

2010 Role Delineation Study: Ambulatory Care Nurse National Survey Results



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About this Report

This report pertaining to the practice of ambulatory care nurses was based on the results of a 2010 national study of practice of ambulatory care nurses.

Table of Contents

ABOUT THIS REPORT	2
ACKNOWLEDGEMENTS.....	4
BACKGROUND	5
ROLE DELINEATION STUDY OVERVIEW	5
UPDATED TEST CONTENT OUTLINE FOR AMBULATORY CARE NURSE.....	5
ROLE OF THE CONTENT EXPERT PANELS.....	5
SURVEY METHODOLOGY.....	6
SURVEY CHRONOLOGY	6
SURVEY DEVELOPMENT AND MEASURES	6
SAMPLE SELECTION.....	7
DATA COLLECTION	8
DATA ANALYSIS	8
SURVEY RESULTS.....	10
DEMOGRAPHIC INFORMATION	10
PRACTICE DESCRIPTIONS.....	11
APPENDICIES	
WORK ACTIVITIES STATEMENTS	APPENDIX A
DEMOGRAPHIC DATA SUMMARY	APPENDIX B
WORK ACTIVITIES DESCRIPTIVE STATISTICS	APPENDIX C
WORK ACTIVITIES MEAN OVERALL CRITICALITY -- RANK ORDER.....	APPENDIX D

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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 Ambulatory Care Nurse 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 ambulatory care nurses 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 Ambulatory Care Nurse examination.

Updated Test Content Outline for Ambulatory Care Nurse

The test content outline for the Ambulatory Care Nurse 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 approximately 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 ambulatory care nursing 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 ambulatory care nursing 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 ambulatory care nurses actually perform in practice. The role delineation study panel met for three days in May 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:

May - July 2010

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

August - September 2010

- The final survey was administered on the web.

September-October 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 May 19-21, 2010, the role delineation study panel met in Silver Spring, MD in order to draft the national Ambulatory Care Nurse Role Delineation Study survey for the 2010 role delineation study. During the meeting, the group reviewed American Association of Ambulatory Care Nursing *Scope and Standards of Practice of Professional Ambulatory Care Nursing – 8th Edition* (2010) and discussed any additions, deletions, and changes they would make to convert the measurement criteria to work activities to be used on the survey. These deliberations resulted in a list of 85 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>Performance Expectation: When is a newly certified ambulatory care nurse first expected to perform this activity?</p> <ul style="list-style-type: none">-- Within the first 6 months of certification.-- After the first 6 months of certification.-- Never expected to perform this activity. <p>Frequency: How often does a newly certified ambulatory care nurse perform this activity (consider within a one year period)?</p> <ul style="list-style-type: none">-- Frequently-- Often-- Occasionally-- Seldom-- Never <p>Consequences: Does incorrect performance of this activity cause:</p> <ul style="list-style-type: none">-- Little or no harm to patient, organization or staff-- Moderate harm to patient, organization or staff-- Severe harm to patient, organization or staff

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 May 13, 2010, there were a total of 1,417 actively certified ANCC ambulatory care nurses. One hundred were randomly selected to participate in the pilot survey and the remaining

1,317 were invited to participate in the national survey. Table 1 presents the number of ANCC-certified ambulatory care nurses selected to participate in the national survey per region.

Table 1. Number of ANCC-certified Ambulatory Care Nurses Invited per Geographic Region

Geographic Region	Number certified (percent of total pop.)
Northeast – NY, CT, MA, NJ, ME, PA, NH, VT, RI	207 (15.72%)
South – TN, MS, TX, FL, LA, AL, GA, AR, OK, VA, MD, SC, DC, NC, WV, DE, KY	508 (38.57%)
Midwest – IA, NE, KS, OH, MO, MN, SD, ND, MI, IL, IN, WI	241 (18.30%)
West – WA, AZ, CA, OR, CO, AK, ID, NM, UT, HI, NV, WY, MT	311 (23.61%)
Other	50 (3.80%)
Total	1,317 (100%)

Data Collection

Pilot Testing. Using the same procedures intended for administering the national data collection, the survey was piloted in June and July 2010. One hundred ANCC-certified ambulatory care nurses randomly selected from across the nation were invited to take the pilot survey. Thirty two (32 percent) of the ambulatory care nurses invited to take the pilot survey responded. The panel members revised the survey based on the results of the pilot survey and finalized 85 work activities to be used in the final survey. The complete text of the work activities are presented in **Appendix A**.

National Survey. In August and September 2010, the 1,317 ANCC-certified ambulatory care nurses 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 an ambulatory care nurse, 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 an ambulatory care nurse 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 1,317 ANCC-certified ambulatory care nurses. A total of 478 valid surveys were returned for an overall response rate of 36 percent. Four hundred and fifty of the respondents indicated that they are currently working in an ambulatory care nursing role. The data analysis of the work activities were based on these 450 responses.

Table 4 shows the percent of surveys returned in each geographic region compared to the number of ANCC-certified ambulatory care nurses selected within the region.

Table 4. Number of Surveys Returned per Geographic Region for Ambulatory Care Nurse

Geographic Region	Number Selected (percent of total pop.)	Number Return (percent of total pop.)
Northeast – NY, CT, MA, NJ, ME, PA, NH, VT, RI	207 (15.72%)	85 (17.78%)
South – TN, MS, TX, FL, LA, AL, GA, AR, OK, VA, MD, SC, DC, NC, WV, DE, KY	508 (38.57%)	182 (38.08%)
Midwest – IA, NE, KS, OH, MO, MN, SD, ND, MI, IL, IN, WI	241 (18.30%)	108 (22.59%)
West – WA, AZ, CA, OR, CO, AK, ID, NM, UT, HI, NV, WY, MT	311 (23.61%)	99 (20.71%)
Other	50 (3.80%)	4 (0.84%)
Total	1,317	478

Demographic Information

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

Demographic Background

Approximately 94 percent of the respondents were female and approximately 79 percent reported to be white. Approximately 80 percent of the respondents fell into the age group of 45 - 64 years of age.

Approximately 16 percent of respondents indicated that they held a Masters in Nursing as one of their highest degree. Approximately 46 percent of the respondents had a Baccalaureate in Nursing as one of their highest degrees.

The average number of years of experience the ambulatory care nurses respondents had as an RN was 25.18 years. The respondents also reported on average 13.19 years of experience working within the specialty.

Practice Settings

Approximately 38 percent of the respondents indicated that they practiced in cities (population between 50,000 - 249,999). Metropolitan (population between 250,000 - 999,999) 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 (68 percent). Community-based outpatient health system came in second with 26 percent.

Practice Descriptions

Descriptive statistics (means, standard deviations, and medians) for the three ratings of all 85 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, 0.98, and 0.93, 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, 55 work activity statements were rated by the respondents as being highly critical (with a overall criticality rank of 22 or above).

Table 5. Number of Work Activities by Mean Overall Criticality for Ambulatory Care Nurse

Number of Work Activities	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	
	11	44	20	1	9	0	55

Table 6 and 7 displays 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 Ambulatory Care Nurse

Work Activity Number and Name	Overall Criticality
15 Identifies patient using two approved identifiers.	31
55 Secures patient protected health information.	31
16 Performs hand-hygiene and standard precautions.	31
54 Maintains hazard free environment.	31
20 Performs "time-out" prior to a procedure.	31
6 Identifies medication discrepancies (e.g., allergies, interactions).	30
35 Re-assesses patient following an intervention (e.g., pain, mental status, blood sugar).	29
74 Reports information as mandated by law and/or facility policy (e.g. incident/occurrence reports, abuse, suicide ideations).	29
25 Disinfects equipment according to facility and/or regulatory guidelines.	29
4 Triage crisis situations.	29
14 Isolates potentially infectious patients.	28.5
81 Documents patient care according to applicable standards.	26

Work Activity Number and Name	Overall Criticality
34 Re-assesses patient condition as status changes.	26
82 Advocates for patients.	26
21 Performs ambulatory care nursing interventions (e.g., IV, medication management, wound care).	26
24 Completes hand-off communication.	26
61 Manages equipment for patient care (e.g., daily checks of emergency equipment, biomedical checks, quality control checks, Oxygen [O2] tanks).	26
12 Prioritizes nursing care.	26
1 Collects subjective/objective data via patient face-to-face assessment.	26
57 Documents using electronic medical record systems.	26

Table 7. Bottom 20 Work Activities Ranked by Overall Criticality for Ambulatory Care Nurse

Work Activity Number and Name	Overall Criticality
65 Evaluates clinical workflow.	19
52 Develops action plans to address opportunities for improving quality of care and safety.	19
26 Performs outreach for preventative care.	19
69 Selecting educational materials for patient and staff (e.g., fact-sheets).	19
67 Obtains pre-authorization for patient care needs (e.g., procedures, medications, diagnostics).	19
79 Facilitates conflict resolution.	18
59 Provides input for facility policy and procedures.	18
53 Selects cost effective clinical resources for patient care.	18
43 Provides information on complementary and alternative modalities (CAM).	18
29 Discharges post-anesthesia patient according to established criteria (e.g., RASS scale, facility protocol).	17
28 Recovers post-anesthesia patient.	15
72 Mentors staff.	10
78 Conducts performance reviews for self and others (e.g., 360 review, peer review).	10
76 Serves on internal and external committees, including professional organizations.	10
70 Conducts staff education and/or training (e.g., in-services, orientations, Journal Club).	9
44 Conducts group health/disease-specific education classes (e.g., pre-op teaching, diabetes, pre-natal, mental health).	9
77 Develop service recovery plans to improve customer satisfaction.	9
62 Provides input for the development of facility emergency management plan.	9
68 Develops individual or group health education activities (e.g., curriculum, teaching methods).	9
85 Participates in research activities (e.g., literature search, collect data).	9

Appendix A Work Activities Statements

Work Activity No. and Statement

- 1 Collects subjective/objective data via patient face-to-face assessment.
- 2 Collects subjective/objective data using appropriate telehealth protocols.
- 3 Collects subjective/objective data using appropriate electronic methods (e.g., e-mail, database, videoconference, medical portal).
- 4 Triage crisis situations.
- 5 Performs medication reconciliation.
- 6 Identifies medication discrepancies (e.g., allergies, interactions).
- 7 Assesses lifestyle risks.
- 8 Assesses patient, family, and/or caregiver's readiness to learn and ability to participate in care.
- 9 Assesses patient population needs (e.g., age, gender, disease-state, cultural, ethnicity).
- 10 Formulates nursing diagnoses.
- 11 Develops plan of care in collaboration with patient, family, and interdisciplinary team incorporating evidence-based practice guidelines.
- 12 Prioritizes nursing care.
- 13 Coordinates with internal and/or external disciplines to achieve appropriate care.
- 14 Isolates potentially infectious patients.
- 15 Identifies patient using two approved identifiers.
- 16 Performs hand-hygiene and standard precautions.
- 17 Implements diagnostic and/or therapeutic interventions according to the interdisciplinary plan of care.
- 18 Implements preventative interventions according to the interdisciplinary plan of care.
- 19 Implements palliative interventions according to the interdisciplinary plan of care.
- 20 Performs "time-out" prior to a procedure.
- 21 Performs ambulatory care nursing interventions (e.g., IV, medication management, wound care).
- 22 Assists with procedures (e.g., pap smears, incision & drainage (I&D), surgery, endoscopy).
- 23 Facilitates transfer of patient to appropriate level of care.
- 24 Completes hand-off communication.
- 25 Disinfects equipment according to facility and/or regulatory guidelines.
- 26 Performs outreach for preventative care.
- 27 Performs outreach for high risk, and/or chronic disease patient populations.
- 28 Recovers post-anesthesia patient.
- 29 Discharges post-anesthesia patient according to established criteria (e.g., RASS scale, facility protocol).
- 30 Assesses effectiveness of plan of care.
- 31 Evaluates patient's compliance with preventative health measures (e.g., medication compliance, diet, labs, vitals).
- 32 Collaborates with patient to realign goals and objectives based on current clinical outcomes.
- 33 Identifies barriers that negatively impact outcomes.
- 34 Re-assesses patient condition as status changes.

Work Activity No. and Statement

- 35 Re-assesses patient following an intervention (e.g., pain, mental status, blood sugar).
- 36 Modifies interventions considering the patient's financial resources.
- 37 Calls patient per facility policy and/or protocol to assess patient health status(e.g., post-discharge, pre-op, post-telehealth contact).
- 38 Orients new patients to facility and/or services.
- 39 Assesses the validity of educational materials used by patient, family, and/or caregiver (e.g., credibility, readability, accuracy).
- 40 Assesses patient, family, and/or caregiver learning needs.
- 41 Identifies patient, family, and/or caregiver learning barriers.
- 42 Provides individualized health related education to patient, family, and/or caregiver based on learning needs, abilities, cultural influences, access to resources and support systems.
- 43 Provides information on complementary and alternative modalities (CAM).
- 44 Conducts group health/disease-specific education classes (e.g., pre-op teaching, diabetes, pre-natal, mental health).
- 45 Educates patients, family, and/or caregivers on behavioral change strategies (e.g., diet, smoking cessation).
- 46 Educates patient, family, and/or caregiver on access to health care and community resources .
- 47 Educates patient, family, and/or caregiver on how to report safety related issues or concerns.
- 48 Assesses patient's retention of health related education.
- 49 Delegates tasks according to scope of practice, state practice act, and/or facility guidelines.
- 50 Completes periodic competency testing (e.g., annual, new equipment).
- 51 Identifies opportunities for improving quality of care and safety.
- 52 Develops action plans to address opportunities for improving quality of care and safety.
- 53 Selects cost effective clinical resources for patient care.
- 54 Maintains hazard free environment.
- 55 Secures patient protected health information.
- 56 Selects appropriate reimbursement codes.
- 57 Documents using electronic medical record systems.
- 58 Queries information using electronic systems (e.g., lab database, portals, discharge records).
- 59 Provides input for facility policy and procedures.
- 60 Maintains supplies for patient care (e.g., out-dates, par-levels).
- 61 Manages equipment for patient care (e.g., daily checks of emergency equipment, biomedical checks, quality control checks, Oxygen [O2] tanks).
- 62 Provides input for the development of facility emergency management plan.
- 63 Assist in the implementation of the facility emergency plan.
- 64 Manages clinical workflow (e.g., time management, staffing assignments, walk-ins).
- 65 Evaluates clinical workflow.
- 66 Completes medical forms for patients.

Work Activity No. and Statement

- 67 Obtains pre-authorization for patient care needs (e.g., procedures, medications, diagnostics).
- 68 Develops individual or group health education activities (e.g., curriculum, teaching methods).
- 69 Selecting educational materials for patient and staff (e.g., fact-sheets).
- 70 Conducts staff education and/or training (e.g., in-services, orientations, Journal Club).
- 71 Attends professional development activities.
- 72 Mentors staff.
- 73 Provides clinical expertise to staff.
- 74 Reports information as mandated by law and/or facility policy (e.g. incident/occurrence reports, abuse, suicide ideations).
- 75 Implements evidence-based nursing practices.
- 76 Serves on internal and external committees, including professional organizations.
- 77 Develop service recovery plans to improve customer satisfaction.
- 78 Conducts performance reviews for self and others (e.g., 360 review, peer review).
- 79 Facilitates conflict resolution.
- 80 Collaborates with internal and/or external multidisciplinary teams.
- 81 Documents patient care according to applicable standards.
- 82 Advocates for patients.
- 83 Advocates for ambulatory care nursing practice.
- 84 Provide telephone advice per professional protocols.
- 85 Participates in research activities (e.g., literature search, collect data).

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Appendix B Demographic Data Summary

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

	Recruitment		Respondents	
	Count	Percent	Count	Percent
Northeast	207	15.72%	85	17.78%
South	508	38.57%	182	38.08%
Midwest	241	18.30%	108	22.59%
West	311	23.61%	99	20.71%
Other	50	3.80%	4	0.84%
Total	1317	100.00%	478	100.00%

2. What is your gender?

	Count	Percent
Male	30	6.45%
Female	435	93.55%
Total	465	100.00%
(Not Answered)	13	

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

	Count	Percent
White	376	78.83%
Black or African-American	41	8.60%
American Indian and Alaska Native	4	0.84%
Asian	21	4.40%
Native Hawaiian and other Pacific Islander	4	0.84%
Hispanic or Latino	28	5.87%
Middle Eastern	0	0.00%
Other	3	0.63%
Total	477	100.00%
(Not Answered)	15	

The percentage is computed using "Total = 478"

4. What is your age?

	Count	Percent
25 - 34 years old	11	2.37%
35 - 44 years old	73	15.73%
45 - 54 years old	203	43.75%
55 - 64 years old	168	36.21%
65 and older	9	1.94%
<hr/>		
Total	464	100.00%
(Not Answered)	14	

5. Indicate the highest earned degree in nursing

	Count	Percent
Diploma in Nursing	60	12.85%
Associate Degree in Nursing	95	20.34%
Baccalaureate in Nursing	213	45.61%
Master's in Nursing	73	15.63%
Ph.D. in Nursing	2	0.43%
DNS/DSN/DSNsc	0	0.00%
ND	1	0.21%
DNP	2	0.43%
Other	21	4.50%
<hr/>		
	467	100.00%
(Not Answered)	11	

6. How many years have you been:

6a. a Registered Nurse?

	Count	Percent
0 to 9	23	4.81%
10 to 19	126	26.36%
20 to 29	136	28.45%
30 to 39	165	34.52%
40 to 49	28	5.86%
<hr/>		
Total	478	100.00%
Mean		25.18
Median		26.00

6b. practicing in Ambulatory Care Nursing?

	Count	Percent
0 to 9	171	36.00%
10 to 19	203	42.74%
20 to 29	85	17.89%
30 to 39	16	3.37%
Total	475	100.00%
(Not Answered)	3	
Mean		13.19
Median		12.00

6c. certified as an Ambulatory Care Nurse?

	Count	Percent
Less than 1	11	2.33%
1	123	26.06%
2 - 5	266	56.35%
6 - 9	48	10.17%
10 +	24	5.09%
Total	472	100.00%
(Invalid)	1	
(Not Answered)	5	
Mean		3.47
Median		3.00

7. Are you currently practicing in ambulatory care nursing?

	Count	Percent
Yes	450	95.14%
No	23	4.86%
	473	100.00%
(Not Answered)	5	

8. How many hours per work do you work in ambulatory care nursing?

Hours	Count	Percent	
< 20	19	4.13%	
20 to 29	27	5.87%	1 person reported "24-32"
30 to 39	60	13.04%	1 person reported "30+"; 2 people reported "32+"
40 to 49	317	68.91%	16 people reported "40+"
50 to 59	26	5.65%	1 person reported "50+"
60 to 69	5	1.09%	
70 +	6	1.31%	
<hr/>			
Subtotal	460	100.00%	
Lost Job	1	0.22%	
None/Retired (Invalid)	3	0.65%	
(Not Answered)	4		
	10		
<hr/>			
Total	478		

9. Please indicate the title that most closely approximate your job title

Job Title	Count	Percent
Staff nurse	200	41.93%
Nurse manager	94	19.71%
Case manager	13	2.73%
Telehealth nurse	25	5.24%
Nurse executive	14	2.94%
Staff educator	19	3.98%
Patient educator	6	1.26%
Assistant nurse manager	9	1.89%
Clinical lead/charge nurse	36	7.55%
Home health nurse	1	0.21%
Public health nurse	5	1.05%
Other	55	11.53%
<hr/>		
	477	100.00%
(Not Answered)	1	

10. Which of the following best describes your current primary employment setting? (Mark all that apply)

	Count	Percent
Hospital-based facility	325	67.99%
Telehealth/call center	36	7.53%
Community-based outpatient health system	124	25.94%
Private medical facility	21	4.39%
Home health	10	2.09%
Surgical centers	14	2.93%
Other	24	5.02%
	554	
(Not Answered)	11	

The percentage is computed using "Total = 478"

11. Do you work for a:

	Count	Percent
For profit employer	48	10.37%
Non-profit/Not-for-profit employer	194	41.90%
State/Local government employer	60	12.96%
VA/DOD employer	148	31.97%
Other	13	2.81%
	463	100.00%
(Not Answered)	15	

12. Approximately what percentage of your work time (during an average week) is spent in the following areas?

	Administration, leadership and management		Patient care		Education and professional development		Policy development		Research	
	Count	Percent	Count	Percent	Count	Percent	Count	Percent	Count	Percent
0%	89	19.91%	59	13.17%	39	8.90%	191	45.91%	249	61.33%
1% to 19%	172	38.48%	84	18.75%	349	79.68%	220	52.88%	151	37.19%
20% to 39%	68	15.21%	75	16.74%	20	4.57%	3	0.72%	5	1.23%
40% to 59%	59	13.20%	56	12.50%	17	3.88%	2	0.48%	1	0.25%
60% to 79%	40	8.95%	71	15.85%	7	1.60%	0	0.00%	0	0.00%
80% to 100%	19	4.25%	103	22.99%	6	1.37%	0	0.00%	0	0.00%
Valid Responses	447	100.00%	448	100.00%	438	100.00%	416	100.00%	406	100.00%
(Not Answered)	31		30		40		62		72	
Mean percent spent within each area		22.76%		43.42%		10.43%		3.17%		2.00%

(Continued)

12. Approximately what percentage of your work time (during an average week) is spent in the following areas? (Continued)

	Quality management (e.g., performance improvement projects, chart reviews)		Telehealth		Informatics (e.g., super users, IT clinical analyst, database development)		Case management		Other	
	Count	Percent	Count	Percent	Count	Percent	Count	Percent	Count	Percent
0%	87	20.14%	170	40.28%	255	62.50%	219	54.07%	120	63.49%
1% to 19%	311	71.99%	152	36.02%	137	33.58%	145	35.80%	60	31.75%
20% to 39%	22	5.09%	46	10.90%	9	2.21%	24	5.93%	3	1.59%
40% to 59%	9	2.08%	17	4.03%	2	0.49%	9	2.22%	3	1.59%
60% to 79%	1	0.23%	14	3.32%	2	0.49%	2	0.49%	0	0.00%
80% to 100%	2	0.46%	23	5.45%	3	0.74%	6	1.48%	3	1.59%
Valid Responses	432	100.00%	422	100.00%	408	100.00%	405	100.00%	189	100.00%
(Not Answered)	46		56		70		73		289	
Mean percent spent within each area		6.81%		13.81%		3.64%		6.29%		4.56%

Appendix C

Work Activities Descriptive Statistics

**Ambulatory Care Nurse(N=450)
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	Collects subjective/objective data via patient face-to-face assessment.	1.95	0.31	2	1.16	0.67	1	3.63	0.7	4	25.94	5.2	26
2	Collects subjective/objective data using appropriate telehealth protocols.	1.74	0.56	2	1.21	0.69	1	3.11	1.04	3	22.94	8.26	25
3	Collects subjective/objective data using appropriate electronic methods (e.g., e-mail, database, videoconference, medical portal).	1.62	0.69	2	0.9	0.71	1	2.57	1.29	3	19.86	9.58	24
4	Triages crisis situations.	1.76	0.48	2	1.69	0.57	2	2.8	1.02	3	24.8	7.7	29
5	Performs medication reconciliation.	1.87	0.47	2	1.29	0.68	1	3.36	1.03	4	25.53	7.01	26
6	Identifies medication discrepancies (e.g., allergies, interactions).	1.96	0.25	2	1.58	0.63	2	3.53	0.8	4	27.85	5.03	30
7	Assesses lifestyle risks.	1.63	0.61	2	0.64	0.59	1	2.74	1.06	3	18.34	8.7	20
8	Assesses patient, family, and/or caregiver's readiness to learn and ability to participate in care.	1.93	0.3	2	0.82	0.62	1	3.34	0.75	3	23.53	5.37	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

**Ambulatory Care Nurse(N=450)
Survey Order**

		Performance Expectation			Consequence			Frequency			Overall Rank		
		Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median
9	Assesses patient population needs (e.g., age, gender, disease-state, cultural, ethnicity).	1.84	0.43	2	0.74	0.63	1	3.25	0.93	3	21.86	7.19	25
10	Formulates nursing diagnoses.	1.79	0.57	2	0.76	0.68	1	3.09	1.17	3	21.73	7.87	25
11	Develops plan of care in collaboration with patient, family, and interdisciplinary team incorporating evidence-based practice guidelines.	1.76	0.52	2	0.86	0.61	1	3.11	1.01	3	21.44	7.9	25
12	Prioritizes nursing care.	1.94	0.25	2	1.21	0.66	1	3.81	0.52	4	26.08	5.16	26
13	Coordinates with internal and/or external disciplines to achieve appropriate care.	1.85	0.38	2	0.98	0.58	1	3.27	0.72	3	23.01	6.58	25
14	Isolates potentially infectious patients.	1.95	0.29	2	1.5	0.62	2	2.79	1.17	3	26.67	5.35	28.5
15	Identifies patient using two approved identifiers.	1.98	0.19	2	1.71	0.53	2	3.93	0.42	4	29.31	3.76	31
16	Performs hand-hygiene and standard precautions.	1.98	0.21	2	1.58	0.59	2	3.93	0.42	4	28.58	4.17	31

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

**Ambulatory Care Nurse(N=450)
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	Implements diagnostic and/or therapeutic interventions according to the interdisciplinary plan of care.	1.86	0.4	2	1.17	0.61	1	3.28	0.87	3	24.32	6.75	26
18	Implements preventative interventions according to the interdisciplinary plan of care.	1.89	0.37	2	0.95	0.63	1	3.26	0.84	3	23.6	6.33	25
19	Implements palliative interventions according to the interdisciplinary plan of care.	1.64	0.65	2	0.85	0.64	1	2.32	1.21	2	19.46	9.09	24
20	Performs “time-out” prior to a procedure.	1.82	0.54	2	1.68	0.64	2	3.18	1.34	4	26.81	8.34	31
21	Performs ambulatory care nursing interventions (e.g., IV, medication management, wound care).	1.92	0.33	2	1.47	0.6	2	3.2	0.92	3	26.48	5.7	26
22	Assists with procedures (e.g., pap smears, incision & drainage (I&D), surgery, endoscopy).	1.77	0.57	2	1.13	0.7	1	2.64	1.13	3	22.63	8.06	25
23	Facilitates transfer of patient to appropriate level of care.	1.86	0.42	2	1.17	0.66	1	2.67	0.96	3	23.76	6.78	25
24	Completes hand-off communication.	1.95	0.28	2	1.31	0.63	1	3.25	0.95	4	26.16	5.22	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

**Ambulatory Care Nurse(N=450)
Survey Order**

		Performance Expectation			Consequence			Frequency			Overall Rank		
		Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median
25	Disinfects equipment according to facility and/or regulatory guidelines.	1.82	0.56	2	1.47	0.67	2	3.14	1.25	4	25.54	8.29	29
26	Performs outreach for preventative care.	1.51	0.68	2	0.57	0.61	1	2.16	1.17	2	16.12	9.6	19
27	Performs outreach for high risk, and/or chronic disease patient populations.	1.49	0.69	2	0.76	0.68	1	2.14	1.19	2	16.71	9.79	19
28	Recovers post-anesthesia patient.	1.13	0.9	1	1.3	0.85	2	1.57	1.55	1	15.69	12.4	15
29	Discharges post-anesthesia patient according to established criteria (e.g., RASS scale, facility protocol).	1.17	0.9	2	1.19	0.82	1	1.68	1.6	1	15.78	12.19	17
30	Assesses effectiveness of plan of care.	1.85	0.43	2	0.93	0.59	1	3.2	0.97	3	22.9	6.85	25
31	Evaluates patient's compliance with preventative health measures (e.g., medication compliance, diet, labs, vitals).	1.88	0.39	2	1	0.63	1	3.28	0.86	3	23.68	6.47	25
32	Collaborates with patient to realign goals and objectives based on current clinical outcomes.	1.76	0.49	2	0.81	0.6	1	2.94	0.97	3	20.84	7.82	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

**Ambulatory Care Nurse(N=450)
Survey Order**

		Performance Expectation			Consequence			Frequency			Overall Rank		
		Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median
33	Identifies barriers that negatively impact outcomes.	1.83	0.39	2	0.96	0.62	1	3.13	0.84	3	22.45	7.13	25
34	Re-assesses patient condition as status changes.	1.96	0.2	2	1.44	0.61	2	3.45	0.77	4	27.12	4.65	26
35	Re-assesses patient following an intervention (e.g., pain, mental status, blood sugar).	1.95	0.25	2	1.47	0.6	2	3.48	0.82	4	27.2	5.01	29
36	Modifies interventions considering the patient's financial resources.	1.53	0.74	2	0.72	0.63	1	2.16	1.26	2	17.5	9.63	21
37	Calls patient per facility policy and/or protocol to assess patient health status(e.g., post-discharge, pre-op, post-telehealth contact).	1.77	0.54	2	0.92	0.63	1	2.75	1.12	3	21.58	7.86	25
38	Orients new patients to facility and/or services.	1.76	0.52	2	0.51	0.58	0	2.89	1.07	3	19.35	7.47	21
39	Assesses the validity of educational materials used by patient, family, and/or caregiver (e.g., credibility, readability, accuracy).	1.61	0.58	2	0.73	0.63	1	2.56	1.09	3	18.07	8.97	21
40	Assesses patient, family, and/or caregiver learning needs.	1.93	0.27	2	1.04	0.62	1	3.36	0.77	4	24.48	5.79	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

**Ambulatory Care Nurse(N=450)
Survey Order**

		Performance Expectation			Consequence			Frequency			Overall Rank		
		Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median
41	Identifies patient, family, and/or caregiver learning barriers.	1.94	0.24	2	1.05	0.62	1	3.39	0.75	4	24.78	5.41	25
42	Provides individualized health related education to patient, family, and/or caregiver based on learning needs, abilities, cultural influences, access to resources and support systems.	1.86	0.36	2	1.01	0.61	1	3.31	0.77	3	23.31	6.72	25
43	Provides information on complementary and alternative modalities (CAM).	1.32	0.79	2	0.51	0.62	0	1.78	1.22	2	13.85	10.13	18
44	Conducts group health/disease-specific education classes (e.g., pre-op teaching, diabetes, pre-natal, mental health).	1.17	0.74	1	0.69	0.66	1	1.83	1.28	2	12.3	9.65	9
45	Educates patients, family, and/or caregivers on behavioral change strategies (e.g., diet, smoking cessation).	1.82	0.44	2	0.81	0.63	1	2.98	0.95	3	21.73	7.32	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

**Ambulatory Care Nurse(N=450)
Survey Order**

		Performance Expectation			Consequence			Frequency			Overall Rank		
		Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median
46	Educates patient, family, and/or caregiver on access to health care and community resources .	1.8	0.44	2	0.68	0.61	1	2.84	0.92	3	20.42	7.59	24
47	Educates patient, family, and/or caregiver on how to report safety related issues or concerns.	1.86	0.39	2	1.01	0.68	1	2.88	1.01	3	23.04	6.99	25
48	Assesses patient's retention of health related education.	1.89	0.34	2	1	0.64	1	3.19	0.85	3	23.66	6.4	25
49	Delegates tasks according to scope of practice, state practice act, and/or facility guidelines.	1.73	0.48	2	1.29	0.67	1	3.15	0.88	3	22.68	8.63	25
50	Completes periodic competency testing (e.g., annual, new equipment).	1.8	0.4	2	1.18	0.69	1	3.4	0.81	4	23.4	7.44	26
51	Identifies opportunities for improving quality of care and safety.	1.71	0.46	2	0.9	0.64	1	2.98	0.89	3	20.26	8.39	24
52	Develops action plans to address opportunities for improving quality of care and safety.	1.5	0.56	2	0.8	0.62	1	2.47	0.99	2	16.32	9.19	19
53	Selects cost effective clinical resources for patient care.	1.38	0.74	2	0.58	0.64	0	2.22	1.27	2	14.71	9.97	18

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

**Ambulatory Care Nurse(N=450)
Survey Order**

		Performance Expectation			Consequence			Frequency			Overall Rank		
		Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median
54	Maintains hazard free environment.	1.97	0.19	2	1.57	0.62	2	3.84	0.5	4	28.31	4.43	31
55	Secures patient protected health information.	1.99	0.13	2	1.63	0.61	2	3.94	0.29	4	28.94	3.73	31
56	Selects appropriate reimbursement codes.	1.33	0.86	2	0.73	0.71	1	2.37	1.64	3	16.19	11.17	20
57	Documents using electronic medical record systems.	1.88	0.48	2	1.22	0.71	1	3.57	1.06	4	25.56	7.18	26
58	Queries information using electronic systems (e.g., lab database, portals, discharge records).	1.86	0.43	2	1	0.71	1	3.33	0.92	4	23.68	7.3	25
59	Provides input for facility policy and procedures.	1.5	0.59	2	0.58	0.65	0	2.3	1.01	2	15.36	9.26	18
60	Maintains supplies for patient care (e.g., out-dates, par-levels).	1.75	0.59	2	0.87	0.71	1	2.96	1.15	3	21.45	8.6	25
61	Manages equipment for patient care (e.g., daily checks of emergency equipment, biomedical checks, quality control checks, Oxygen [O2]	1.89	0.4	2	1.4	0.68	2	3.4	0.95	4	26.14	6.69	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

**Ambulatory Care Nurse(N=450)
Survey Order**

		Performance Expectation			Consequence			Frequency			Overall Rank		
		Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median
	tanks).												
62	Provides input for the development of facility emergency management plan.	1.14	0.77	1	0.71	0.74	1	1.63	1.21	2	12.18	10.2	9
63	Assist in the implementation of the facility emergency plan.	1.45	0.7	2	0.94	0.75	1	2.02	1.22	2	16.84	10.36	19
64	Manages clinical workflow (e.g., time management, staffing assignments, walk-ins).	1.57	0.56	2	0.99	0.62	1	3.06	0.97	3	18.97	9.18	24
65	Evaluates clinical workflow.	1.49	0.6	2	0.77	0.64	1	2.78	1.09	3	16.7	9.49	19
66	Completes medical forms for patients.	1.5	0.79	2	0.7	0.67	1	2.08	1.29	2	17.4	10.02	20
67	Obtains pre-authorization for patient care needs (e.g., procedures, medications, diagnostics).	1.26	0.89	2	0.78	0.74	1	1.87	1.45	2	15.36	11.37	19
68	Develops individual or group health education activities (e.g., curriculum, teaching methods).	1.21	0.67	1	0.53	0.61	0	1.85	1.11	2	11.46	9.26	9
69	Selecting educational materials for patient and staff (e.g., fact-sheets).	1.51	0.63	2	0.54	0.59	0	2.31	1.07	2	15.6	9.15	19

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

**Ambulatory Care Nurse(N=450)
Survey Order**

		Performance Expectation			Consequence			Frequency			Overall Rank		
		Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median
70	Conducts staff education and/or training (e.g., in-services, orientations, Journal Club).	1.33	0.59	1	0.52	0.6	0	2.02	0.93	2	12.36	9.06	9
71	Attends professional development activities.	1.78	0.44	2	0.52	0.59	0	2.57	0.83	2	18.9	7.34	20
72	Mentors staff.	1.42	0.51	1	0.8	0.64	1	2.64	0.84	3	15.07	8.94	10
73	Provides clinical expertise to staff.	1.52	0.51	2	0.9	0.64	1	2.93	0.84	3	17.25	8.81	19
74	Reports information as mandated by law and/or facility policy (e.g. incident/occurrence reports, abuse, suicide ideations).	1.9	0.33	2	1.49	0.65	2	3.01	1.15	4	25.95	6.58	29
75	Implements evidence-based nursing practices.	1.84	0.39	2	1.08	0.64	1	3.31	0.85	4	23.36	7.61	25
76	Serves on internal and external committees, including professional organizations.	1.44	0.54	1	0.41	0.56	0	2.29	0.89	2	13.24	8.64	10
77	Develop service recovery plans to improve customer satisfaction.	1.23	0.72	1	0.54	0.6	0	1.87	1.2	2	12.23	9.52	9
78	Conducts performance reviews for self and others (e.g., 360 review, peer review).	1.34	0.63	1	0.6	0.62	1	2.21	1.09	2	13.51	9.07	10

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

**Ambulatory Care Nurse(N=450)
Survey Order**

		Performance Expectation			Consequence			Frequency			Overall Rank		
		Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median	Mean	Std Dev	Median
79	Facilitates conflict resolution.	1.46	0.64	2	0.74	0.63	1	2.11	1.09	2	15.79	9.46	18
80	Collaborates with internal and/or external multidisciplinary teams.	1.73	0.51	2	0.85	0.63	1	2.76	0.95	3	20.3	8.38	24
81	Documents patient care according to applicable standards.	1.98	0.14	2	1.36	0.64	1	3.82	0.46	4	27.41	4.12	26
82	Advocates for patients.	1.99	0.12	2	1.23	0.66	1	3.78	0.54	4	26.74	4.11	26
83	Advocates for ambulatory care nursing practice.	1.79	0.45	2	0.79	0.68	1	3.22	0.98	4	21.31	8.27	25
84	Provide telephone advice per professional protocols.	1.73	0.5	2	1.38	0.64	1	3.13	0.96	3	23.29	8.16	26
85	Participates in research activities (e.g., literature search, collect data).	1.25	0.66	1	0.43	0.58	0	1.78	1.01	2	11.3	8.85	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

Appendix D
Work Activities Overall Criticality – Rank Order

Work Activity No. and Statement	Overall Criticality			
	N	Mean	Std Dev	Median
15 Identifies patient using two approved identifiers.	450	29.31	3.76	31
55 Secures patient protected health information.	445	28.94	3.73	31
16 Performs hand-hygiene and standard precautions.	450	28.58	4.17	31
54 Maintains hazard free environment.	445	28.31	4.43	31
20 Performs "time-out" prior to a procedure.	450	26.81	8.34	31
6 Identifies medication discrepancies (e.g., allergies, interactions).	450	27.85	5.03	30
35 Re-assesses patient following an intervention (e.g., pain, mental status, blood sugar).	450	27.2	5.01	29
74 Reports information as mandated by law and/or facility policy (e.g. incident/occurrence reports, abuse, suicide ideations).	440	25.95	6.58	29
25 Disinfects equipment according to facility and/or regulatory guidelines.	450	25.54	8.29	29
4 Triage crisis situations.	450	24.8	7.7	29
14 Isolates potentially infectious patients.	450	26.67	5.35	28.5
81 Documents patient care according to applicable standards.	439	27.41	4.12	26
34 Re-assesses patient condition as status changes.	450	27.12	4.65	26
82 Advocates for patients.	439	26.74	4.11	26
21 Performs ambulatory care nursing interventions (e.g., IV, medication management, wound care).	450	26.48	5.7	26
24 Completes hand-off communication.	450	26.16	5.22	26
61 Manages equipment for patient care (e.g., daily checks of emergency equipment, biomedical checks, quality control checks, Oxygen [O2] tanks).	445	26.14	6.69	26
12 Prioritizes nursing care.	450	26.08	5.16	26
1 Collects subjective/objective data via patient face-to-face assessment.	450	25.94	5.2	26
57 Documents using electronic medical record systems.	445	25.56	7.18	26
5 Performs medication reconciliation.	450	25.53	7.01	26
17 Implements diagnostic and/or therapeutic interventions according to the interdisciplinary plan of care.	450	24.32	6.75	26
50 Completes periodic competency testing (e.g., annual, new equipment).	443	23.4	7.44	26
84 Provide telephone advice per professional protocols.	439	23.29	8.16	26
41 Identifies patient, family, and/or caregiver learning barriers.	449	24.78	5.41	25
40 Assesses patient, family, and/or caregiver learning needs.	449	24.48	5.79	25
23 Facilitates transfer of patient to appropriate level of care.	450	23.76	6.78	25

Work Activity No. and Statement	Overall Criticality			
	N	Mean	Std Dev	Median
31 Evaluates patient's compliance with preventative health measures (e.g., medication compliance, diet, labs, vitals).	450	23.68	6.47	25
58 Queries information using electronic systems (e.g., lab database, portals, discharge records).	445	23.68	7.3	25
48 Assesses patient's retention of health related education.	448	23.66	6.4	25
18 Implements preventative interventions according to the interdisciplinary plan of care.	450	23.6	6.33	25
8 Assesses patient, family, and/or caregiver's readiness to learn and ability to participate in care.	450	23.53	5.37	25
75 Implements evidence-based nursing practices.	439	23.36	7.61	25
42 Provides individualized health related education to patient, family, and/or caregiver based on learning needs, abilities, cultural influences, access to resources and support systems.	449	23.31	6.72	25
47 Educates patient, family, and/or caregiver on how to report safety related issues or concerns.	449	23.04	6.99	25
13 Coordinates with internal and/or external disciplines to achieve appropriate care.	450	23.01	6.58	25
2 Collects subjective/objective data using appropriate telehealth protocols.	450	22.94	8.26	25
30 Assesses effectiveness of plan of care.	450	22.9	6.85	25
49 Delegates tasks according to scope of practice, state practice act, and/or facility guidelines.	445	22.68	8.63	25
22 Assists with procedures (e.g., pap smears, incision & drainage (I&D), surgery, endoscopy).	450	22.63	8.06	25
33 Identifies barriers that negatively impact outcomes.	450	22.45	7.13	25
9 Assesses patient population needs (e.g., age, gender, disease-state, cultural, ethnicity).	450	21.86	7.19	25
10 Formulates nursing diagnoses.	450	21.73	7.87	25
45 Educates patients, family, and/or caregivers on behavioral change strategies (e.g., diet, smoking cessation).	449	21.73	7.32	25
37 Calls patient per facility policy and/or protocol to assess patient health status(e.g., post-discharge, pre-op, post-telehealth contact).	450	21.58	7.86	25
60 Maintains supplies for patient care (e.g., out-dates, par-levels).	445	21.45	8.6	25
11 Develops plan of care in collaboration with patient, family, and interdisciplinary team incorporating evidence-based practice guidelines.	450	21.44	7.9	25
83 Advocates for ambulatory care nursing practice.	439	21.31	8.27	25
32 Collaborates with patient to realign goals and objectives based on current clinical outcomes.	450	20.84	7.82	25
46 Educates patient, family, and/or caregiver on access to health care and community resources .	449	20.42	7.59	24
80 Collaborates with internal and/or external multidisciplinary teams.	439	20.3	8.38	24
51 Identifies opportunities for improving quality of care and safety.	445	20.26	8.39	24

Work Activity No. and Statement	Overall Criticality			
	N	Mean	Std Dev	Median
3 Collects subjective/objective data using appropriate electronic methods (e.g., e-mail, database, videoconference, medical portal).	450	19.86	9.58	24
19 Implements palliative interventions according to the interdisciplinary plan of care.	450	19.46	9.09	24
64 Manages clinical workflow (e.g., time management, staffing assignments, walk-ins).	445	18.97	9.18	24
38 Orients new patients to facility and/or services.	450	19.35	7.47	21
39 Assesses the validity of educational materials used by patient, family, and/or caregiver (e.g., credibility, readability, accuracy).	450	18.07	8.97	21
36 Modifies interventions considering the patient's financial resources.	450	17.5	9.63	21
71 Attends professional development activities.	440	18.9	7.34	20
7 Assesses lifestyle risks.	450	18.34	8.7	20
66 Completes medical forms for patients.	445	17.4	10.02	20
56 Selects appropriate reimbursement codes.	445	16.19	11.17	20
73 Provides clinical expertise to staff.	440	17.25	8.81	19
63 Assist in the implementation of the facility emergency plan.	445	16.84	10.36	19
27 Performs outreach for high risk, and/or chronic disease patient populations.	450	16.71	9.79	19
65 Evaluates clinical workflow.	445	16.7	9.49	19
52 Develops action plans to address opportunities for improving quality of care and safety.	445	16.32	9.19	19
26 Performs outreach for preventative care.	450	16.12	9.6	19
69 Selecting educational materials for patient and staff (e.g., fact-sheets).	440	15.6	9.15	19
67 Obtains pre-authorization for patient care needs (e.g., procedures, medications, diagnostics).	445	15.36	11.37	19
79 Facilitates conflict resolution.	439	15.79	9.46	18
59 Provides input for facility policy and procedures.	445	15.36	9.26	18
53 Selects cost effective clinical resources for patient care.	445	14.71	9.97	18
43 Provides information on complementary and alternative modalities (CAM).	450	13.85	10.13	18
29 Discharges post-anesthesia patient according to established criteria (e.g., RASS scale, facility protocol).	450	15.78	12.19	17
28 Recovers post-anesthesia patient.	450	15.69	12.4	15
72 Mentors staff.	440	15.07	8.94	10
78 Conducts performance reviews for self and others (e.g., 360 review, peer review).	439	13.51	9.07	10
76 Serves on internal and external committees, including professional organizations.	439	13.24	8.64	10

**Appendix D– Work Activities Overall Criticality – Rank Order
2010 Role Delineation Study: Ambulatory Care Nurse –
National Survey Results**

D-4

Work Activity No. and Statement	Overall Criticality			
	N	Mean	Std Dev	Median
70 Conducts staff education and/or training (e.g., in-services, orientations, Journal Club).	440	12.36	9.06	9
44 Conducts group health/disease-specific education classes (e.g., pre-op teaching, diabetes, pre-natal, mental health).	450	12.3	9.65	9
77 Develop service recovery plans to improve customer satisfaction.	439	12.23	9.52	9
62 Provides input for the development of facility emergency management plan.	445	12.18	10.2	9
68 Develops individual or group health education activities (e.g., curriculum, teaching methods).	441	11.46	9.26	9
85 Participates in research activities (e.g., literature search, collect data).	439	11.3	8.85	9

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