	22.25	7.7	25
26	Addresses barriers to care	1.93	0.26	2	1.31	0.63	1	3.66	0.53	4	26.13	5.2	26

Performance expectation response options: 0 = never, 1 = after first 6 months, 2 = within the first 6 months; Consequences response option: 0 = little or none, 1 = moderate, 2 = severe; Frequency response options: 0 = never, 1 = seldom, 2 = occasionally, 3 = often, 4 = frequently

**Nursing Case Management(N=353)  
Survey Order**

		Performance Expectation			Consequence			Frequency			Overall Rank		
		Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median
27	Documents the case management plan and on-going activities	1.98	0.17	2	1.29	0.68	1	3.88	0.4	4	27.06	4.4	26
28	Assists in the denial and appeal process	1.38	0.66	1	1.01	0.71	1	2.39	1.19	2	16.35	9.8	16
29	Educates the client/family/caregiver regarding the case management process	1.95	0.24	2	0.99	0.67	1	3.66	0.59	4	24.83	5.1	26
30	Educates the client/family/caregiver regarding the identified disease process(es)	1.85	0.46	2	1.01	0.65	1	3.19	1	3	23.49	7.2	25
31	Educates the client/family/caregiver regarding treatment options, resources and services	1.84	0.43	2	1.08	0.64	1	3.4	0.89	4	23.81	7.1	26
32	Educates the client/family/caregiver regarding benefit coverage	1.83	0.42	2	1.09	0.69	1	3.24	0.86	3	23.35	7.2	25
33	Educates the client/family/caregiver regarding anticipated outcomes	1.81	0.47	2	0.93	0.65	1	3.23	0.96	3	22.37	7.7	25

Performance expectation response options: 0 = never, 1 = after first 6 months, 2 = within the first 6 months; Consequences response option: 0 = little or none, 1 = moderate, 2 = severe; Frequency response options: 0 = never, 1 = seldom, 2 = occasionally, 3 = often, 4 = frequently

**Nursing Case Management(N=353)  
Survey Order**

		Performance Expectation			Consequence			Frequency			Overall Rank		
		Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median
34	Educates the client/family/caregiver regarding transitions across levels of care	1.82	0.42	2	0.96	0.61	1	3.27	0.82	3	22.46	7.2	25
35	Educates client/family/caregiver regarding self-management strategies.	1.76	0.51	2	0.98	0.65	1	3.09	1.01	3	21.83	8.2	25
36	Educates client regarding patient's bill of rights	1.76	0.6	2	0.92	0.79	1	3.04	1.28	4	22.14	9	25
37	Educates members of health care team on client's cultural beliefs.	1.73	0.55	2	0.93	0.69	1	2.64	1.19	3	20.87	8.7	24
38	Educates members of health care team about resources and benefits coverage	1.79	0.44	2	1.03	0.68	1	3.15	0.84	3	22.25	7.8	25
39	Educates the payor regarding treatment plans	1.79	0.5	2	1.15	0.72	1	3.1	1.05	3	23.22	8.3	25
40	Advocates for the client through the continuum of care	1.9	0.31	2	1.28	0.66	1	3.67	0.63	4	25.57	6.2	26
41	Promotes access to care that minimizes disparities.	1.81	0.42	2	1.05	0.65	1	3.38	0.83	4	22.87	7.6	25

Performance expectation response options: 0 = never, 1 = after first 6 months, 2 = within the first 6 months; Consequences response option: 0 = little or none, 1 = moderate, 2 = severe; Frequency response options: 0 = never, 1 = seldom, 2 = occasionally, 3 = often, 4 = frequently

**Nursing Case Management(N=353)  
Survey Order**

		Performance Expectation			Consequence			Frequency			Overall Rank		
		Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median
42	Promotes the client’s autonomy and self-determination	1.88	0.34	2	1.11	0.66	1	3.61	0.68	4	24.32	6.5	26
43	Promotes care that minimizes delays and variances in care delivery	1.86	0.36	2	1.15	0.62	1	3.55	0.66	4	24.17	6.8	26
44	Communicates client care preferences	1.95	0.23	2	1.13	0.64	1	3.63	0.64	4	25.57	4.9	26
45	Clarifies the goals of therapy and treatment	1.87	0.36	2	1.03	0.64	1	3.42	0.75	4	23.7	6.6	25
46	Verifies that interventions are consistent with client’s needs and goals of treatment	1.89	0.34	2	1.18	0.62	1	3.54	0.72	4	24.85	6.1	26
47	Maintains client’s confidentiality	1.99	0.12	2	1.84	0.44	2	3.98	0.17	4	29.95	3	31
48	Facilitates resolution of ethical conflict	1.71	0.5	2	1.45	0.65	2	2.85	1.06	3	23	8.3	26
49	Evaluates client’s/family’s/caregiver’s understanding of education provided	1.87	0.37	2	1.21	0.62	1	3.45	0.79	4	24.75	6.5	26
50	Evaluates client’s/family/caregiver’s understanding of	1.92	0.3	2	1.24	0.62	1	3.59	0.66	4	25.68	5.5	26

Performance expectation response options: 0 = never, 1 = after first 6 months, 2 = within the first 6 months; Consequences response option: 0 = little or none, 1 = moderate, 2 = severe; Frequency response options: 0 = never, 1 = seldom, 2 = occasionally, 3 = often, 4 = frequently

**Nursing Case Management(N=353)  
Survey Order**

		Performance Expectation			Consequence			Frequency			Overall Rank		
		Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median
	treatment plan												
51	Evaluates the client's response to the case management plan/delivered services	1.85	0.4	2	1.04	0.64	1	3.45	0.83	4	23.5	6.8	26
52	Modifies the case management plan/services based on the evaluation of outcomes	1.74	0.49	2	1.1	0.61	1	3.25	0.93	3	22.25	8	25
53	Analyzes client outcomes in correlation to national standards	1.19	0.7	1	0.62	0.68	1	2.2	1.29	2	12.42	9.8	10
54	Conducts client cost benefit analysis	1.09	0.75	1	0.62	0.68	1	1.91	1.33	2	11.45	10	9
55	Collects aggregate data for tracking and outcomes management	1.1	0.68	1	0.53	0.61	0	2.02	1.25	2	10.67	9.1	9
56	Develops patient-specific program-focused outcome measures	1.15	0.7	1	0.62	0.65	1	2.11	1.3	2	11.86	9.7	9

Performance expectation response options: 0 = never, 1 = after first 6 months, 2 = within the first 6 months; Consequences response option: 0 = little or none, 1 = moderate, 2 = severe; Frequency response options: 0 = never, 1 = seldom, 2 = occasionally, 3 = often, 4 = frequently

**Nursing Case Management(N=353)  
Survey Order**

		Performance Expectation			Consequence			Frequency			Overall Rank		
		Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median
57	Analyzes aggregate data for utilization	0.9	0.69	1	0.47	0.6	0	1.67	1.26	2	8.46	8.4	5
58	Collects data for variances	1.21	0.75	1	0.57	0.62	0	2.14	1.37	2	12.81	10	9
59	Evaluates data for variances	0.9	0.69	1	0.53	0.63	0	1.69	1.32	2	8.7	8.5	5
60	Evaluates the case management program and/or system outcomes	0.91	0.65	1	0.59	0.64	1	1.8	1.28	2	8.81	8.2	9
61	Collects quality indicators/core measures data	1.09	0.76	1	0.63	0.69	1	2.04	1.4	2	11.81	10	9
62	Evaluates quality indicators/core measures data	1	0.74	1	0.62	0.67	1	1.94	1.4	2	10.62	9.6	9
63	Performs on-going patient-specific evaluation for program quality and cost-effectiveness	1.13	0.73	1	0.75	0.66	1	2.25	1.42	2	12.65	10	10
64	Advocates for the expansion or establishment of services	1.06	0.62	1	0.61	0.66	1	1.97	1.21	2	10.07	8.9	9

Performance expectation response options: 0 = never, 1 = after first 6 months, 2 = within the first 6 months; Consequences response option: 0 = little or none, 1 = moderate, 2 = severe; Frequency response options: 0 = never, 1 = seldom, 2 = occasionally, 3 = often, 4 = frequently

**Nursing Case Management(N=353)  
Survey Order**

	Performance Expectation			Consequence			Frequency			Overall Rank		
	Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median
65												
	within the organization											
	0.99	0.66	1	0.56	0.67	0	1.69	1.19	2	9.24	8.8	8
	Advocates for client-center changes in organizational and/or governmental policy											

Performance expectation response options: 0 = never, 1 = after first 6 months, 2 = within the first 6 months; Consequences response option: 0 = little or none, 1 = moderate, 2 = severe; Frequency response options: 0 = never, 1 = seldom, 2 = occasionally, 3 = often, 4 = frequently

**Appendix D**  
**Work Activities Overall Criticality – Rank Order**

Work Activity No. and Statement	Overall Criticality			
	N	Mean	Std Dev	Median
47 Maintains client's confidentiality	351	29.95	2.96	31
27 Documents the case management plan and on-going activities	353	27.06	4.36	26
8 Identifies client's payor source(s) and/or coverage	353	26.82	4.85	26
9 Identifies client risk factors and/or barriers to care	353	26.75	4.62	26
7 Identifies client needs and current services	353	26.54	4.14	26
26 Addresses barriers to care	353	26.13	5.19	26
17 Collaborates with multidisciplinary team and other stakeholders (payors, providers, employers, organizations, patients, family member, etc)	353	25.89	4.83	26
50 Evaluates client's/family/caregiver's understanding of treatment plan	349	25.68	5.54	26
40 Advocates for the client through the continuum of care	352	25.57	6.2	26
44 Communicates client care preferences	351	25.57	4.89	26
1 Screens client and/or population for health needs	353	25.56	4.82	26
12 Develops a client-focused case management plan	353	25.19	5.88	26
21 Links client to services and resources to meet established goals	353	25.08	5.89	26
46 Verifies that interventions are consistent with client's needs and goals of treatment	351	24.85	6.08	26
29 Educates the client/family/caregiver regarding the case management process	353	24.83	5.12	26
49 Evaluates client's/family's/caregiver's understanding of education provided	349	24.75	6.51	26
2 Identifies potential clients for case management services	353	24.43	5.63	26
11 Engages client in case management plan development	353	24.39	6.57	26
15 Identifies available resources to meet established goals	353	24.32	6.18	26
42 Promotes the client's autonomy and self-determination	352	24.32	6.46	26
6 Assesses client's health literacy	353	24.28	6.84	26
23 Transitions client to next level of care	353	24.25	7.14	26
43 Promotes care that minimizes delays and variances in care delivery	352	24.17	6.84	26
18 Communicates case management plan to stakeholders (payors, providers, employers, organizations, patients, family member, etc).	353	23.93	7.42	26
31 Educates the client/family/caregiver regarding treatment options, resources and services	353	23.81	7.09	26
20 Reviews level of care based on utilization review criteria	353	23.58	7.89	26

Work Activity No. and Statement	Overall Criticality			
	N	Mean	Std Dev	Median
51 Evaluates the client’s response to the case management plan/delivered services	349	23.5	6.79	26
48 Facilitates resolution of ethical conflict	351	23	8.33	26
4 Obtains consent for case management service	353	22.72	9.82	26
5 Performs client biopsychosocial assessment	353	22.67	8.23	26
3 Verifies client’s assignment for case management services is consistent with regulatory, accreditation, and jurisdictional guidelines	353	22.42	8.58	26
45 Clarifies the goals of therapy and treatment	351	23.7	6.59	25
30 Educates the client/family/caregiver regarding the identified disease process(es)	353	23.49	7.23	25
32 Educates the client/family/caregiver regarding benefit coverage	353	23.35	7.18	25
39 Educates the payor regarding treatment plans	353	23.22	8.31	25
41 Promotes access to care that minimizes disparities.	352	22.87	7.63	25
34 Educates the client/family/caregiver regarding transitions across levels of care	353	22.46	7.19	25
33 Educates the client/family/caregiver regarding anticipated outcomes	353	22.37	7.66	25
25 Coordinates case management interventions with stakeholders (payors, providers, employers, organizations, patients, family member, etc)	353	22.25	7.7	25
38 Educates members of health care team about resources and benefits coverage	353	22.25	7.76	25
52 Modifies the case management plan/services based on the evaluation of outcomes	349	22.25	8	25
36 Educates client regarding patient’s bill of rights	353	22.14	9	25
24 Facilitates communication, problem-solving and conflict resolution with stakeholders and/or involved parties (payors, providers, employers, organizations, patients, family member, etc)	353	21.86	8.13	25
35 Educates client/family/caregiver regarding self-management strategies.	353	21.83	8.2	25
14 Designs a transitional case management plan based on level of care	353	21.64	8.26	25
16 Validates case management plan is consistent with evidence based practice, regulatory, accreditation, and jurisdictional guidelines	353	21.51	8.77	25
13 Develops client-focused outcome measures	353	20.75	8.78	25
19 Negotiates with clients, providers, and payors for services	353	19.49	9.72	25
37 Educates members of health care team on client’s cultural beliefs.	353	20.87	8.74	24

Work Activity No. and Statement	Overall Criticality			
	N	Mean	Std Dev	Median
22 Refers client for complex case management or disease management based on established criteria	353	20.82	8.56	24
10 Identifies risk factors and/or barriers within populations	353	18.93	9.95	24
28 Assists in the denial and appeal process	353	16.35	9.79	16
63 Performs on-going patient-specific evaluation for program quality and cost-effectiveness	349	12.65	10.17	10
53 Analyzes client outcomes in correlation to national standards	349	12.42	9.83	10
58 Collects data for variances	349	12.81	10.34	9
56 Develops patient-specific program-focused outcome measures	349	11.86	9.74	9
61 Collects quality indicators/core measures data	349	11.81	10.37	9
54 Conducts client cost benefit analysis	349	11.45	10.04	9
55 Collects aggregate data for tracking and outcomes management	349	10.67	9.07	9
62 Evaluates quality indicators/core measures data	349	10.62	9.61	9
64 Advocates for the expansion or establishment of services within the organization	349	10.07	8.85	9
60 Evaluates the case management program and/or system outcomes	349	8.81	8.2	9
65 Advocates for client-center changes in organizational and/or governmental policy	349	9.24	8.83	8
59 Evaluates data for variances	349	8.7	8.45	5
57 Analyzes aggregate data for utilization	349	8.46	8.36	5

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The American Nurses Credentialing Center (ANCC) provides individuals and organizations throughout the nursing profession with the tools they need on their journey to excellence. ANCC's internationally renowned credentialing programs certify nurses in specialty practice areas, recognize health organizations for nursing excellence through the Magnet Recognition Program®, and accredit providers and approvers of continuing nursing education. In addition, ANCC offers an array of informational and educational services and products to support its core credentialing programs.

ANCC is the largest and most prestigious nurse credentialing organization in the world. ANCC certification exams validate nurses' skills, knowledge, and abilities. More than a quarter million nurses have been certified by ANCC since 1990. More than 75,000 advanced practice nurses are currently certified by ANCC.

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ANCC produces a variety of educational services and products to support those seeking certification, Magnet recognition, or accreditation. Review and resource manuals, review seminars, and web-based learning all support individuals who are on the path to certification. ANCC's National Magnet Conferences, workshops, and consultants support organizations on the journey to Magnet Recognition. Consultants are available to assist continuing nursing education accreditation programs in achieving the highest caliber education.

ANCC is passionate about helping nurses on their journey to nursing excellence.

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