

2008 Role Delineation Study: Gerontological Nurse Practitioner

National Survey Results



MAY 2009

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About this Report

This report pertaining to the practice of gerontological nurse practitioners was based on the results of a national study of practice of adult, family, gerontological and pediatric nurse practitioners.

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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 30 examinations at various levels including diploma and associate degree, baccalaureate, and advanced practice for nurse practitioners, clinical nurse specialists, and other disciplines. Approximately 12,000 - 13,000 candidates take an ANCC certification examination each year. As of Dec 2007, 3,813 individuals held ANCC certification as gerontological nurse practitioners. In addition to certification, ANCC provides services such as the Magnet Recognition Program 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 nurse practitioners 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 examinations.

The 2008 Nurse Practitioner: Adult, Family, Gerontological, and Pediatric 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 nurse practitioners 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 outlines for each examination contained within the study.

Updated Test Content Outlines

The results of this role delineation study were used in the updating of the test content outlines for each examination contained within the study. Examination forms produced based on the gerontological nurse practitioner test content outline updated through this study are scheduled to go into effect March 1, 2010. A copy of the test content outline is available on the American Nurses Credentialing Center website.

Role of the Content Expert Panels

Through out the study, ANCC invited professionals in practice and educators who teach courses relevant to nurse practitioners to serve on content expert panels 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 outlines for the respective certification examinations. All of the content experts serving on the panels were certified by ANCC in the nurse practitioner population they represented and were invited to serve on the panels based upon expertise in their specialties.

Survey Methodology

The purpose of the development and administration of the national survey was to collect information on the work activities nurse practitioners actually perform in practice. Since the survey instrument that was used for the purposes of this study would be used across four nurse practitioner populations, representatives from each of these four population-based role delineation study panels were also asked to serve as members of an eight (8) member initial study workgroup that acted as a sort of steering committee for the panels. Seven members of the workgroup met for three days May 7-9, 2008 to draft a single 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:

May - June 2008

- The initial study workgroup along with staff from ANCC drafted the survey
- The survey was pilot tested and revised.

July - August 2008

- The final survey was administered on the web.

September - November 2008

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

Sample Selection

On April 21, 2008, there were a total 3,789 actively certified ANCC gerontological nurse practitioners. A random sample of 1,500 gerontological nurse practitioners stratified by region was selected from the ANCC certification database. Table 1 presents the numbers of ANCC certified gerontological nurse practitioners that were selected from each region.

Table 1. Number of Surveys Mailed Out per Geographic Region

Geographic Region	Gerontological Nurse Practitioner	
	Number certified (percent of total pop.)	Number selected (percent of total pop.)
Northeast – NY, CT, MA, NJ, ME, PA, NH, VT, RI	1,057 (28%)	418 (28%)
South – TN, MS, TX, FL, LA, AL, GA, AR, OK, VA, MD, SC, DC, NC, WV, DE, KY	1,197 (32%)	474 (32%)
Midwest – IA, NE, KS, OH, MO, MN, SD, ND, MI, IL, IN, WI	910 (24%)	360 (24%)
West – WA, AZ, CA, OR, CO, AK, ID, MN, UT, HI, NV, WY, MT	625 (16%)	248 (16%)
Other – AE, AP, APO	0 (0.0%)	0 (0%)
Total	3,789 (100%)	1,500 (100%)

Survey Development and Measures

On May 7-9, 2008, the initial study workgroup met in Silver Spring, MD in order to draft the national Nurse Practitioner: Adult, Family, Gerontological and Pediatric Role Delineation Study survey for the 2008 role delineation study. The panel members reviewed the work activities which had been used in the ANCC's 2003 Role Delineation Survey of Nurse Practitioners. During the meeting, they discussed any additions, deletions, and changes they would make to update the 2003 work activity list to reflect current practice of nurse practitioners working within any of the four population areas. The panel referred to the National Organization of Nurse Practitioner Faculties' *Nurse Practitioner Core and Primary Care Competencies*, *The Essentials of Master's Education for Advanced Practice Nursing*, the *ANA Scopes and Standards of Nursing Practice (2nd edition)*, as well as other nurse practitioner related documents (e.g., text books) through out their discussions. The goal of this process was to create a comprehensive list relevant work activities that were potentially performed by nurse practitioners in any one of the population areas, regardless of whether it was performed in the others. As a result of this meeting, the panel reached consensus on a new list of 128 work activities to be used in the 2008 survey. These work activities were divided into five domains: Assessment of Health Status, Diagnosis of Health Status, Plan of Care and Treatment Implementation, Professional Role, and Teaching and Coaching. The complete text of the work activities list is presented in **Appendix A**. The workgroup also identified and finalized a set of 16 demographic items for inclusion in the survey. (See **Appendix B**).

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

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.

Performance Expectation: When is a newly certified nurse practitioner first expected to perform this activity?

- Within the first 6 months of working within the role.
- After the first 6 months of working within the role.
- Never expected to perform this activity within the role.

Frequency: How often does a newly certified nurse practitioner perform this activity (consider within a one year period)?

- Frequently
- Often
- Occasionally
- Seldom
- Never

Consequences: Does incorrect performance of this activity cause the patient:

- Little or no physical or psychological harm?
- Moderate physical or psychological harm?
- Severe physical or psychological harm?

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 initial study workgroup discussed the importance of each scale to the performance of the work activity. The workgroup 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.

Data Collection

Pilot Testing. Using the same procedures intended for administering the national data collection, the survey was piloted in May-June 2008. Twenty-five (25) ANCC certified gerontological nurse practitioners randomly selected from across the nation were included in the sample of 100 ANCC certified nurse practitioners invited to take the pilot survey. Overall, 29 (29 percent) of the nurse practitioners invited to take the pilot survey responded; Seven (7) respondents were gerontological nurse practitioner. The respondents of the pilot test in general indicated that the work activities were appropriate and reflective of the job of the nurse practitioner.

National Survey. Beginning in July and August 2008, the 1,500 gerontological nurse practitioners selected to take the national web-based 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 receive a 5 hour reduction of their continuing education requirement for their 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 nurse practitioner, 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 nurse practitioner 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

Performance Expectation	Survey Response Options		Overall Criticality Score
	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 total sample size of the national survey included 1,500 ANCC certified gerontological nurse practitioners. A total of 418 valid gerontological nurse practitioner surveys were returned for an overall response rate of 28 percent.

Table 4 shows the percent of surveys per population returned in each geographic region compared to the number of ANCC certified gerontological nurse practitioners selected within the region.

Table 4. Number of Surveys Returned per Geographic Region for Gerontological Nurse Practitioner

Geographic Region	Gerontological Nurse Practitioner	
	Number Selected (percent of total pop.)	Number Return (percent of total pop.)
Northeast – NY, CT, MA, NJ, ME, PA, NH, VT, RI	418 (28%)	101 (24%)
South – TN, MS, TX, FL, LA, AL, GA, AR, OK, VA, MD, SC, DC, NC, WV, DE, KY	474 (32%)	140 (33%)
Midwest – IA, NE, KS, OH, MO, MN, SD, ND, MI, IL, IN, WI	360 (24%)	112 (27%)
West – WA, AZ, CA, OR, CO, AK, ID, MN, UT, HI, NV, WY, MT	248 (16%)	65 (16%)
Other – AE, AP, APO	0 (0%)	0 (0%)
Total	1,500 (100%)	418 (100%)

Demographic Information

Appendix B details the gerontological nurse practitioners survey respondents' responses to the survey's sixteen demographic questions which included inquiry on the practitioner's background and practice setting.

Demographic Background

Approximately 97 percent of the respondents were female and 89 percent reported to be white. Approximately 69 percent of the overall sample fell into the age group of 45-64 years of age.

Approximately 85 percent of the gerontological nurse practitioners respondents indicated that they held a Masters in Nursing as one of their highest degree. Three (3) percent of the respondents had doctorate degrees in Nursing Research (Ph.D., DNS, DNS). Approximately two (2) percent indicated they held a Doctorate of Nursing Practice. Approximately eight (8) percent of the respondents indicated they held a degree other than what was listed as their highest level of education. A majority of the individuals specifying other indicated that a post-masters nurse practitioner certification was the highest degree they held.

The average number of years of experience the gerontological nurse practitioner respondents had an RN was nearly 22 years. The respondents also reported on average 11 years of experience as a nurse practitioner.

Practice Settings

Approximately 38 percent of the gerontological nurse practitioner respondents indicated that they practiced in cities with populations between 50,000 and 249,999. Metropolitan areas with a population between 250,000 – 999,999 had the second highest percent of respondents (23 percent). Only two (2) percent of the respondents indicated working in a rural (population less than 2,500) practice location.

In terms of practice setting, the highest percentage of gerontological nurse practitioner respondents indicating they practice in a nursing home/long term care facility (44 percent). Twenty-one (21) percent indicated that they worked in a private group practice.

The gerontological nurse practitioners respondents also reported on average 71 percent of their time was spent providing direct patient care and approximately 67 percent of their time was providing care for acute and chronic illnesses. The gerontological nurse practitioners also indicated that approximately 72 percent of their time was spent in caring for aging adults (ages over 65 years) and 28 percent with adults (ages 18 to 65 years). When asked how many hours per week on average they spent in direct patient care, 60 percent of the gerontological nurse practitioner reported spending between 30 and 49 hours per week.

Finally, overall 92 percent of the gerontological nurse practitioners indicated that they have privileges to prescribe medication in their current practice. Eighty-five (85) percent indicated that they are required to have a physician collaborator or supervisor in their practice setting, and one third (33%) reported having hospital privileges.

Practice Descriptions

Descriptive statistics (means, standard deviations, and medians) for the three ratings of all 128 work activities—performance expectation, consequence, and frequency—and mean 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 0.973, 0.985, and 0.978, 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, 92 work activity statements were rated by the gerontological nurse practitioner respondents as highly critical (with a mean overall criticality rank of 22 or above). More than 75 percent of the work activities from the following domains were classified as highly critical: Assessment of Health Status, Diagnosis of Health Status, and Plan of Care and Treatment Implementation. Of note is that every work activity listed under Diagnosis of Health Status was classified as highly critical. Approximately half of the work activities under Professional Roles had a mean overall rank of 22 or greater. Finally, only one work activity listed under Teaching and Coaching (work activity no. 124: Educate patient and/or family regarding plan of care...) fell into this category.

Table 5. Number of Work Activities by Mean Overall Criticality Range and Population for Gerontological Nurse Practitioners

	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	18	74	27	6	3	0	92

Table 6 and 7 displays the 20 highest-ranking and the 20 lowest-ranking work activities by mean overall criticality respectively. The grey shading in Table 6 indicates the 18 work activities that received criticality ratings of 27 and above. These work activities fell across the domains of Assessment of Health Status, Diagnosis of Health Status, Plan of Care and Treatment Implementation, and Professional Role. No work activity listed under Teaching and Coaching received a criticality rating of 27 or above.

The three (3) lowest ranked work activities that received criticality rankings of 11 or less are highlighted in Table 7. These are work activities nos. 128, 116, and 127 with mean overall criticality rankings of 8.35, 9.36, 9.58, respectively. These activities focused on providing education to the community/groups and health care professionals and participating in clinical and/or evaluation research.

Table 6. Top 20 Work Activities Ranked by Mean Overall Criticality for Gerontological Nurse Practitioners

Work Activity Number and Name	Mean Overall Criticality
25 Assess conditions related to the cardiovascular system.	28.96
51 Determine life-threatening illness and/or unstable conditions.	28.85
24 Assess conditions related to the respiratory system.	28.82
47 Identify normal and abnormal findings in history and physical examination.	28.28
111 Maintain patient confidentiality according to current guidelines (e.g., HIPAA)	28.24
107 Document assessment and physical findings.	28.19
56 Prescribe medications considering interactions, effects (therapeutic, side, adverse), patient characteristics, diagnoses, cost and/or accessibility.	28.18
112 Identify and refer patient conditions beyond the individual NP's clinical expertise.	28.17
14 Assess patient and family knowledge and use of prescription and over-the-counter medications.	28.14
108 Document diagnoses and plan of care	27.82
3 Collect data according to the patient's immediate condition or needs.	27.72
40 Assess conditions related to nutrition/hydration.	27.7
113 Identify and refer patient conditions beyond the individual NP's legal scope of practice	27.6
39 Assess conditions related to acute and/or chronic pain.	27.45
44 Perform problem-focused or interval physical examination.	27.35
64 Manage conditions related to the respiratory system.	27.33
26 Assess conditions related to the gastrointestinal system.	27.24
65 Manage conditions related to the cardiovascular system.	27
95 Evaluate effectiveness of pharmacologic regimen, considering polypharmacy, and modify treatment plan as appropriate.	26.88
29 Assess conditions related to the neurological system.	26.87

Table 7. Bottom 20 Work Activities Ranked by Mean Overall Criticality for Gerontological Nurse Practitioners

Work Activity Number and Name	Mean Overall Criticality
18 Assess genetic/familial health risks	19.07
19 Assess occupational health risks	19.06
43 Assess sexual and/or reproductive health	18.13
123 Develop comprehensive education plans for patients and/or families that consider health literacy and learning barriers and facilitators.	18.03
37 Assess conditions related to developmental delays/impairments.	17.82
77 Manage conditions related to developmental delays/impairments.	17.63
114 Engage in continuous quality improvement activities	17.63
120 Incorporate informatics into clinical practice	17.63
99 Formulate plan of care based on emerging trends in health care	17.62
13 Assess patient and family knowledge and use of complementary/alternative therapies.	17.6
38 Assess conditions related to learning disabilities.	17.35
115 Advocate to improve patient access to quality, cost-effective health care.	16.72
85 Formulate plan of care that incorporate principles of epidemiology	16.63
81 Manage conditions affecting sexual and reproductive health	16.4
106 Perform primary care procedures including but not limited to suturing, minor lesion removal, microscopy, pap test	15.15
89 Recommend complementary and/or alternative therapies.	15.05
118 Evaluate the impact of regulations and legislation on advanced nursing practice and advocate for changes when appropriate.	13.76

Work Activity Number and Name		Mean Overall Criticality
127	Provide community/group education	9.58
116	Participate in clinical and/or evaluation research.	9.36
128	Provide educational offerings to health care professionals	8.35

Appendix A
Work Activities Statements

Work Activity No. and Statement

Assessment of Health Status

- 1 Obtain a comprehensive patient history
- 2 Obtain a problem-focused or interval history
- 3 Collect data according to the patient's immediate condition or needs
- 4 Assess patient and family knowledge and behavior regarding nutrition/hydration
- 5 Assess family communication and decision-making
- 6 Assess patient and family support systems
- 7 Assess patient and family perception of health and health risk factors
- 8 Assess patient and family risk for violence, abuse, and neglect
- 9 Assess patient and family unintentional injury risk
- 10 Assess patient and family psychosocial risks and needs
- 11 Assess patient and family cultural and spiritual beliefs/values that influence health care
- 12 Assess patient and family health risks and needs based on developmental/life stage
- 13 Assess patient and family knowledge and use of complementary/alternative therapies
- 14 Assess patient and family knowledge and use of prescription and over-the-counter medications
- 15 Assess patient and family health risks based on lifestyle, health habits, substance use/abuse, and sexual practices
- 16 Assess health risks based on past medical history
- 17 Assess health risks based on socioeconomic factors
- 18 Assess genetic/familial health risks
- 19 Assess occupational health risks
- 20 Assess health risks based on immunization status
- 21 Assess interaction between the physical environment and patient health status
- 22 Assess interaction between the community and patient health status
- 23 Assess conditions related to the head, eyes, ears, nose, and throat
- 24 Assess conditions related to the respiratory system
- 25 Assess conditions related to the cardiovascular system
- 26 Assess conditions related to the gastrointestinal system
- 27 Assess conditions related to the genitourinary system
- 28 Assess conditions related to the musculoskeletal system
- 29 Assess conditions related to the neurological system
- 30 Assess conditions related to the endocrine system (including metabolic disorders)
- 31 Assess conditions related to the hematopoietic system
- 32 Assess conditions related to the immune system
- 33 Assess conditions related to the integumentary system
- 34 Assess conditions related to the lymphatic system
- 35 Assess conditions related to infectious/communicable diseases
- 36 Assess conditions related to physical function and mobility
- 37 Assess conditions related to developmental delays/impairments
- 38 Assess conditions related to learning disabilities
- 39 Assess conditions related to acute and/or chronic pain
- 40 Assess conditions related to nutrition/hydration
- 41 Assess conditions related to mental health

Work Activity No. and Statement

- 42 Assess cognitive status and decision-making capacity
- 43 Assess sexual and/or reproductive health
- 44 Perform problem-focused or interval physical examination
- 45 Perform comprehensive physical examination
- 46 Select and/or perform physical, psychosocial, or developmental screening tests that are appropriate to condition or needs based on clinical guidelines, risks, costs and benefits

Diagnosis of Health Status

- 47 Identify normal and abnormal findings in history and physical examination
- 48 Identify age-related findings in history and physical examination
- 49 Select and/or perform diagnostic tests that are appropriate to condition or needs based on clinical guidelines, risks, costs and benefits
- 50 Identify any interactions among diet, medications, substance use and/or complementary/alternative therapies
- 51 Determine life-threatening illness and/or unstable conditions
- 52 Develop a comprehensive problem list based on assessment findings
- 53 Use diagnostic reasoning to establish and prioritize differential diagnoses
- 54 Interpret laboratory and other diagnostic data based on physiologic and pathologic conditions

Plan of Care and Treatment Implementation

- 55 Engage in consultation, referral and/or collaboration with other health professionals and community resources
- 56 Prescribe medications considering interactions, effects (therapeutic, side, adverse), patient characteristics, diagnoses, cost and/or accessibility
- 57 Prescribe medications considering absorption, distribution, metabolism and excretion
- 58 Prescribe non-pharmacologic interventions and/or medical equipment considering risks and benefits, patient characteristics, diagnoses, cost and/or accessibility
- 59 Prioritize interventions based on severity and complexity of health problems
- 60 Determine treatment decisions considering comorbidities
- 61 Incorporate existing support system into treatment plan
- 62 Plan follow-up care at designated intervals based on condition and/or clinical guidelines
- 63 Manage conditions related to the head, eyes, ears, nose, and throat
- 64 Manage conditions related to the respiratory system
- 65 Manage conditions related to the cardiovascular system
- 66 Manage conditions related to the gastrointestinal system
- 67 Manage conditions related to the genitourinary system
- 68 Manage conditions related to the musculoskeletal system
- 69 Manage conditions related to the neurological system
- 70 Manage conditions related to the endocrine system (including metabolic disorders)
- 71 Manage conditions related to the hematopoietic system
- 72 Manage conditions related to the immune system
- 73 Manage conditions related to the integumentary system
- 74 Manage conditions related to the lymphatic system
- 75 Manage conditions related to infectious/communicable diseases
- 76 Manage conditions related to physical function and mobility
- 77 Manage conditions related to developmental delays/impairments

Work Activity No. and Statement

- 78 Manage conditions related to acute and/or chronic pain
- 79 Manage conditions related to nutrition/hydration
- 80 Manage conditions related to mental health
- 81 Manage conditions affecting sexual and reproductive health
- 82 Manage comorbidities
- 83 Manage psychosocial concerns
- 84 Formulate plan of care that consider the pathophysiology of acute and chronic conditions
- 85 Formulate plan of care that incorporate principles of epidemiology
- 86 Select interventions based on clinical practice standards, evidence-based guidelines, and ethical/legal principles
- 87 Treat acute and/or chronic conditions using current technological interventions
- 88 Immunize based on current recommendations
- 89 Recommend complementary and/or alternative therapies
- 90 Make referrals to support services and resources to reduce caregiver stress
- 91 Activate protective services in cases of suspected abuse and neglect
- 92 Coordinate care (including multiple specialty follow-up and treatment plans) for patients with complex conditions
- 93 Evaluate patient progress in health promotion/disease prevention activities
- 94 Evaluate diagnostic findings and modify treatment plans accordingly
- 95 Evaluate effectiveness of pharmacologic regimen, considering polypharmacy, and modify treatment plan as appropriate
- 96 Evaluate effectiveness of nonpharmacologic interventions and modify treatment plan as appropriate
- 97 Evaluate adherence to treatment plan and modify as appropriate
- 98 Evaluate the impact of diagnosis and treatment on patient and family
- 99 Formulate plan of care based on emerging trends in health care
- 100 Provide palliative care interventions
- 101 Collaborate with patient and family to determine plan of care including health care goals
- 102 Provide non-biased counseling to obtain informed consent/assent
- 103 Provide non-biased counseling regarding advance directives
- 104 Provide for patient safety within scope of legal and professional guidelines
- 105 Provide transitional care and information exchange between inpatient, outpatient, and community care settings
- 106 Perform primary care procedures including but not limited to suturing, minor lesion removal, microscopy, pap test

Professional Role

- 107 Document assessment and physical findings
- 108 Document diagnoses and plan of care
- 109 Negotiate care considering patient's/proxy's right to choose/refuse treatment options
- 110 Incorporate patient/family culture, values, health beliefs and behaviors into clinical practice
- 111 Maintain patient confidentiality according to current guidelines (e.g., HIPAA)
- 112 Identify and refer patient conditions beyond the individual NP's clinical expertise
- 113 Identify and refer patient conditions beyond the individual NP's legal scope of practice
- 114 Engage in continuous quality improvement activities
- 115 Advocate to improve patient access to quality, cost-effective health care.

Appendix A– Work Activities Statements

2008 Role Delineation Study: Gerontological Nurse Practitioner –National Survey Results

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Work Activity No. and Statement

- 116 Participate in clinical and/or evaluation research.
- 117 Participate in personal professional development activities
- 118 Evaluate the impact of regulations and legislation on advanced nursing practice and advocate for changes when appropriate.
- 119 Incorporate current evidence-based findings into clinical practice.
- 120 Incorporate informatics into clinical practice
- 121 Address legal/ethical dilemmas in clinical practice
- 122 Document in accordance with current regulatory processes and payer systems

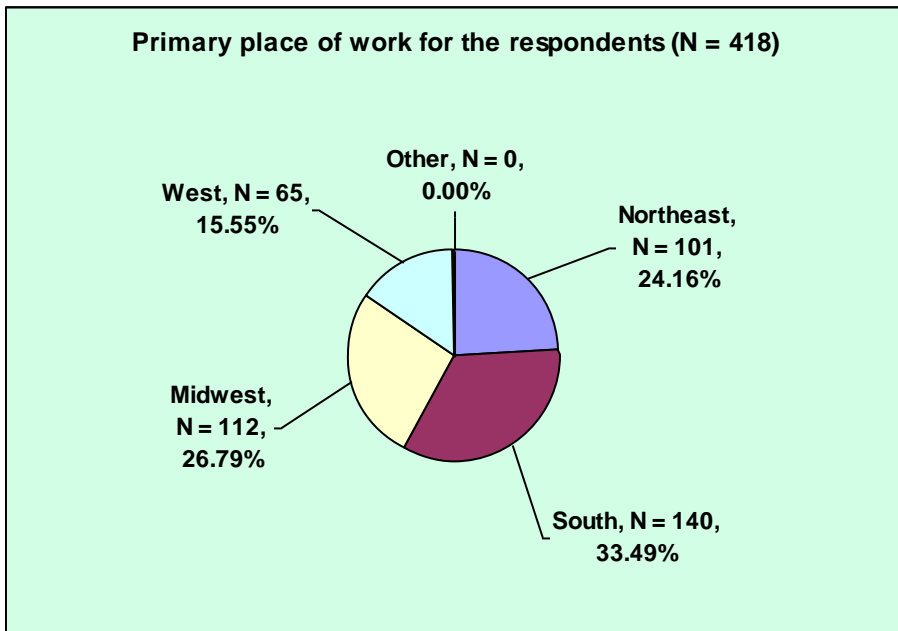
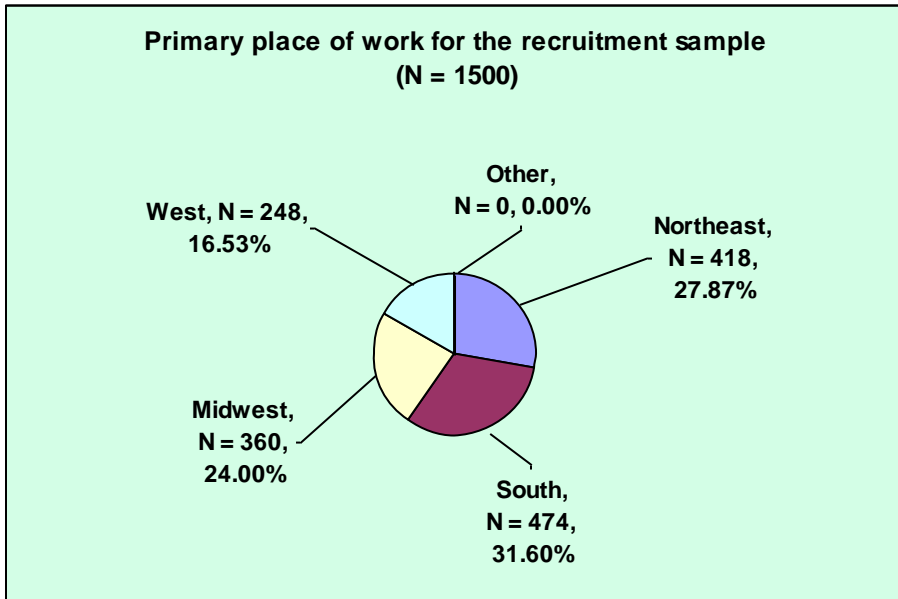
Teaching and Coaching

- 123 Develop comprehensive education plans for patients and/or families that consider health literacy and learning barriers and facilitators
- 124 Educate patient and/or family regarding plan of care including testing, diagnosis, treatments and/or implications
- 125 Provide anticipatory guidance for patient and/or family
- 126 Counsel patient and/or family through grief, dying, and death
- 127 Provide community/group education
- 128 Provide educational offerings to health care professionals

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Appendix B Demographic Data Summary

1. Primary place of work



2. What is your gender?

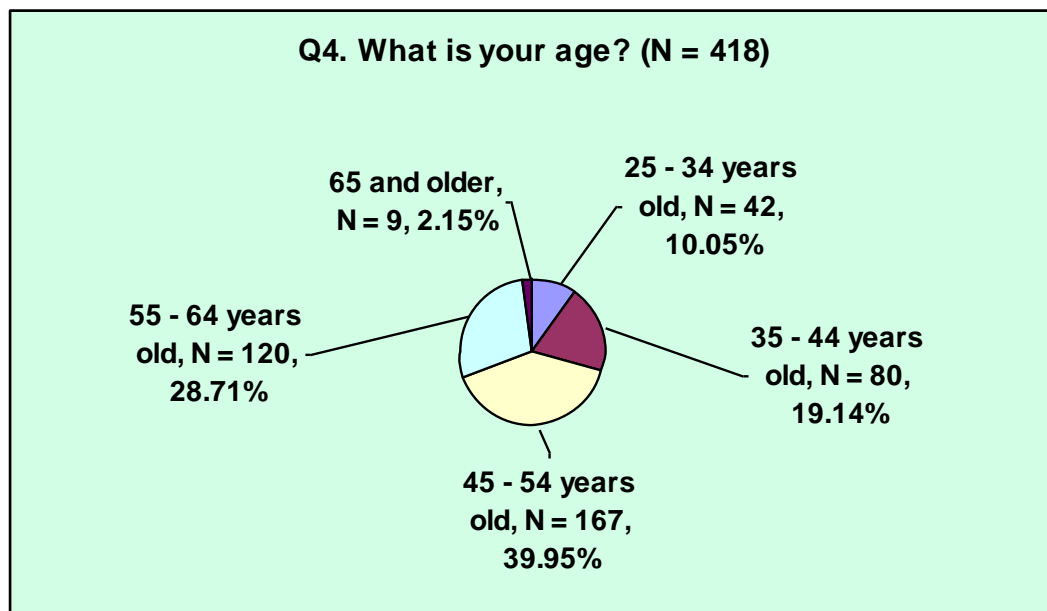
	Count	Percent
Female	403	96.64%
Male	14	3.36%
Total	417	100.00%
(Missing	1)	

3. What is your race/Hispanic origin background?

	Count	Percent
White Alone, Not Hispanic or Latino	371	89.18%
Black or African American Alone	14	3.37%
American Indian and Alaska Native Alone	1	0.24%
Asian Alone	21	5.05%
Native Hawaiian and other Pacific Islander Alone	2	0.48%
Two or More Races	5	1.20%
Hispanic or Latino (Any Race)	2	0.48%
Total	416	100.00%
(Missing	2)	

4. What is your age?

	Count	Percent
25 - 34 years old	42	10.05%
35 - 44 years old	80	19.14%
45 - 54 years old	167	39.95%
55 - 64 years old	120	28.71%
65 and older	9	2.15%
Total	418	100.00%



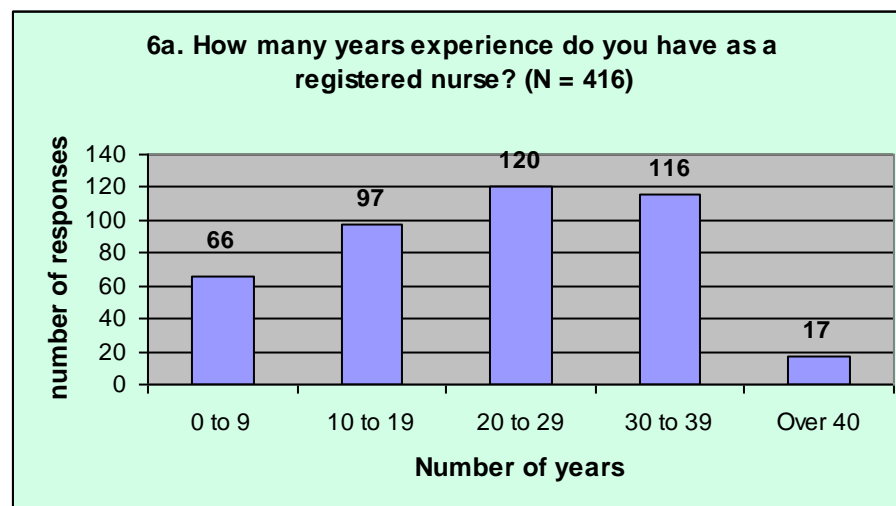
5. Indicate the highest educational level you have completed:

	Count	Percent
Masters in Nursing	353	85.06%
Masters in field other than Nursing	34	8.19%
Doctorate in Nursing Research (e.g., Ph.D., DNS, DSN)	13	3.13%
Doctorate in Nursing Practice (DNP)	9	2.17%
Doctorate in field other than Nursing	11	2.65%
Other	32	7.71%
Total	415	100.00%
(Missing	3)	

*The percentage is computed using "Total = 418," however the total count is larger than 418, as this question asks the respondents to choose all that apply

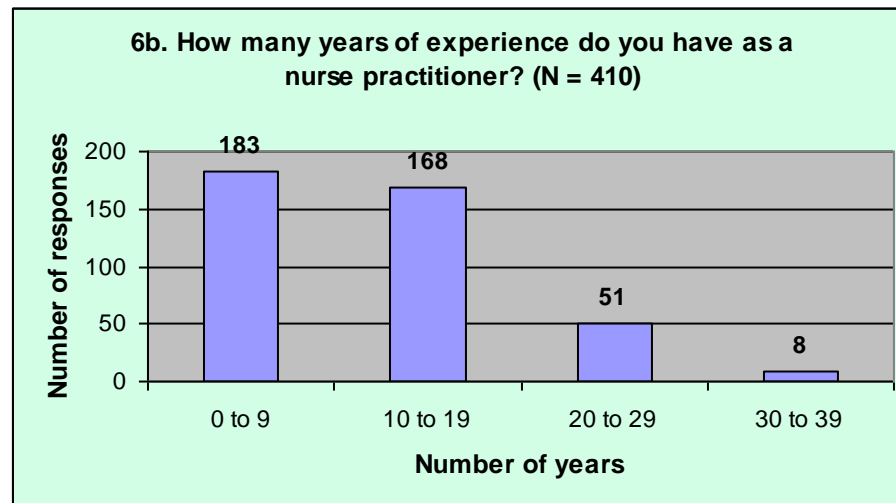
6a. How many years of experience do you have as a registered nurse?

Number of Years	Count	Percent
0 to 9	66	15.87%
10 to 19	97	23.32%
20 to 29	120	28.85%
30 to 39	116	27.88%
Over 40	17	4.09%
Total	416	100.00%
(Missing	2)	



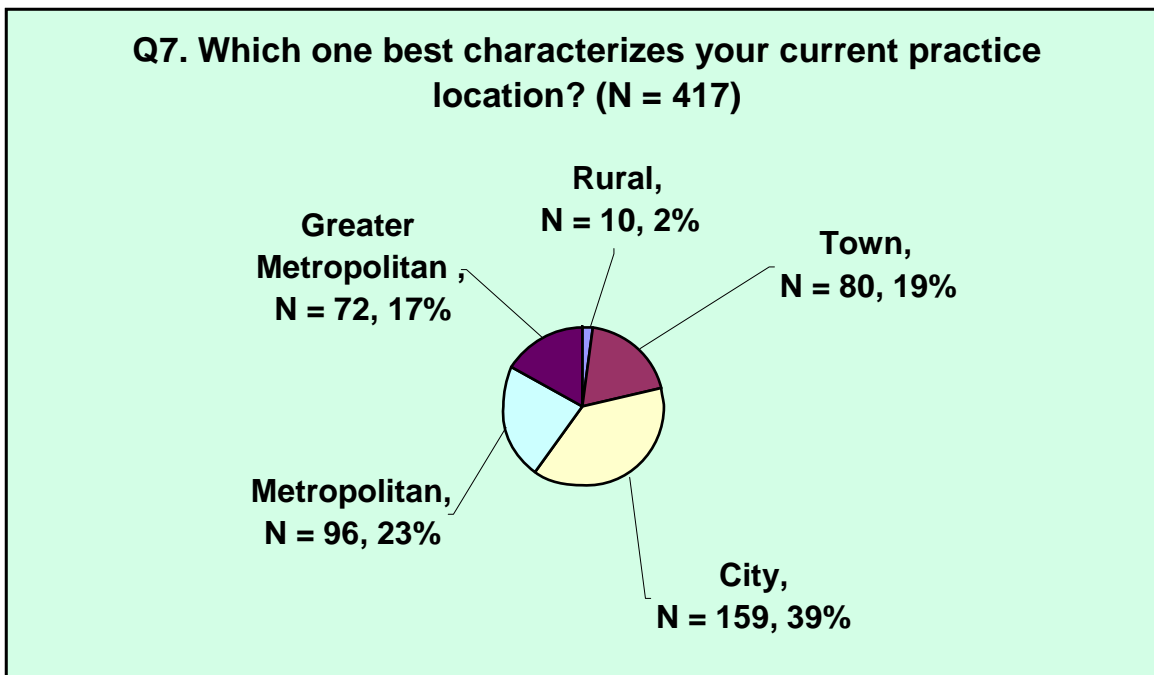
6b. How many years of experience do you have as a nurse practitioner?

Number of Years	Count	Percent
0 to 9	183	44.63%
10 to 19	168	40.98%
20 to 29	51	12.44%
30 to 39	8	1.95%
Total	410	100.00%
(Missing	8)	



7. Which one of the following best characterizes your current clinical practice location? (Mark only one)

	Count	Percent
Rural (population less than 2,500)	10	2.40%
Town (population between 2,500 - 49,999)	80	19.18%
City (population between 50,000 - 249,999)	159	38.13%
Metropolitan (population between 250,000 - 999,999)	96	23.02%
Greater Metropolitan (population greater than 999,999)	72	17.27%
Total	417	100.00%
(Missing)	1)	



8. The percentage of time (during an average week) that you provide health care for patients in each of the age group

	Infant (birth to 2 years)		Child (3 to 12 years)		Adolescent (13 to 17 years)		Adult (18 to 65 years)		Aging Adult (over 65 years)	
	Count	Percent	Count	Percent	Count	Percent	Count	Percent	Count	Percent
Less than 20%	311	100.00%	311	99.36%	310	98.10%	179	46.02%	23	5.50%
21% to 40%	0	0.00%	1	0.32%	6	1.90%	105	26.99%	41	9.81%
41% to 60%	0	0.00%	0	0.00%	0	0.00%	70	17.99%	74	17.70%
61% to 80%	0	0.00%	0	0.00%	0	0.00%	25	6.43%	100	23.92%
81% to 100%	0	0.00%	1	0.32%	0	0.00%	10	2.57%	180	43.06%
Valid Responses	311	100.00%	313	100.00%	316	100.00%	389	100.00%	418	100.00%
Missing	107		105		102		29		0	
	Infant (birth to 2 years)		Child (3 to 12 years)		Adolescent (13 to 17 years)		Adult (18 to 65 years)		Aging Adult (over 65 years)	
Mean percent spent with each age group	0.30%		0.09%		1.50%		27.93%		71.94%	

9. The percentage of time (during an average week) that you provide patients with

	Health maintenance		Maternity care		Acute illness care		Chronic illness care		End-of-life care	
	Count	Percent	Count	Percent	Count	Percent	Count	Percent	Count	Percent
Less than 20%	319	79.55%	354	100.00%	213	52.72%	66	16.10%	358	90.40%
21% to 40%	69	17.21%	0	0.00%	135	33.42%	160	39.02%	24	6.06%
41% to 60%	10	2.49%	0	0.00%	41	10.15%	124	30.24%	7	1.77%
61% to 80%	3	0.75%	0	0.00%	11	2.72%	47	11.46%	6	1.52%
81% to 100%	0	0.00%	0	0.00%	4	0.99%	13	3.17%	1	0.25%
Valid Responses	401	100.00%	354	100.00%	404	100.00%	410	100.00%	396	100.00%
Missing	17		64		14		8		22	
	Health maintenance		Maternity care		Acute illness care		Chronic illness care		End-of-life care	
Mean percent spent with each age group	14.67%		1.30%		25.00%		41.90%		9.20%	

(Continue on the next page)

9. The percentage of time (during an average week) that you provide patients with (continue)

	Mental health care		Other	
	Count	Percent	Count	Percent
Less than 20%	347	91.80%	163	93.14%
21% to 40%	18	4.76%	4	2.29%
41% to 60%	2	0.53%	2	1.14%
61% to 80%	5	1.32%	2	1.14%
81% to 100%	6	1.59%	4	2.29%
Valid Responses	378	100.00%	175	100.00%
Missing	40		243	
	Mental health care		Other	
Mean percent spent with each age group	10.88%		5.89%	

10. Which of the following describes your practice setting? (Mark all that apply)

	Count	Percent
Nursing home/long-term care	184	44.02%
Private group practice	90	21.53%
Hospital, inpatient	65	15.55%
Hospital, outpatient	61	14.59%
VA/Armed forces	53	12.68%
Managed care (HMO, Blue Cross/Blue Shield)	27	6.46%
Home Health Care	26	6.22%
Community/Public Health (city/county/state/federal agency)	25	5.98%
Independent nurse practitioner practice	20	4.78%
School/College of nursing	17	4.07%
Hospice facility	14	3.35%
Rural health clinic	13	3.11%
Occupational Health	5	1.20%
Medical school	3	0.72%
Retail based clinic	3	0.72%
School or college health	1	0.24%
Other	52	12.44%

*The percentage is computed using "Total = 418," however, the total count is larger than 418, as this question asks the respondents to choose all that apply

11. On average, how many hours per week do you spend in direct patient care?

Number of Hours	Count	Percent
0 to 9	20	5.01%
10 to 19	45	11.28%
20 to 29	64	16.04%
30 to 39	136	34.09%
40 to 49	102	25.56%
50 to 59	23	5.76%
Over 60	9	2.26%
Total	399	100.00%
(Missing	19)	

12. The percentage of an average week spent in each of the following activities

	Direct patient care		Management, supervision, and administration		Teaching		Research		Consultation		Other	
	Count	Percent	Count	Percent	Count	Percent	Count	Percent	Count	Percent	Count	Percent
Less than 20%	41	10.02%	277	83.43%	292	88.48%	272	95.44%	285	90.19%	141	88.13%
21% to 40%	27	6.60%	35	10.54%	21	6.36%	9	3.16%	10	3.16%	12	7.50%
41% to 60%	57	13.94%	9	2.71%	9	2.73%	1	0.35%	13	4.11%	4	2.50%
61% to 80%	115	28.12%	9	2.71%	7	2.12%	3	1.05%	1	0.32%	1	0.63%
81% to 100%	169	41.32%	2	0.60%	1	0.30%	0	0.00%	7	2.22%	2	1.25%
Valid Responses	409	100.00%	332	100.00%	330	100.00%	285	100.00%	316	100.00%	160	100.00%
Missing	9		86		88		133		102		258	
Mean percent spent with each age group		71.05%		11.71%		10.58%		3.53%		10.37%		6.73%

13. Do you have privileges to prescribe medications in your current practice setting?

	Count	Percent
Yes	384	91.87%
No	34	8.13%
Total	418	100.00%

14. Are you required to have a physician collaborator/supervisor?

	Count	Percent
Yes	355	84.93%
No	59	14.11%
Total	418	100.00%
(Missing	4)	

15. Do you have hospital privileges in your current practice setting?

	Count	Percent
Yes	139	33.25%
No	279	66.75%
Total	418	100.00%

16. Do you: (Mark all that apply)

	Count	Percent
Admit patients to the hospital	64	15.31%
Manage patients during hospitalization	85	20.33%
Discharge patients from the hospital	52	12.44%

Appendix C

Work Activities Descriptive Statistics

Gerontological Nurse Practitioner Survey Order

		Performance Expectation				Consequence				Frequency			Overall Rank			
		N	Mean	Std Dev	Median	N	Mean	Std Dev	Median	N	Mean	Std Dev	Median	N	Mean	Std Dev
1	Obtain a comprehensive patient history	418	1.97	0.2	2	418	1.12	0.65	1	418	3.35	0.63	3	418	25.54	4.36
2	Obtain a problem-focused or interval history	418	1.99	0.12	2	418	1.25	0.62	1	418	3.61	0.5	4	418	26.66	3.65
3	Collect data according to the patient's immediate condition or needs	418	1.98	0.13	2	418	1.44	0.63	2	418	3.75	0.44	4	418	27.72	3.84
4	Assess patient and family knowledge and behavior regarding nutrition/hydration	418	1.94	0.26	2	418	1.1	0.65	1	418	3.19	0.71	3	418	24.82	5.23
5	Assess family communication and decision-making	418	1.93	0.27	2	418	1.19	0.62	1	417	3.56	0.6	4	417	25.44	5.47
6	Assess patient and family support systems	418	1.89	0.32	2	418	0.89	0.58	1	418	3.23	0.69	3	418	23.04	5.97
7	Assess patient and family perception of health and health risk factors	418	1.89	0.33	2	418	0.85	0.62	1	418	3.22	0.72	3	418	22.87	6.08
8	Assess patient and family risk for violence, abuse, and neglect	418	1.89	0.33	2	418	1.55	0.61	2	418	3.17	0.92	3	418	26.43	6.2
9	Assess patient and family unintentional injury risk	418	1.88	0.35	2	418	1.28	0.64	1	418	3.1	0.9	3	418	24.77	6.81
10	Assess patient and family psychosocial risks and needs	418	1.86	0.36	2	418	1.01	0.58	1	418	3.25	0.75	3	418	23.35	6.29

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

**Gerontological Nurse Practitioner
Survey Order**

		Performance Expectation				N	Consequence				N	Frequency			Overall Rank		
		N	Mean	Std Dev	Median		N	Mean	Std Dev	Median		N	Mean	Std Dev	Median	N	Mean
11	Assess patient and family cultural and spiritual beliefs/values that influence health care	418	1.8	0.45	2	418	0.76	0.6	1	418	2.84	0.94	3	418	20.87	7.3	
12	Assess patient and family health risks and needs based on developmental/life stage	418	1.83	0.44	2	418	0.82	0.61	1	418	3.05	0.9	3	418	21.9	7.21	
13	Assess patient and family knowledge and use of complementary/alternative therapies	418	1.59	0.55	2	418	0.77	0.65	1	418	2.59	0.93	3	418	17.6	9.3	
14	Assess patient and family knowledge and use of prescription and over-the-counter medications	417	1.96	0.21	2	417	1.6	0.57	2	417	3.72	0.54	4	417	28.14	4.48	
15	Assess patient and family health risks based on lifestyle, health habits, substance use/abuse, and sexual practices	415	1.87	0.36	2	416	1.14	0.6	1	416	3.18	0.84	3	415	23.96	6.61	
16	Assess health risks based on past medical history	418	1.93	0.25	2	418	1.21	0.58	1	418	3.52	0.58	4	418	25.57	5.1	
17	Assess health risks based on socioeconomic factors	418	1.82	0.4	2	418	0.91	0.53	1	418	3.06	0.83	3	418	21.96	6.87	
18	Assess genetic/familial health risks	418	1.67	0.59	2	418	0.72	0.59	1	418	2.58	1.08	3	418	19.07	8.76	
19	Assess occupational health risks	418	1.7	0.57	2	417	0.69	0.6	1	415	2.39	1.09	2	416	19.06	8.63	
20	Assess health risks based on immunization status	418	1.92	0.31	2	418	0.94	0.63	1	418	3.07	0.9	3	418	23.73	6	

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

Gerontological Nurse Practitioner Survey Order

		Performance Expectation				N	Consequence				N	Frequency			Overall Rank		
		N	Mean	Std Dev	Median		N	Mean	Std Dev	Median		N	Mean	Std Dev	Median	N	Mean
21	Assess interaction between the physical environment and patient health status	417	1.84	0.39	2	417	1	0.59	1	417	3.09	0.84	3	417	22.78	7.03	
22	Assess interaction between the community and patient health status	418	1.71	0.48	2	418	0.73	0.58	1	418	2.67	0.95	3	418	19.18	8.21	
23	Assess conditions related to the head, eyes, ears, nose, and throat	418	1.96	0.22	2	418	1.19	0.57	1	418	3.28	0.66	3	418	25.7	4.48	
24	Assess conditions related to the respiratory system	418	1.99	0.12	2	418	1.67	0.51	2	418	3.71	0.49	4	418	28.82	3.23	
25	Assess conditions related to the cardiovascular system	418	1.98	0.15	2	418	1.71	0.49	2	418	3.72	0.48	4	418	28.96	3.45	
26	Assess conditions related to the gastrointestinal system	418	1.97	0.16	2	418	1.43	0.56	1	418	3.48	0.58	4	418	27.24	3.86	
27	Assess conditions related to the genitourinary system	418	1.95	0.22	2	418	1.31	0.56	1	418	3.32	0.64	3	418	26.23	4.61	
28	Assess conditions related to the musculoskeletal system	418	1.95	0.22	2	418	1.23	0.55	1	418	3.37	0.57	3	418	25.86	4.46	
29	Assess conditions related to the neurological system	418	1.94	0.25	2	418	1.49	0.55	2	418	3.38	0.69	3	418	26.87	4.98	
30	Assess conditions related to the endocrine system (including metabolic disorders)	418	1.92	0.28	2	418	1.44	0.55	1	418	3.26	0.64	3	418	26.36	5.52	
31	Assess conditions related to the hematopoietic system	418	1.82	0.41	2	418	1.36	0.54	1	418	3	0.78	3	418	24.19	7.08	

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

**Gerontological Nurse Practitioner
Survey Order**

		Performance Expectation				N	Consequence				N	Frequency			Overall Rank		
		N	Mean	Std Dev	Median		N	Mean	Std Dev	Median		N	Mean	Std Dev	Median	N	Mean
32	Assess conditions related to the immune system	418	1.79	0.43	2	418	1.23	0.56	1	418	2.83	0.89	3	418	23	7.51	
33	Assess conditions related to the integumentary system	418	1.94	0.24	2	418	1.2	0.59	1	418	3.41	0.66	3	418	25.57	4.95	
34	Assess conditions related to the lymphatic system	418	1.8	0.44	2	418	1.1	0.6	1	418	2.8	0.88	3	418	22.44	7.5	
35	Assess conditions related to infectious/communicable diseases	418	1.92	0.29	2	418	1.45	0.57	1	418	3.15	0.78	3	418	26.25	5.54	
36	Assess conditions related to physical function and mobility	418	1.97	0.17	2	418	1.31	0.56	1	418	3.6	0.56	4	418	26.67	3.99	
37	Assess conditions related to developmental delays/impairments	418	1.52	0.74	2	417	0.78	0.66	1	418	2.19	1.36	2	418	17.82	10.34	
38	Assess conditions related to learning disabilities	417	1.5	0.75	2	416	0.76	0.67	1	417	2.09	1.28	2	417	17.35	10.35	
39	Assess conditions related to acute and/or chronic pain	418	1.98	0.15	2	418	1.43	0.56	1	418	3.64	0.52	4	418	27.45	3.71	
40	Assess conditions related to nutrition/hydration	418	1.97	0.17	2	418	1.52	0.54	2	418	3.53	0.6	4	418	27.7	4.07	
41	Assess conditions related to mental health	418	1.91	0.3	2	418	1.36	0.56	1	418	3.38	0.68	3	418	25.87	5.72	
42	Assess cognitive status and decision-making capacity	418	1.88	0.34	2	418	1.43	0.57	1	418	3.38	0.71	3	418	25.68	6.39	
43	Assess sexual and/or reproductive health	418	1.67	0.55	2	418	0.66	0.6	1	418	2.18	0.96	2	418	18.13	8.5	

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

**Gerontological Nurse Practitioner
Survey Order**

		Performance Expectation				N	Consequence				N	Frequency			Overall Rank		
		N	Mean	Std Dev	Med-ian		N	Mean	Std Dev	Med-ian		N	Mean	Std Dev	Med-ian	N	Mean
44	Perform problem-focused or interval physical examination	418	1.97	0.18	2	418	1.46	0.56	1	418	3.56	0.53	4	418	27.35	4.22	
45	Perform comprehensive physical examination	418	1.94	0.26	2	417	1.35	0.57	1	417	3.13	0.73	3	416	25.94	5.12	
46	Select and/or perform physical, psychosocial, or developmental screening tests that are appropriate to condition or needs based on clinical guidelines, risks, costs and benefits	418	1.69	0.5	2	418	1.07	0.59	1	418	2.78	0.9	3	418	20.73	8.5	
47	Identify normal and abnormal findings in history and physical examination	418	1.96	0.2	2	417	1.64	0.5	2	418	3.73	0.47	4	417	28.28	4.29	
48	Identify age-related findings in history and physical examination	418	1.91	0.28	2	418	1.08	0.62	1	418	3.57	0.57	4	418	24.7	5.46	
49	Select and/or perform diagnostic tests that are appropriate to condition or needs based on clinical guidelines, risks, costs and benefits	418	1.81	0.39	2	418	1.4	0.58	1	418	3.51	0.58	4	418	24.66	7.12	
50	Identify any interactions among diet, medications, substance use and/or complementary/alternative therapies	418	1.77	0.42	2	418	1.47	0.6	2	418	3.33	0.71	3	416	24.34	7.72	
51	Determine life-threatening illness and/or unstable conditions	418	1.93	0.27	2	418	1.89	0.35	2	418	3.43	0.77	4	418	28.85	4.68	

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

**Gerontological Nurse Practitioner
Survey Order**

		Performance Expectation				N	Consequence				N	Frequency			Overall Rank		
		N	Mean	Std Dev	Med-ian		N	Mean	Std Dev	Med-ian		N	Mean	Std Dev	Med-ian	N	Mean
52	Develop a comprehensive problem list based on assessment findings	417	1.85	0.35	2	417	1.18	0.65	1	417	3.5	0.6	4	417	24.18	6.61	
53	Use diagnostic reasoning to establish and prioritize differential diagnoses	418	1.82	0.39	2	417	1.38	0.59	1	418	3.6	0.54	4	417	24.79	7.05	
54	Interpret laboratory and other diagnostic data based on physiologic and pathologic conditions	418	1.83	0.38	2	418	1.62	0.51	2	417	3.56	0.53	4	417	26.1	6.6	
55	Engage in consultation, referral and/or collaboration with other health professionals and community resources	418	1.84	0.37	2	418	1.14	0.59	1	418	3.14	0.66	3	418	23.49	6.78	
56	Prescribe medications considering interactions, effects (therapeutic, side, adverse), patient characteristics, diagnoses, cost and/or accessibility	418	1.92	0.28	2	418	1.76	0.46	2	418	3.63	0.53	4	418	28.18	4.92	
57	Prescribe medications considering absorption, distribution, metabolism and excretion	418	1.84	0.37	2	418	1.7	0.5	2	418	3.53	0.62	4	418	26.61	6.42	

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

Gerontological Nurse Practitioner Survey Order

		Performance Expectation				N	Consequence				N	Frequency			Overall Rank		
		N	Mean	Std Dev	Median		N	Mean	Std Dev	Median		N	Mean	Std Dev	Median	N	Mean
58	Prescribe non-pharmacologic interventions and/or medical equipment considering risks and benefits, patient characteristics, diagnoses, cost and/or accessibility	418	1.83	0.39	2	418	1.03	0.57	1	418	3.2	0.73	3	418	22.79	6.71	
59	Prioritize interventions based on severity and complexity of health problems	418	1.8	0.4	2	418	1.34	0.6	1	418	3.53	0.6	4	418	24.29	7.16	
60	Determine treatment decisions considering comorbidities	418	1.82	0.38	2	417	1.44	0.57	1	418	3.57	0.56	4	417	25.11	6.89	
61	Incorporate existing support system into treatment plan	418	1.84	0.37	2	417	0.96	0.57	1	418	3.29	0.66	3	417	22.65	6.93	
62	Plan follow-up care at designated intervals based on condition and/or clinical guidelines	418	1.89	0.31	2	417	1.21	0.6	1	418	3.55	0.6	4	417	24.95	6.12	
63	Manage conditions related to the head, eyes, ears, nose, and throat	418	1.88	0.36	2	418	1.24	0.55	1	418	3.11	0.7	3	418	24.51	6.03	
64	Manage conditions related to the respiratory system	418	1.9	0.31	2	418	1.66	0.51	2	418	3.44	0.6	3	418	27.33	5.46	
65	Manage conditions related to the cardiovascular system	418	1.86	0.37	2	418	1.71	0.48	2	418	3.44	0.65	3	418	27	6.19	

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**Gerontological Nurse Practitioner
Survey Order**

		Performance Expectation				N	Consequence				N	Frequency			Overall Rank		
		N	Mean	Std Dev	Median		N	Mean	Std Dev	Median		N	Mean	Std Dev	Median	N	Mean
66	Manage conditions related to the gastrointestinal system	418	1.9	0.3	2	418	1.41	0.54	1	418	3.29	0.64	3	418	25.92	5.54	
67	Manage conditions related to the genitourinary system	418	1.87	0.37	2	418	1.3	0.55	1	418	3.18	0.7	3	418	24.79	6.35	
68	Manage conditions related to the musculoskeletal system	418	1.86	0.36	2	417	1.23	0.56	1	418	3.22	0.66	3	417	24.38	6.31	
69	Manage conditions related to the neurological system	418	1.81	0.41	2	417	1.51	0.55	2	418	3.13	0.77	3	417	24.81	7.4	
70	Manage conditions related to the endocrine system (including metabolic disorders)	418	1.82	0.4	2	417	1.46	0.53	1	418	3.15	0.68	3	417	24.79	6.89	
71	Manage conditions related to the hematopoietic system	418	1.72	0.49	2	417	1.39	0.53	1	418	2.84	0.89	3	417	22.74	7.96	
72	Manage conditions related to the immune system	418	1.69	0.51	2	417	1.32	0.55	1	418	2.7	0.95	3	417	21.83	8.26	
73	Manage conditions related to the integumentary system	418	1.9	0.33	2	418	1.21	0.6	1	418	3.21	0.73	3	418	24.89	5.89	
74	Manage conditions related to the lymphatic system	418	1.71	0.49	2	417	1.19	0.59	1	418	2.58	0.98	3	417	21.32	8.24	
75	Manage conditions related to infectious/communicable diseases	418	1.88	0.36	2	417	1.49	0.56	2	418	3.02	0.88	3	417	25.84	6.34	
76	Manage conditions related to physical function and mobility	418	1.93	0.26	2	417	1.31	0.56	1	418	3.41	0.64	3	417	25.92	5.06	

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**Gerontological Nurse Practitioner
Survey Order**

		Performance Expectation				N	Consequence				N	Frequency			Overall Rank		
		N	Mean	Std Dev	Median		N	Mean	Std Dev	Median		N	Mean	Std Dev	Median	N	Mean
77	Manage conditions related to developmental delays/impairments	417	1.49	0.74	2	415	0.84	0.69	1	417	2.14	1.28	2	416	17.63	10.31	
78	Manage conditions related to acute and/or chronic pain	418	1.92	0.28	2	417	1.42	0.56	1	418	3.45	0.62	3.5	417	26.36	5.2	
79	Manage conditions related to nutrition/hydration	418	1.94	0.25	2	417	1.47	0.55	2	418	3.37	0.63	3	417	26.76	4.94	
80	Manage conditions related to mental health	418	1.83	0.41	2	417	1.37	0.56	1	418	3.22	0.79	3	417	24.59	7.01	
81	Manage conditions affecting sexual and reproductive health	418	1.53	0.6	2	417	0.74	0.61	1	418	1.98	0.96	2	417	16.4	9.22	
82	Manage comorbidities	418	1.79	0.41	2	417	1.49	0.55	2	418	3.47	0.62	4	417	24.86	7.25	
83	Manage psychosocial concerns	418	1.81	0.4	2	417	1.1	0.54	1	418	3.08	0.73	3	417	22.76	7.02	
84	Formulate plan of care that consider the pathophysiology of acute and chronic conditions	418	1.8	0.4	2	416	1.4	0.57	1	417	3.49	0.62	4	416	24.52	7.52	
85	Formulate plan of care that incorporate principles of epidemiology	418	1.48	0.58	2	415	0.91	0.64	1	417	2.41	1	2	415	16.63	9.57	
86	Select interventions based on clinical practice standards, evidence-based guidelines, and ethical/legal principles	417	1.85	0.37	2	416	1.38	0.59	1	417	3.53	0.66	4	416	25.21	7.07	
87	Treat acute and/or chronic conditions using current technological interventions	417	1.8	0.42	2	416	1.27	0.59	1	417	3.23	0.82	3	416	23.74	7.52	

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**Gerontological Nurse Practitioner
Survey Order**

		Performance Expectation				N	Consequence			N	Frequency			Overall Rank		
		N	Mean	Std Dev	Med-ian		Mean	Std Dev	Med-ian		Mean	Std Dev	Med-ian	N	Mean	Std Dev
88	Immunize based on current recommendations	417	1.93	0.29	2	416	1.2	0.61	1	417	3.31	0.82	4	416	25.27	5.56
89	Recommend complementary and/or alternative therapies	417	1.47	0.58	2	416	0.65	0.61	1	417	2.28	0.84	2	416	15.05	9.22
90	Make referrals to support services and resources to reduce caregiver stress	417	1.78	0.43	2	416	1	0.6	1	417	2.69	0.88	3	416	21.57	7.66
91	Activate protective services in cases of suspected abuse and neglect	417	1.83	0.42	2	416	1.71	0.53	2	417	2.37	1.3	2	416	25.62	7.13
92	Coordinate care (including multiple specialty follow-up and treatment plans) for patients with complex conditions	417	1.62	0.5	2	416	1.38	0.57	1	417	2.95	0.84	3	416	21.25	8.16
93	Evaluate patient progress in health promotion/disease prevention activities	417	1.8	0.44	2	416	0.95	0.56	1	417	2.98	0.86	3	416	21.88	7.37
94	Evaluate diagnostic findings and modify treatment plans accordingly	417	1.85	0.36	2	416	1.48	0.55	2	417	3.51	0.57	4	416	25.68	6.48
95	Evaluate effectiveness of pharmacologic regimen, considering polypharmacy, and modify treatment plan as appropriate	417	1.87	0.34	2	416	1.65	0.5	2	417	3.65	0.53	4	416	26.88	6.12
96	Evaluate effectiveness of nonpharmacologic interventions and modify treatment plan as appropriate	417	1.85	0.36	2	416	1.06	0.59	1	417	3.26	0.72	3	416	23.24	6.79

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**Gerontological Nurse Practitioner
Survey Order**

		Performance Expectation				N	Consequence				N	Frequency			Overall Rank		
		N	Mean	Std Dev	Median		N	Mean	Std Dev	Median		N	Mean	Std Dev	Median	N	Mean
97	Evaluate adherence to treatment plan and modify as appropriate	417	1.89	0.31	2	416	1.27	0.55	1	417	3.47	0.6	4	416	25.21	5.68	
98	Evaluate the impact of diagnosis and treatment on patient and family	417	1.82	0.4	2	416	1.07	0.59	1	417	3.23	0.77	3	416	22.9	7.1	
99	Formulate plan of care based on emerging trends in health care	417	1.56	0.52	2	415	0.85	0.55	1	417	2.87	0.84	3	415	17.62	8.91	
100	Provide palliative care interventions	416	1.69	0.5	2	414	1.28	0.63	1	416	2.71	0.89	3	415	21.68	8.37	
101	Collaborate with patient and family to determine plan of care including health care goals	417	1.87	0.34	2	416	1.14	0.59	1	417	3.29	0.73	3	416	23.96	6.51	
102	Provide non-biased counseling to obtain informed consent/assent	417	1.76	0.52	2	415	1.19	0.65	1	417	2.85	1.1	3	416	22.64	8.34	
103	Provide non-biased counseling regarding advance directives	417	1.78	0.47	2	415	1.19	0.67	1	417	3.01	0.94	3	416	22.99	7.76	
104	Provide for patient safety within scope of legal and professional guidelines	417	1.9	0.33	2	416	1.48	0.61	2	417	3.52	0.81	4	416	26.56	6.49	
105	Provide transitional care and information exchange between inpatient, outpatient, and community care settings	417	1.68	0.52	2	416	1.15	0.59	1	417	2.83	0.9	3	416	21.05	8.67	

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**Gerontological Nurse Practitioner
Survey Order**

		Performance Expectation				N	Consequence				N	Frequency			Overall Rank		
		N	Mean	Std Dev	Median		N	Mean	Std Dev	Median		N	Mean	Std Dev	Median	N	Mean
106	Perform primary care procedures including but not limited to suturing, minor lesion removal, microscopy, pap test	417	1.3	0.65	1	417	1.12	0.68	1	416	1.93	1.08	2	416	15.15	9.37	
107	Document assessment and physical findings	418	2	0.07	2	417	1.47	0.59	2	417	3.92	0.28	4	417	28.19	3.19	
108	Document diagnoses and plan of care	418	1.98	0.13	2	417	1.43	0.59	1	417	3.9	0.32	4	417	27.82	3.71	
109	Negotiate care considering patient's/proxy's right to choose/refuse treatment options	418	1.76	0.44	2	417	1.33	0.6	1	417	3.22	0.9	3	417	23.38	7.68	
110	Incorporate patient/family culture, values, health beliefs and behaviors into clinical practice	418	1.85	0.37	2	418	1.09	0.59	1	418	3.3	0.81	3	418	23.46	6.87	
111	Maintain patient confidentiality according to current guidelines (e.g., HIPAA)	418	2	0.05	2	418	1.47	0.69	2	417	3.95	0.23	4	417	28.24	3.63	
112	Identify and refer patient conditions beyond the individual NP's clinical expertise	418	1.93	0.31	2	418	1.74	0.49	2	418	3.42	0.88	4	418	28.17	5.45	
113	Identify and refer patient conditions beyond the individual NP's legal scope of practice	418	1.92	0.32	2	418	1.67	0.55	2	418	3.36	1.01	4	418	27.6	5.87	
114	Engage in continuous quality improvement activities	418	1.58	0.51	2	418	0.78	0.64	1	418	2.89	0.91	3	418	17.63	9.5	

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Gerontological Nurse Practitioner Survey Order

		Performance Expectation				N	Consequence				N	Frequency			Overall Rank		
		N	Mean	Std Dev	Median		N	Mean	Std Dev	Median		N	Mean	Std Dev	Median	N	Mean
115	Advocate to improve patient access to quality, cost-effective health care	418	1.49	0.56	2	418	0.85	0.64	1	418	2.7	1.06	3	418	16.72	9.44	
116	Participate in clinical and/or evaluation research	418	1.15	0.55	1	417	0.45	0.6	0	418	1.77	1	2	418	9.36	8.24	
117	Participate in personal professional development activities	418	1.74	0.45	2	418	0.83	0.67	1	418	2.95	0.77	3	418	20.2	8.35	
118	Evaluate the impact of regulations and legislation on advanced nursing practice and advocate for changes when appropriate	417	1.37	0.53	1	417	0.7	0.67	1	417	2.35	1	2	417	13.76	9.37	
119	Incorporate current evidence-based findings into clinical practice	418	1.86	0.35	2	418	1.19	0.59	1	418	3.45	0.63	4	418	24.32	6.84	
120	Incorporate informatics into clinical practice	418	1.62	0.55	2	417	0.62	0.63	1	417	2.77	1.01	3	417	17.63	9.18	
121	Address legal/ethical dilemmas in clinical practice	418	1.72	0.46	2	418	1.17	0.68	1	418	2.72	0.96	3	418	21.42	8.78	
122	Document in accordance with current regulatory processes and payer systems	418	1.93	0.26	2	418	1.15	0.75	1	417	3.77	0.5	4	417	25.51	5.84	
123	Develop comprehensive education plans for patients and/or families that consider health literacy and learning barriers and facilitators	418	1.53	0.58	2	418	0.99	0.6	1	418	2.56	1.05	3	418	18.03	9.36	

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**Gerontological Nurse Practitioner
Survey Order**

		Performance Expectation				N	Consequence				N	Frequency			Overall Rank		
		N	Mean	Std Dev	Median		N	Mean	Std Dev	Median		N	Mean	Std Dev	Median	N	Mean
124	Educate patient and/or family regarding plan of care including testing, diagnosis, treatments and/or implications	418	1.92	0.27	2	418	1.25	0.57	1	418	3.54	0.58	4	418	25.62	5.49	
125	Provide anticipatory guidance for patient and/or family	418	1.78	0.43	2	418	0.94	0.54	1	418	3.1	0.77	3	418	21.61	7.41	
126	Counsel patient and/or family through grief, dying, and death	418	1.71	0.49	2	417	1.18	0.59	1	418	2.65	0.89	3	418	21.33	7.92	
127	Provide community/group education	417	1.18	0.54	1	416	0.43	0.57	0	417	1.81	0.87	2	417	9.58	7.98	
128	Provide educational offerings to health care professionals	418	1.11	0.49	1	417	0.39	0.58	0	418	1.83	0.84	2	418	8.35	7.39	

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Appendix D
Work Activities Mean Overall Criticality – Rank Order

**Gerontological Nurse Practitioner
Rank Order**

		Overall Rank		
		N	Mean	Std Dev
25	Assess conditions related to the cardiovascular system	418	28.96	3.45
51	Determine life-threatening illness and/or unstable conditions	418	28.85	4.68
24	Assess conditions related to the respiratory system	418	28.82	3.23
47	Identify normal and abnormal findings in history and physical examination	417	28.28	4.29
111	Maintain patient confidentiality according to current guidelines (e.g., HIPAA)	417	28.24	3.63
107	Document assessment and physical findings	417	28.19	3.19
56	Prescribe medications considering interactions, effects (therapeutic, side, adverse), patient characteristics, diagnoses, cost and/or accessibility	418	28.18	4.92
112	Identify and refer patient conditions beyond the individual NP's clinical expertise	418	28.17	5.45
14	Assess patient and family knowledge and use of prescription and over-the-counter medications	417	28.14	4.48
108	Document diagnoses and plan of care	417	27.82	3.71
3	Collect data according to the patient's immediate condition or needs	418	27.72	3.84
40	Assess conditions related to nutrition/hydration	418	27.7	4.07
113	Identify and refer patient conditions beyond the individual NP's legal scope of practice	418	27.6	5.87
39	Assess conditions related to acute and/or chronic pain	418	27.45	3.71

**Gerontological Nurse Practitioner
Rank Order**

		Overall Rank		
		N	Mean	Std Dev
44	Perform problem-focused or interval physical examination	418	27.35	4.22
64	Manage conditions related to the respiratory system	418	27.33	5.46
26	Assess conditions related to the gastrointestinal system	418	27.24	3.86
65	Manage conditions related to the cardiovascular system	418	27	6.19
95	Evaluate effectiveness of pharmacologic regimen, considering polypharmacy, and modify treatment plan as appropriate	416	26.88	6.12
29	Assess conditions related to the neurological system	418	26.87	4.98
79	Manage conditions related to nutrition/hydration	417	26.76	4.94
36	Assess conditions related to physical function and mobility	418	26.67	3.99
2	Obtain a problem-focused or interval history	418	26.66	3.65
57	Prescribe medications considering absorption, distribution, metabolism and excretion	418	26.61	6.42
104	Provide for patient safety within scope of legal and professional guidelines	416	26.56	6.49
8	Assess patient and family risk for violence, abuse, and neglect	418	26.43	6.2
30	Assess conditions related to the endocrine system (including metabolic disorders)	418	26.36	5.52
78	Manage conditions related to acute and/or chronic pain	417	26.36	5.2
35	Assess conditions related to infectious/communicable diseases	418	26.25	5.54
27	Assess conditions related to the genitourinary system	418	26.23	4.61
54	Interpret laboratory and other diagnostic data based on physiologic and pathologic conditions	417	26.1	6.6

**Gerontological Nurse Practitioner
Rank Order**

		Overall Rank		
		N	Mean	Std Dev
45	Perform comprehensive physical examination	416	25.94	5.12
66	Manage conditions related to the gastrointestinal system	418	25.92	5.54
76	Manage conditions related to physical function and mobility	417	25.92	5.06
41	Assess conditions related to mental health	418	25.87	5.72
28	Assess conditions related to the musculoskeletal system	418	25.86	4.46
75	Manage conditions related to infectious/communicable diseases	417	25.84	6.34
23	Assess conditions related to the head, eyes, ears, nose, and throat	418	25.7	4.48
42	Assess cognitive status and decision-making capacity	418	25.68	6.39
94	Evaluate diagnostic findings and modify treatment plans accordingly	416	25.68	6.48
91	Activate protective services in cases of suspected abuse and neglect	416	25.62	7.13
124	Educate patient and/or family regarding plan of care including testing, diagnosis, treatments and/or implications	418	25.62	5.49
16	Assess health risks based on past medical history	418	25.57	5.1
33	Assess conditions related to the integumentary system	418	25.57	4.95
1	Obtain a comprehensive patient history	418	25.54	4.36
122	Document in accordance with current regulatory processes and payer systems	417	25.51	5.84
5	Assess family communication and decision-making	417	25.44	5.47
88	Immunize based on current recommendations	416	25.27	5.56
86	Select interventions based on clinical practice standards, evidence-based guidelines, and ethical/legal principles	416	25.21	7.07

**Gerontological Nurse Practitioner
Rank Order**

		Overall Rank		
		N	Mean	Std Dev
97	Evaluate adherence to treatment plan and modify as appropriate	416	25.21	5.68
60	Determine treatment decisions considering comorbidities	417	25.11	6.89
62	Plan follow-up care at designated intervals based on condition and/or clinical guidelines	417	24.95	6.12
73	Manage conditions related to the integumentary system	418	24.89	5.89
82	Manage comorbidities	417	24.86	7.25
4	Assess patient and family knowledge and behavior regarding nutrition/hydration	418	24.82	5.23
69	Manage conditions related to the neurological system	417	24.81	7.4
53	Use diagnostic reasoning to establish and prioritize differential diagnoses	417	24.79	7.05
67	Manage conditions related to the genitourinary system	418	24.79	6.35
70	Manage conditions related to the endocrine system (including metabolic disorders)	417	24.79	6.89
9	Assess patient and family unintentional injury risk	418	24.77	6.81
48	Identify age-related findings in history and physical examination	418	24.7	5.46
49	Select and/or perform diagnostic tests that are appropriate to condition or needs based on clinical guidelines, risks, costs and benefits	418	24.66	7.12
80	Manage conditions related to mental health	417	24.59	7.01
84	Formulate plan of care that consider the pathophysiology of acute and chronic conditions	416	24.52	7.52
63	Manage conditions related to the head, eyes, ears, nose, and throat	418	24.51	6.03
68	Manage conditions related to the musculoskeletal system	417	24.38	6.31

**Gerontological Nurse Practitioner
Rank Order**

		Overall Rank		
		N	Mean	Std Dev
50	Identify any interactions among diet, medications, substance use and/or complementary/alternative therapies	416	24.34	7.72
119	Incorporate current evidence-based findings into clinical practice	418	24.32	6.84
59	Prioritize interventions based on severity and complexity of health problems	418	24.29	7.16
31	Assess conditions related to the hematopoietic system	418	24.19	7.08
52	Develop a comprehensive problem list based on assessment findings	417	24.18	6.61
15	Assess patient and family health risks based on lifestyle, health habits, substance use/abuse, and sexual practices	415	23.96	6.61
101	Collaborate with patient and family to determine plan of care including health care goals	416	23.96	6.51
87	Treat acute and/or chronic conditions using current technological interventions	416	23.74	7.52
20	Assess health risks based on immunization status	418	23.73	6
55	Engage in consultation, referral and/or collaboration with other health professionals and community resources	418	23.49	6.78
110	Incorporate patient/family culture, values, health beliefs and behaviors into clinical practice	418	23.46	6.87
109	Negotiate care considering patient's/proxy's right to choose/refuse treatment options	417	23.38	7.68
10	Assess patient and family psychosocial risks and needs	418	23.35	6.29
96	Evaluate effectiveness of nonpharmacologic interventions and modify treatment plan as appropriate	416	23.24	6.79

**Gerontological Nurse Practitioner
Rank Order**

		Overall Rank		
		N	Mean	Std Dev
6	Assess patient and family support systems	418	23.04	5.97
32	Assess conditions related to the immune system	418	23	7.51
103	Provide non-biased counseling regarding advance directives	416	22.99	7.76
98	Evaluate the impact of diagnosis and treatment on patient and family	416	22.9	7.1
7	Assess patient and family perception of health and health risk factors	418	22.87	6.08
58	Prescribe non-pharmacologic interventions and/or medical equipment considering risks and benefits, patient characteristics, diagnoses, cost and/or accessibility	418	22.79	6.71
21	Assess interaction between the physical environment and patient health status	417	22.78	7.03
83	Manage psychosocial concerns	417	22.76	7.02
71	Manage conditions related to the hematopoietic system	417	22.74	7.96
61	Incorporate existing support system into treatment plan	417	22.65	6.93
102	Provide non-biased counseling to obtain informed consent/assent	416	22.64	8.34
34	Assess conditions related to the lymphatic system	418	22.44	7.5
17	Assess health risks based on socioeconomic factors	418	21.96	6.87
12	Assess patient and family health risks and needs based on developmental/life stage	418	21.9	7.21
93	Evaluate patient progress in health promotion/disease prevention activities	416	21.88	7.37
72	Manage conditions related to the immune system	417	21.83	8.26
100	Provide palliative care interventions	415	21.68	8.37

**Gerontological Nurse Practitioner
Rank Order**

		Overall Rank		
		N	Mean	Std Dev
125	Provide anticipatory guidance for patient and/or family	418	21.61	7.41
90	Make referrals to support services and resources to reduce caregiver stress	416	21.57	7.66
121	Address legal/ethical dilemmas in clinical practice	418	21.42	8.78
126	Counsel patient and/or family through grief, dying, and death	418	21.33	7.92
74	Manage conditions related to the lymphatic system	417	21.32	8.24
92	Coordinate care (including multiple specialty follow-up and treatment plans) for patients with complex conditions	416	21.25	8.16
105	Provide transitional care and information exchange between inpatient, outpatient, and community care settings	416	21.05	8.67
11	Assess patient and family cultural and spiritual beliefs/values that influence health care	418	20.87	7.3
46	Select and/or perform physical, psychosocial, or developmental screening tests that are appropriate to condition or needs based on clinical guidelines, risks, costs and benefits	418	20.73	8.5
117	Participate in personal professional development activities	418	20.2	8.35
22	Assess interaction between the community and patient health status	418	19.18	8.21
18	Assess genetic/familial health risks	418	19.07	8.76
19	Assess occupational health risks	416	19.06	8.63
43	Assess sexual and/or reproductive health	418	18.13	8.5
123	Develop comprehensive education plans for patients and/or families that consider health literacy and learning barriers and facilitators	418	18.03	9.36

**Gerontological Nurse Practitioner
Rank Order**

		Overall Rank		
		N	Mean	Std Dev
37	Assess conditions related to developmental delays/impairments	418	17.82	10.34
77	Manage conditions related to developmental delays/impairments	416	17.63	10.31
114	Engage in continuous quality improvement activities	418	17.63	9.5
120	Incorporate informatics into clinical practice	417	17.63	9.18
99	Formulate plan of care based on emerging trends in health care	415	17.62	8.91
13	Assess patient and family knowledge and use of complementary/alternative therapies	418	17.6	9.3
38	Assess conditions related to learning disabilities	417	17.35	10.35
115	Advocate to improve patient access to quality, cost-effective health care	418	16.72	9.44
85	Formulate plan of care that incorporate principles of epidemiology	415	16.63	9.57
81	Manage conditions affecting sexual and reproductive health	417	16.4	9.22
106	Perform primary care procedures including but not limited to suturing, minor lesion removal, microscopy, pap test	416	15.15	9.37
89	Recommend complementary and/or alternative therapies	416	15.05	9.22
118	Evaluate the impact of regulations and legislation on advanced nursing practice and advocate for changes when appropriate	417	13.76	9.37
127	Provide community/group education	417	9.58	7.98
116	Participate in clinical and/or evaluation research	418	9.36	8.24
128	Provide educational offerings to health care professionals	418	8.35	7.39

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2008 Role Delineation Study: Gerontological Nurse Practitioner –National Survey Results

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