



2014

**Nurse Executive, Advanced
Role Delineation Study Summary Report**

June 2015

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We also acknowledge the ANCC staff members, who contributed to the preparation and implementation of the Role Delineation Study and the writing of this report.

Background

The American Nurses Credentialing Center (ANCC), which was incorporated in 1991 as a subsidiary of the American Nurses Association (ANA), is the largest nursing credentialing organization in the United States of America. ANCC's vision is to drive nursing excellence, quality care, and improved outcomes. Currently, ANCC offers 25 examinations at various levels including diploma and associate degree, baccalaureate, and advanced practice for nurse practitioners, clinical nurse specialists, and other disciplines. More than 22,000 candidates took an ANCC certification examination or submitted a portfolio for ANCC certification in 2014. 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's current goal is to conduct a study of each advanced practice specialty approximately every three to five years, in order to capture changes in work activities and the knowledge and skill areas required to perform those activities. The findings of a role delineation study are used to update the content of a certification examination.

The 2014 Nurse Executive, Advanced Role Delineation Study involved two sets of activities that ran concurrently: a national web-based survey and a linking activity. The national survey was designed to collect information on the work activities advanced nurse executives 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 and item distribution for the certification examination.

Updated Test Content Outline

The results of this role delineation study were used in developing and updating the test content outline for the Nurse Executive, Advanced Examination. Examination forms produced based on the test content outline developed through this study are scheduled to go into effect on January 12, 2016.

Role of the Content Expert Panel

Throughout the study, ANCC invited professionals in practice and educators who teach courses relevant to nurse executive, advanced serving on content expert panel (CEP) for this study. The internal qualifications and assembly criteria for the Nurse Executive, Advanced CEP were met. All of the content experts serving on the CEP were certified by ANCC in Nurse Executive, Advanced and were invited to serve on the panel based upon their expertise in the specialty. The CEP 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.

Survey Methodology

The 2014 Nurse Executive, Advanced Role Delineation Study involved two sets of activities that ran concurrently: a national web-based survey and a linking activity. The purpose of the development and administration of the national survey was to collect information on the work activities advanced nurse executives actually perform in practice. The role delineation study panel met for three days from July 28-30, 2014, to draft a pilot version of the survey and construct the initial map of knowledge, skills, and abilities (KSAs) relevant to the work activities included in the survey. A linking activity was also conducted to identify the major KSA domains and subdomains required to successfully perform the work activities listed in the survey. The results of the survey and linking activity were used as foundational documents for updating the test content outline and item distribution in a three-day meeting in December, 2014.

Survey Chronology

The survey development, administration, and review spanned seven months.

July - September 2014

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

September - November 2014

- The CEP completed an activity to link all of the work activity survey items to the domains and subdomains in the KSA map.
- The final survey was administered on the web.

November - December 2014

- The survey activity results were analyzed, and activity weights were determined.
- The panel met to review the survey results and activity weights; and to discuss revisions to the test content outline and item distribution for the certification examination.

Sample Selection

In June of 2014, there were a total of 1,135 actively certified ANCC advanced nurse executives with mailing addresses in the United States. One hundred (100) of these nurses were selected via a stratified random sample, based on region, to participate in the pilot survey and all other (1,035) ANCC certified advanced nurse executives were invited to participate in the national survey. Table 1 presents the ANCC certified advanced nurse executives selected to participate in the national survey from each region.

Table 1. Number of ANCC-certified Nurse Executives selected per Geographic Region

Geographic Region	Number of Advanced Nurse Executives (% of total population)
Midwest – IA, NE, KS, OH, MO, MN, SD, ND, MI, IL, IN, WI	208 (20.10)
Northeast – NY, CT, MA, NJ, ME, PA, NH, VT, RI	222 (21.45)
Other – AA, AE, AP, APO, GU, PR	0 (0.00)
South – TN, MS, TX, FL, LA, AL, GA, AR, OK, VA, MD, SC, DC, NC, WV, DE, KY	461 (44.54)
West – WA, AZ, CA, OR, CO, AK, ID, NM, UT, HI, NV, WY, MT	144 (13.91)
Total	1,035 (100.00)

Survey Development and Measures

From July 28-30, 2014, the CEP met in Silver Spring, MD to draft the survey for the 2014 role delineation study. The CEP reviewed and discussed the American Nurses Associations' *Nursing Administration: Scope and Standards of Practice (2009)*, as well as the work activities which were used in ANCC's 2011 Role Delineation Survey. Across multiple sessions in the three-day meeting, the CEP discussed and deliberated on additions, deletions, and revisions that should be made to update the 2014 work activity list to reflect current practice in the nurse executive, advanced specialty. As a result of this meeting, the panel reached consensus on a list of 78 work activities to be used in the 2014 surveys. The complete text of the work activities list is presented in Appendix A. The workgroup also identified and finalized a set of 13 demographic questions, which are presented in Appendix B with results.

During this meeting, the panel also reviewed and approved three scales that survey 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).

Development of Knowledge and Skills (KSAs) Domains

In addition to developing the survey during the July 28-30, 2014 meeting, the CEP also created an initial map of the KSAs that are required to successfully perform each the work activities listed in the survey. The workgroup identified five (5) KSA domains: Structure and Processes; Exemplary Professional Practices; Transformational Leadership; New Knowledge, Innovations, and Improvement; and Empirical Outcomes. This list of KSA domains was used as part of the linking activity given to each member of the study's CEP in October of 2014. Later in the study, along with the results of the survey, the results of the linking activity were used to provide the basis for revising the test content outline and item distribution of ANCC's Nurse Executive, Advanced examination.

Data Collection

Pilot Testing. Using the same procedures intended for administering the final surveys, the surveys were piloted in August and September of 2014. One hundred (100) advanced nurse executives were selected via a stratified random sample, based on region, to participate in the pilot survey. The results of the pilot test indicated that the work activities were appropriate and reflective of the job of the advanced nurse executive specialty. However, a post-pilot survey conference call was conducted to present the results and provide CEP members with an opportunity to make any needed revisions to the survey.

National Survey. In October and November of 2014, 1,035 advanced nurse executives were invited to take the national web-based survey. Each member was sent at least two of 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 noted that respondents completing the survey would receive a five hour reduction of their continuing education requirement for ANCC recertification in the specialty area. The first follow-up reminder letter was sent about two weeks after the alert letter to all respondents. The reminder included language thanking individuals who had already submitted their completed survey, as well as language encouraging individuals to complete the survey, if they had not already done so. The final follow-up reminder letter was sent out only to individuals who had not yet responded to the survey and was sent out approximately two weeks prior to the end of the survey administration period.

Data Analysis

The three rating scales were combined into a single measure of overall criticality using a hierarchical method. As agreed by the CEP, 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 certification as a nurse executive, advanced, could cause severe negative consequences if it was performed incorrectly, and is performed occasionally, the overall criticality rating for that response pattern would be 39.

A score between 37.00 and 41.00 indicated that a work activity is generally expected to be performed within the first six months of certification as a nurse executive, advanced and could cause severe negative consequences if incorrectly performed. A score between 32.0 and 36.99 suggests that a work activity is generally expected to be performed within the first six months of certification as a nurse executive, advanced and could cause moderate negative consequences if incorrectly performed. Work activities with scores of 32 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 received 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	
Performance Expectations	Consequences	Frequency	Criticality Ranking
Within the first 6 months of certification within the specialty	Severe negative consequences	Always	41
		Frequently	40
		Occasionally	39
		Seldom	38
		Never	37
	Moderate negative consequences	Always	36
		Frequently	35
		Occasionally	34
		Seldom	33
		Never	32
	Mild negative consequences	Always	31
		Frequently	30
		Occasionally	29
		Seldom	28
		Never	27
	No negative consequences	Always	26
		Frequently	25
		Occasionally	24
		Seldom	23
		Never	22
After the first 6 months of certification within the specialty	Severe negative consequences	Always	21
		Frequently	20
		Occasionally	19
		Seldom	18
		Never	17
	Moderate negative consequences	Always	16
		Frequently	15
		Occasionally	14
		Seldom	13
		Never	12
	Mild negative consequences	Always	11
		Frequently	10
		Occasionally	9
		Seldom	8
		Never	7
	No negative consequences	Always	6
		Frequently	5
		Occasionally	4
		Seldom	3
		Never	2
After the first 6 months of certification within the specialty (Continued)			
Never expected to perform this activity within the specialty			1

Survey Results

The total sample of the national survey included 1,035 certified advanced nurse executives. A total of 234 surveys were completed, yielding overall response rate of 22.61%. Table 4 shows the percent of surveys per population returned in each geographic region compared to the number of ANCC certified advanced executive nurses selected within the region.

Table 4. Number of Surveys Returned per Geographic Region

Geographic Region	Number of Advanced Nurse Executives (% of total returned)
Midwest – IA, NE, KS, OH, MO, MN, SD, ND, MI, IL, IN, WI	51 (21.79)
Northeast – NY, CT, MA, NJ, ME, PA, NH, VT, RI	52 (22.22)
Other – AA, AE, AP, APO, GU, PR	0 (0.00)
South – TN, MS, TX, FL, LA, AL, GA, AR, OK, VA, MD, SC, DC, NC, WV, DE, KY	102 (43.59)
West – WA, AZ, CA, OR, CO, AK, ID, NM, UT, HI, NV, WY, MT	29 (12.39)
Total	234 (100.00)

Demographic Information

Appendix B includes the survey responses to the 13 demographic questions, which included inquiry about the respondents' background and practice settings. Results showed that the regional breakdown for advanced nurse executive respondents was 22% Northeast, 44% South, 22% Midwest, and 12% West. Respondents were predominantly White, female and 45 years and older.

Practice Descriptions

Descriptive statistics (means and standard deviations) for the three ratings of all 78 work activities (i.e., performance expectation, consequence, and frequency), as well as mean overall criticality are listed in Appendix C. In Appendix D, the overall criticality statistics are presented in rank order of criticality.

KSA and Work Activities Linking Activity

In October and November of 2014, the members of the role delineation study CEP participated in a linking activity. The linking activity was designed to allow each panel member to

work independently to associate as many KSA subdomains to each work activity statement as deemed appropriate by virtue of the expert judgment of the panel member.

A work activity and a KSA were considered linked if a majority of the content experts had linked them. The panel reviewed and discussed the links during the second role delineation study panel meeting held in December of 2014.

Test Revision Results

During the December, 2014 meeting, CEP members reviewed the study's survey results; reviewed the KSA weights derived from the overall criticality ratings from the surveys and the CEP linking activity; discussed, updated, and finalized the test content outline; and finalized the item distribution by applying all KSA weights to an appropriate domain and subdomain. Based upon the information presented during this meeting and within the limits established by the empirical results of the survey, the CEP revised and finalized the test content outline and item distribution according to their expert judgment.

APPENDICES

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Appendix A: Work Activities Statements

2014 Nurse Executive, Advanced Exam National Survey Tasks/Activities List Role Delineation Study

Structures and Processes

1. Fosters a professional work environment of mutual respect, trust, and civility
2. Creates a practice environment of empowered decision-making, professional accountability, and autonomy
3. Facilitates active involvement of nurses in decision making related to professional standards of practice
4. Approves plans, policies and procedures for the appropriate utilization of nursing personnel at all practice levels in accordance with the provisions of the state's nurse practice act, professional practice standards, and regulatory and accreditation agencies
5. Develops policies and procedures that ensure regulatory compliance with professional standards and organizational integrity
6. Represents nursing as an advisor to an organization's decision-making body for planning and operations
7. Evaluates trends impacting nursing practice and the healthcare environment
8. Collaborates in the design, development, and improvement of information systems to ensure appropriate, effective and efficient patient and family centered clinical practice
9. Collaborates with administrative and clinical peers in determining the acquisition, allocation, and use of fiscal and human resources to achieve best outcomes.
10. Allocates resources to provide care using a multidisciplinary approach
11. Identifies organizational opportunities and priorities to facilitate a safe care delivery system for the populations served
12. Designs processes to establish and maintain standards consistent with the identified outcomes
13. Selects appropriate databases to measure and track desired outcomes.
14. Implements models such as just culture to promote a culture of high reliability and safety

Exemplary Professional Practices

15. Develops the nursing strategic plan consistent with the organizational strategic plan
16. Establishes a framework for professional practice built on mission, vision, philosophy, core values, evidence, and standards of practice
17. Promotes a framework for professional practice built on mission, vision, philosophy, core values, evidence, and standards of practice
18. Integrates the ANA Bill of Rights for Registered Nurses and Code of Ethics with Interpretive statements into daily practice
19. Promotes workplace practices that protect employee and patient rights and safety
20. Plans for succession by mentoring nurse leaders and direct care nurses
21. Creates a climate to promote professional development of staff
22. Creates a climate to promote employee satisfaction and engagement.
23. Provides opportunities for staff education , based on learning needs assessment, informal feedback from staff, and program evaluation data
24. Establishes new roles and responsibilities based on the changing needs in patient population

25. Establishes new roles and responsibilities based on the changing needs in the healthcare environment
26. Participates in the evaluation and regulation of individuals as appropriate through credentialing, privileging, or certification process
27. Collaborates within the organization and community to promote comprehensive patient focused healthcare delivery to the population served
28. Collaborates on formal and informal performance appraisal processes for nursing practice
29. Collaborates in establishing approaches to manage interdisciplinary conflict, such as chain of command and effective communication.
30. Establishes mechanisms to assess community healthcare needs specific to populations served (patients/clients/residents/community)
31. Analyzes the effectiveness and efficiency of clinical and administrative processes
32. Develops strategies to recruit, recognize, and retain a competent, engaged, and satisfied workforce
33. Develops business plans, including new programs and services
34. Implements business plans, including new programs and services
35. Evaluates business plans, including new programs and services
36. Collaborates in developing workplace programs to promote and protect employee and patient rights and safety

Transformational Leadership

37. Fosters a vision for professional nursing practice that promotes patient and family centered care
38. Cultivates an environment to promote leadership across all levels of nursing.
39. Elicits support for nursing strategic plans and other organizational initiatives
40. Fosters an environment of transparency, appreciative inquiry, innovation and risk-taking
41. Removes barriers to effectively implement strategic plan to achieve vision
42. Incorporates strategies for sustained change.
43. Evaluates own leadership effectiveness related to the alignment and the attainment of the strategic plan and the vision for professional nursing
44. Creates an environment where staff engages in reflective nursing practice
45. Fosters an environment that supports life-long learning
46. Incorporates relevant research and evidence-based principles into leadership practice
47. Encourages innovative activities and actions for improving quality and safety
48. Uses a variety of sources of power to change systems, structures, and policies to achieve alignment with vision
49. Leads change-management processes.
50. Leverages the value of nursing to influence other stakeholders
51. Ensures cultural competency that recognizes and includes diverse population and individual differences
52. Creates an environment that is supportive of the development and implementation of the professional practice model which fosters excellence in care delivery
53. Influences healthcare policy development through local, state, or national political advocacy
54. Builds relationships with key stakeholders
55. Represents the organization and the profession from a public relations perspective to the media and the broader community

56. Fosters an environment of transformational learning that promotes critical thinking and clinical judgment

New Knowledge, Innovations, and Improvement

57. Establishes a framework for professional nursing practice that is built on innovation, evidence-based practice, and new knowledge that ensures safe, efficient, quality patient care
58. Promotes professional nursing practice that is built on innovation, evidence-based practice, and new knowledge that ensures safe, quality patient care
59. Advocates for resources to support nurse investigation, development, implementation, and systematic evaluation of standards of practice
60. Aligns nursing research and evidence-based practice with nursing and organizational strategic plans.
61. Disseminates research and evidence-based findings, guidelines and practices
62. Creates an environment that is supportive of nurse investigation, development, implementation, and systematic evaluation of standards of practice and standards of care
63. Develops innovative plans related to care delivery systems
64. Integrates evidence-based practice into clinical and operational processes
65. Establishes procedures to ensure the review of proposed research studies, including protection of the rights of human subjects
66. Facilitates the development and continuous improvement of organizational systems, processes, and practices
67. Supports outcome measurement and evidence-based practice through the use of nursing and healthcare related national benchmarks (e.g. National Database of Nursing Quality Indicators, Leapfrog, CDC)
68. Facilitates the appropriate use of innovative systems, applications and new technologies throughout the continuum of care.

Empirical Outcomes

69. Facilitates interdisciplinary collaboration in data analysis and decision-making processes
70. Collaborates in the identification of organizational opportunities and priorities to ensure a safe care delivery system for the populations served.
71. Integrates clinical, human resource, and financial data to support decision-making
72. Facilitates interdisciplinary participation to include the voice of the customers in the identification of desired outcomes
73. Facilitates the monitoring and evaluation of nursing care in accordance with established professional, regulatory, and organizational standards of practice
74. Establishes baselines for clinical and non-clinical processes and outcome measures
75. Uses internal and external benchmarking data to evaluate performance and support best practices and decision-making
76. Directs the identification of key indicators, including measures of quality, safety, and other outcomes of nursing practice
77. Evaluates process and outcome trends over time compared to baseline and national benchmarks
78. Prioritizes quality activities based on regulatory requirements, human resource needs and patient outcomes

Appendix B: Demographic Data Summaries

**2014 Nurse Executive, Advanced
National Survey Demographic Data
Role Delineation Study
N = 234**

Q1: Where is your primary clinical practice location?

	Recruitment		Respondents	
	Count	Percent	Count	Percent
Northeast	222	21.45%	52	22.22%
South	461	44.54%	102	43.59%
Midwest	208	20.10%	51	21.79%
West	144	13.91%	29	12.39%
Other	0	0.00%	0	0.00%
Total	1035	100.00%	234	100.00%

Q2: What is your gender?

	Count	Percent
Female	212	90.60%
Male	22	9.40%
Total	234	100.00%

3. What is your age?

	Count	Percent
25 - 34 years old	1	0.43%
35 - 44 years old	12	5.13%
45 - 54 years old	71	30.34%
55 - 64 years old	128	54.70%
65 and older	22	9.40%
Total	234	100.00%

4. What is your racial/ethnic background? (Optional)

	<u>Count</u>	<u>Percent</u>
White	213	91.03%
Black or African American	11	4.70%
American Indian and Alaska Native	0	0.00%
Asian	4	1.71%
Native Hawaiian and other Pacific Islander	0	0.00%
Hispanic or Latino	5	2.14%
Middle Eastern	0	0.00%
Other	1	0.43%
Total	234	100.00%

5. Indicate your highest degree(s) earned (Mark all that apply)

	<u>Count</u>	<u>Percent</u>
Baccalaureate in Nursing	54	23.08%
Masters in Nursing	130	55.56%
Ph.D. in Nursing	18	7.69%
Doctor of Nursing (DNS/DSN/DNSc)	0	0.00%
Doctor of Nursing Practice (DNP)	22	9.40%
B.A./M.S. in Program Other than Nursing	25	10.68%
MBA	34	14.53%
Doctoral Program Other than Nursing	16	6.84%
Other	27	11.54%

Q6. How many years of experience do you have:

	as a registered nurse?		in a leadership role?	
	<u>Count</u>	<u>Percent</u>	<u>Count</u>	<u>Percent</u>
Less than 1	0	0.00%	0	0.00%
1 to 9	1	0.43%	11	4.70%
10 to 19	15	6.41%	69	29.49%
20 to 29	48	20.51%	103	44.02%
30 to 39	128	54.70%	43	18.38%
40 to 49	36	15.38%	8	3.42%
More than 50	6	2.56%	0	0.00%
Total	234	100.00%	234	100.00%
Mean	32.89		22.55	

Q7. Which best describes your current primary employment setting?
(Check all that apply)

	<u>Count</u>	<u>Percent</u>
Ambulatory Care Setting - Hospital Based	14	5.98%
Ambulatory Care Setting - Private Practice	5	2.14%
Ambulatory Care Setting - Surgical Center	0	0.00%
Behavioral Health In-Patient Setting	6	2.56%
Behavioral Health Out-Patient Setting	3	1.28%
Community/Public Health (city/county/state/federal agency)	2	0.85%
Consulting Firm	12	5.13%
Correctional Nursing	0	0.00%
Day Treatment Center	0	0.00%
Home Health Care	5	2.14%
Hospice/Palliative Care	4	1.71%
Hospital, In patient	148	63.25%
Hospital, Critical Access	8	3.42%
Managed Care (HMO, Blue Cross/Blue Shield)	2	0.85%
Skilled Nursing/Subacute/Long- Term Care	7	2.99%
Occupational Health	1	0.43%
Rural Health Clinic	0	0.00%
School or College Health	0	0.00%
School/College of Nursing	15	6.41%
VA/Armed Forces	10	4.27%
Others	19	8.12%

Q8. Do you work within a Magnet or Pathways to Excellence designated facility?
 (Choose all that apply)

	<u>Count</u>	<u>Percent</u>
Yes, Magnet designated	82	35.04%
Yes, Pathways to Excellence designated	12	5.13%
No	141	60.26%

Q9. How would you describe your facility's primary service area?
 (Choose all that apply)

	<u>Count</u>	<u>Percent</u>
Regional	194	82.91%
National	26	11.11%
International	16	6.84%

Q10. What is the number of beds in your facility (if applicable)?

	<u>Count</u>
0	1
1-499	109
1-99	21
100-199	16
200-299	27
300-399	27
400-499	18
500-999	52
500-599	17
600-699	13
700-799	9
800-899	7
900-999	6
1000-1499	10
1500-1999	2
2000 and over	3
Other	4
500+	1
800+	1
>1500	1
2500+	1
Total	181

Q11. To whom do you report? (Choose all that apply)

	<u>Count</u>	<u>Percent</u>
CEO	58	24.79%
COO	25	10.68%
CNO/Vice-President for Nursing	84	35.90%
Director/Administrator	25	10.68%
Manager	1	0.43%
Dean	8	3.42%
Consultant	2	0.85%
Other	34	14.53%

Q12. What is the total number of employees within your area of responsibility (if applicable)?

	<u>Count</u>
0	5
1-499	130
1-99	55
100-199	26
200-299	22
300-399	17
400-499	10
500-999	29
500-599	10
600-699	8
700-799	4
800-899	3
900-999	4
1000-1499	12
1500-1999	6
Over 2000	13
Other	5
200+	1
_400	1
450+	1
500+	1
600 plus	1
<hr/> Total	<hr/> 200
N/A	6
Not Sure	1
Not Answered	27

Q13. How many direct reports do you have?

	<u>Count</u>
0	22
1-9	100
10-19	75
20-29	15
30-39	6
40-49	2
50-59	2
60-69	1
70-79	3
80-89	3
90-99	0
over 100	1
All	1
<hr/>	
Total	231
N/A	3

Appendix C: Work Activities Descriptive Statistics

Nurse Executive, Advanced Activity/Task Statement	Performance Expectation			Frequency			Consequences			Overall Rank		
	N	Mean	SD	N	Mean	SD	N	Mean	SD	N	Mean	SD
1. Fosters a professional work environment of mutual respect, trust, and civility	234	1.95	0.21	234	3.91	0.31	234	2.44	0.67	234	37.15	5.67
2. Creates a practice environment of empowered decision-making, professional accountability, and autonomy	234	1.49	0.5	234	3.54	0.53	234	2.06	0.69	234	25.65	10.92
3. Facilitates active involvement of nurses in decision making related to professional standards of practice	234	1.65	0.48	234	3.38	0.59	234	1.88	0.71	234	27.79	11.02
4. Approves plans, policies and procedures for the appropriate utilization of nursing personnel at all practice levels in accordance with the provisions of the state's nurse practice act, professional practice standards, and regulatory and accreditation agencies	234	1.7	0.46	234	3.39	0.7	234	2.33	0.75	234	31.05	11.27
5. Develops policies and procedures that ensure regulatory compliance with professional standards and organizational integrity	234	1.62	0.5	234	3.24	0.8	234	2.39	0.75	234	29.62	11.78
6. Represents nursing as an advisor to an organization's decision-making body for planning and operations	234	1.47	0.53	234	3.03	0.88	234	1.9	0.86	234	24.27	12.11
7. Evaluates trends impacting nursing practice and the healthcare environment	234	1.43	0.51	234	2.91	0.74	234	1.51	0.75	234	21.18	11.31
8. Collaborates in the design, development, and improvement of information systems to ensure appropriate, effective and efficient patient and family centered clinical practice	234	1.4	0.49	234	2.7	0.73	234	1.73	0.77	234	21.28	11.43
9. Collaborates with administrative and clinical peers in determining the acquisition, allocation, and use of fiscal and human resources to achieve best outcomes.	234	1.75	0.44	234	3.26	0.68	234	2.26	0.72	234	31.53	10.56
10. Allocates resources to provide care using a multidisciplinary approach	234	1.71	0.46	234	3.17	0.72	234	1.85	0.71	234	28.67	10.32
11. Identifies organizational opportunities and priorities to facilitate a safe care delivery system for the populations served	234	1.71	0.45	234	3.38	0.69	234	2.26	0.71	234	30.96	11.18
12. Designs processes to establish and maintain standards consistent with the identified outcomes	234	1.46	0.51	234	3.04	0.7	234	1.94	0.67	234	23.92	11.41
13. Selects appropriate databases to measure and track desired outcomes.	234	1.27	0.53	234	2.5	0.98	234	1.54	0.74	234	18.35	11.36
14. Implements models such as just culture to promote a culture of high reliability and safety	234	1.5	0.5	234	3.15	0.86	234	2.13	0.76	234	25.71	12.16
15. Develops the nursing strategic plan consistent with the organizational strategic plan	234	1.25	0.44	234	2.62	0.96	234	1.9	0.77	234	19.24	10.35
16. Establishes a framework for professional practice built on mission, vision, philosophy, core values, evidence, and standards of practice	234	1.41	0.5	234	2.78	0.97	234	1.97	0.73	234	22.94	12.12
17. Promotes a framework for professional practice built on mission, vision, philosophy, core values, evidence, and standards of practice	234	1.52	0.51	234	3.21	0.86	234	2.02	0.76	234	25.74	11.79
18. Integrates the ANA Bill of Rights for Registered Nurses and Code of Ethics with Interpretive statements into daily practice	234	1.71	0.47	234	3.14	1.03	234	2.01	0.82	234	29.53	12.11
19. Promotes workplace practices that protect employee and patient rights and safety	234	1.93	0.25	234	3.79	0.52	234	2.59	0.66	234	37.39	7.04
20. Plans for succession by mentoring nurse leaders and direct care nurses	234	1.18	0.39	234	2.76	0.82	234	1.6	0.69	234	16.43	9.13
21. Creates a climate to promote professional development of staff	234	1.6	0.49	234	3.34	0.67	234	1.78	0.71	234	26.3	10.96

Nurse Executive, Advanced Activity/Task Statement	Performance Expectation			Frequency			Consequences			Overall Rank		
	N	Mean	SD	N	Mean	SD	N	Mean	SD	N	Mean	SD
22.Creates a climate to promote employee satisfaction and engagement.	234	1.82	0.38	234	3.57	0.58	234	2.32	0.66	234	33.56	8.85
23.Provides opportunities for staff education , based on learning needs assessment, informal feedback from staff, and program evaluation data	234	1.44	0.51	234	2.95	0.75	234	1.7	0.68	234	22.39	10.95
24.Establishes new roles and responsibilities based on the changing needs in patient population	234	1.22	0.43	234	2.43	0.77	234	1.62	0.71	234	17.05	9.88
25.Establishes new roles and responsibilities based on the changing needs in the healthcare environment	234	1.23	0.44	234	2.4	0.78	234	1.6	0.68	234	17.07	9.94
26.Participates in the evaluation and regulation of individuals as appropriate through credentialing, privileging, or certification process	234	1.49	0.58	234	2.58	1.01	234	1.8	0.86	234	24.21	12.84
27.Collaborates within the organization and community to promote comprehensive patient focused healthcare delivery to the population served	234	1.36	0.51	234	2.65	0.88	234	1.65	0.8	234	20.3	11.96
28.Collaborates on formal and informal performance appraisal processes for nursing practice	234	1.38	0.51	234	2.67	0.85	234	1.82	0.74	234	21.62	11.66
29.Collaborates in establishing approaches to manage interdisciplinary conflict, such as chain of command and effective communication.	234	1.75	0.44	234	3.09	0.86	234	2.19	0.72	234	30.98	10.47
30.Establishes mechanisms to assess community healthcare needs specific to populations served (patients/clients/residents/community)	234	1.06	0.4	234	2.12	0.9	234	1.37	0.75	234	13.19	8.43
31.Analyzes the effectiveness and efficiency of clinical and administrative processes	234	1.51	0.51	234	2.9	0.8	234	1.86	0.82	234	24.54	12.06
32.Develops strategies to recruit, recognize, and retain a competent, engaged, and satisfied workforce	234	1.6	0.5	234	3.17	0.77	234	2.27	0.73	234	28.56	11.62
33.Develops business plans, including new programs and services	234	1.19	0.41	234	2.32	0.73	234	1.64	0.71	234	16.35	9.59
34.Implements business plans, including new programs and services	234	1.2	0.42	234	2.39	0.7	234	1.81	0.73	234	17.52	9.96
35.Evaluates business plans, including new programs and services	234	1.19	0.4	234	2.41	0.71	234	1.71	0.72	234	16.82	9.29
36.Collaborates in developing workplace programs to promote and protect employee and patient rights and safety	234	1.69	0.46	234	2.99	0.88	234	2.2	0.77	234	29.84	11.35
37.Fosters a vision for professional nursing practice that promotes patient and family centered care	234	1.52	0.5	234	3.15	0.89	234	1.93	0.75	234	25.22	12.1
38.Cultivates an environment to promote leadership across all levels of nursing.	234	1.54	0.51	234	3.41	0.68	234	1.96	0.72	234	26	12.06
39.Elicits support for nursing strategic plans and other organizational initiatives	234	1.56	0.5	234	3.09	0.76	234	1.92	0.73	234	25.88	11.79
40.Fosters an environment of transparency, appreciative inquiry, innovation and risk-taking	234	1.7	0.46	234	3.48	0.69	234	2.05	0.74	234	29.65	11.07
41.Removes barriers to effectively implement strategic plan to achieve vision	234	1.43	0.5	234	3	0.74	234	1.96	0.7	234	23.35	11.7
42. Incorporates strategies for sustained change.	234	1.4	0.49	234	3.09	0.7	234	1.99	0.67	234	22.97	11.14
43.Evaluates own leadership effectiveness related to the alignment and the attainment of the strategic plan and the vision for professional nursing	234	1.43	0.5	234	3.03	0.79	234	1.92	0.75	234	23.28	11.97

Nurse Executive, Advanced Activity/Task Statement	Performance Expectation			Frequency			Consequences			Overall Rank		
	N	Mean	SD	N	Mean	SD	N	Mean	SD	N	Mean	SD
44.Creates an environment where staff engages in reflective nursing practice	234	1.35	0.51	234	2.86	0.87	234	1.62	0.77	234	20.37	11.93
45.Fosters an environment that supports life-long learning	234	1.61	0.49	234	3.27	0.74	234	1.67	0.77	234	25.85	11.4
46.Incorporates relevant research and evidence-based principles into leadership practice	234	1.54	0.51	234	3.17	0.75	234	1.75	0.75	234	24.77	12.04
47.Encourages innovative activities and actions for improving quality and safety	234	1.71	0.45	234	3.35	0.68	234	1.99	0.75	234	29.58	10.88
48.Uses a variety of sources of power to change systems, structures, and policies to achieve alignment with vision	234	1.3	0.48	234	2.86	0.82	234	1.75	0.74	234	19.68	11.12
49.Leads change-management processes.	234	1.56	0.51	234	2.94	0.73	234	1.91	0.68	234	25.68	11.65
50.Leverages the value of nursing to influence other stakeholders	234	1.63	0.48	234	3.15	0.78	234	1.97	0.79	234	27.55	11.88
51.Ensures cultural competency that recognizes and includes diverse population and individual differences	234	1.72	0.46	234	3.17	0.82	234	1.85	0.72	234	28.88	10.71
52.Creates an environment that is supportive of the development and implementation of the professional practice model which fosters excellence in care delivery	234	1.6	0.49	234	3.39	0.71	234	2	0.79	234	27.36	11.93
53.Influences healthcare policy development through local, state, or national political advocacy	234	1.08	0.41	234	2.04	0.91	234	1.3	0.78	234	12.89	8.98
54.Builds relationships with key stakeholders	234	1.85	0.36	234	3.57	0.67	234	2.27	0.79	234	33.92	9.51
55.Represents the organization and the profession from a public relations perspective to the media and the broader community	234	1.4	0.58	234	2.37	1.05	234	1.68	0.86	234	21.43	12.89
56.Fosters an environment of transformational learning that promotes critical thinking and clinical judgment	234	1.75	0.43	234	3.47	0.64	234	2.05	0.77	234	30.74	10.76
57.Establishes a framework for professional nursing practice that is built on innovation, evidence-based practice, and new knowledge that ensures safe, efficient, quality patient care	234	1.44	0.5	234	3.06	0.83	234	2.07	0.74	234	24.32	11.83
58.Promotes professional nursing practice that is built on innovation, evidence-based practice, and new knowledge that ensures safe, quality patient care	234	1.72	0.45	234	3.44	0.67	234	2.13	0.72	234	30.54	11.08
59.Advocates for resources to support nurse investigation, development, implementation, and systematic evaluation of standards of practice	234	1.44	0.51	234	2.92	0.85	234	1.77	0.78	234	22.74	12.51
60.Aligns nursing research and evidence-based practice with nursing and organizational strategic plans.	234	1.27	0.45	234	2.8	0.8	234	1.71	0.7	234	18.8	10.43
61.Disseminates research and evidence-based findings, guidelines and practices	234	1.51	0.51	234	2.71	0.85	234	1.56	0.77	234	22.76	12.22
62.Creates an environment that is supportive of nurse investigation, development, implementation, and systematic evaluation of standards of practice and standards of care	234	1.49	0.5	234	2.99	0.8	234	1.71	0.73	234	23.26	12.03
63.Develops innovative plans related to care delivery systems	234	1.21	0.46	234	2.54	0.86	234	1.65	0.77	234	17.4	10.58
64.Integrates evidence-based practice into clinical and operational processes	234	1.68	0.47	234	3.24	0.76	234	1.98	0.7	234	28.64	11.29
65.Establishes procedures to ensure the review of proposed research studies, including protection of the rights of human subjects	234	1.15	0.66	234	2.12	1.31	234	1.82	1.04	234	18.78	13.29

Nurse Executive, Advanced Activity/Task Statement	Performance Expectation			Frequency			Consequences			Overall Rank		
	N	Mean	SD	N	Mean	SD	N	Mean	SD	N	Mean	SD
66.Facilitates the development and continuous improvement of organizational systems, processes, and practices	234	1.6	0.49	234	3.22	0.74	234	2.04	0.7	234	27.4	11.57
67.Supports outcome measurement and evidence-based practice through the use of nursing and healthcare related national benchmarks (e.g. National Database of Nursing Quality Indicators, Leapfrog, CDC)	234	1.72	0.45	234	3.29	0.74	234	2.05	0.73	234	29.97	10.43
68.Facilitates the appropriate use of innovative systems, applications and new technologies throughout the continuum of care.	234	1.27	0.47	234	2.6	0.82	234	1.62	0.7	234	18.44	10.77
69.Facilitates interdisciplinary collaboration in data analysis and decision-making processes	234	1.48	0.51	234	2.94	0.8	234	1.87	0.72	234	24.04	11.99
70.Collaborates in the identification of organizational opportunities and priorities to ensure a safe care delivery system for the populations served.	234	1.7	0.46	234	3.19	0.7	234	2.15	0.72	234	29.89	11.14
71.Integrates clinical, human resource, and financial data to support decision-making	234	1.74	0.44	234	3.39	0.61	234	2.21	0.68	234	31.25	10.29
72.Facilitates interdisciplinary participation to include the voice of the customers in the identification of desired outcomes	234	1.6	0.51	234	3.09	0.84	234	1.88	0.76	234	26.73	12.17
73.Facilitates the monitoring and evaluation of nursing care in accordance with established professional, regulatory, and organizational standards of practice	234	1.83	0.38	234	3.52	0.65	234	2.43	0.7	234	34.24	9.66
74.Establishes baselines for clinical and non-clinical processes and outcome measures	234	1.48	0.55	234	2.89	0.84	234	1.9	0.71	234	24.43	11.93
75.Uses internal and external benchmarking data to evaluate performance and support best practices and decision-making	234	1.66	0.48	234	3.15	0.72	234	1.95	0.71	234	28.14	10.95
76.Directs the identification of key indicators, including measures of quality, safety, and other outcomes of nursing practice	234	1.62	0.49	234	3.16	0.73	234	2.06	0.72	234	27.96	11.17
77.Evaluates process and outcome trends over time compared to baseline and national benchmarks	234	1.43	0.5	234	3.01	0.66	234	1.93	0.66	234	23.22	11.51
78.Prioritizes quality activities based on regulatory requirements, human resource needs and patient outcomes	234	1.65	0.48	234	3.22	0.75	234	2.15	0.7	234	28.94	11.85

Appendix D: Work Activities Mean Overall Criticality – Rank Order

Nurse Executive, Advanced Activity/Task Statement	Overall Rank by Mean		
	N	Mean	SD
19.Promotes workplace practices that protect employee and patient rights and safety	234	37.39	7.04
1. Fosters a professional work environment of mutual respect, trust, and civility	234	37.15	5.67
73.Facilitates the monitoring and evaluation of nursing care in accordance with established professional, regulatory, and organizational standards of practice	234	34.24	9.66
54.Builds relationships with key stakeholders	234	33.92	9.51
22.Creates a climate to promote employee satisfaction and engagement.	234	33.56	8.85
9. Collaborates with administrative and clinical peers in determining the acquisition, allocation, and use of fiscal and human resources to achieve best outcomes.	234	31.53	10.56
71.Integrates clinical, human resource, and financial data to support decision-making	234	31.25	10.29
4. Approves plans, policies and procedures for the appropriate utilization of nursing personnel at all practice levels in accordance with the provisions of the state’s nurse practice act, professional practice standards, and regulatory and accreditation agencies	234	31.05	11.27
29.Collaborates in establishing approaches to manage interdisciplinary conflict, such as chain of command and effective communication.	234	30.98	10.47
11.Identifies organizational opportunities and priorities to facilitate a safe care delivery system for the populations served	234	30.96	11.18
56.Fosters an environment of transformational learning that promotes critical thinking and clinical judgment	234	30.74	10.76
58.Promotes professional nursing practice that is built on innovation, evidence-based practice, and new knowledge that ensures safe, quality patient care	234	30.54	11.08
67.Supports outcome measurement and evidence-based practice through the use of nursing and healthcare related national benchmarks (e.g. National Database of Nursing Quality Indicators, Leapfrog, CDC)	234	29.97	10.43
70.Collaborates in the identification of organizational opportunities and priorities to ensure a safe care delivery system for the populations served.	234	29.89	11.14
36.Collaborates in developing workplace programs to promote and protect employee and patient rights and safety	234	29.84	11.35
40.Fosters an environment of transparency, appreciative inquiry, innovation and risk-taking	234	29.65	11.07
5. Develops policies and procedures that ensure regulatory compliance with professional standards and organizational integrity	234	29.62	11.78
47.Encourages innovative activities and actions for improving quality and safety	234	29.58	10.88
18.Integrates the ANA Bill of Rights for Registered Nurses and Code of Ethics with Interpretive statements into daily practice	234	29.53	12.11
78.Prioritizes quality activities based on regulatory requirements, human resource needs and patient outcomes	234	28.94	11.85
51.Ensures cultural competency that recognizes and includes diverse population and individual differences	234	28.88	10.71
10.Allocates resources to provide care using a multidisciplinary approach	234	28.67	10.32
64.Integrates evidence-based practice into clinical and operational processes	234	28.64	11.29
32.Develops strategies to recruit, recognize, and retain a competent, engaged, and satisfied workforce	234	28.56	11.62
75.Uses internal and external benchmarking data to evaluate performance and support best practices and decision-making	234	28.14	10.95
76.Directs the identification of key indicators, including measures of quality, safety, and other outcomes of nursing practice	234	27.96	11.17
3. Facilitates active involvement of nurses in decision making related to professional standards of practice	234	27.79	11.02
50.Leverages the value of nursing to influence other stakeholders	234	27.55	11.88
66.Facilitates the development and continuous improvement of organizational systems, processes, and practices	234	27.4	11.57
52.Creates an environment that is supportive of the development and implementation of the professional practice model which fosters excellence in care delivery	234	27.36	11.93
72.Facilitates interdisciplinary participation to include the voice of the customers in the identification of desired outcomes	234	26.73	12.17
21.Creates a climate to promote professional development of staff	234	26.3	10.96
38.Cultivates an environment to promote leadership across all levels of nursing.	234	26	12.06
39.Elicits support for nursing strategic plans and other organizational initiatives	234	25.88	11.79
45.Fosters an environment that supports life-long learning	234	25.85	11.4

Nurse Executive, Advanced Activity/Task Statement	Overall Rank by Mean		
	N	Mean	SD
17.Promotes a framework for professional practice built on mission, vision, philosophy, core values, evidence, and standards of practice	234	25.74	11.79
14.Implements models such as just culture to promote a culture of high reliability and safety	234	25.71	12.16
49.Leads change-management processes.	234	25.68	11.65
2. Creates a practice environment of empowered decision-making, professional accountability, and autonomy	234	25.65	10.92
37.Fosters a vision for professional nursing practice that promotes patient and family centered care	234	25.22	12.1
46.Incorporates relevant research and evidence-based principles into leadership practice	234	24.77	12.04
31.Analyzes the effectiveness and efficiency of clinical and administrative processes	234	24.54	12.06
74.Establishes baselines for clinical and non-clinical processes and outcome measures	234	24.43	11.93
57.Establishes a framework for professional nursing practice that is built on innovation, evidence-based practice, and new knowledge that ensures safe, efficient, quality patient care	234	24.32	11.83
6. Represents nursing as an advisor to an organization’s decision-making body for planning and operations	234	24.27	12.11
26.Participates in the evaluation and regulation of individuals as appropriate through credentialing, privileging, or certification process	234	24.21	12.84
69.Facilitates interdisciplinary collaboration in data analysis and decision-making processes	234	24.04	11.99
12.Designs processes to establish and maintain standards consistent with the identified outcomes	234	23.92	11.41
41.Removes barriers to effectively implement strategic plan to achieve vision	234	23.35	11.7
43.Evaluates own leadership effectiveness related to the alignment and the attainment of the strategic plan and the vision for professional nursing	234	23.28	11.97
62.Creates an environment that is supportive of nurse investigation, development, implementation, and systematic evaluation of standards of practice and standards of care	234	23.26	12.03
77.Evaluates process and outcome trends over time compared to baseline and national benchmarks	234	23.22	11.51
42. Incorporates strategies for sustained change.	234	22.97	11.14
16.Establishes a framework for professional practice built on mission, vision, philosophy, core values, evidence, and standards of practice	234	22.94	12.12
61.Disseminates research and evidence-based findings, guidelines and practices	234	22.76	12.22
59.Advocates for resources to support nurse investigation, development, implementation, and systematic evaluation of standards of practice	234	22.74	12.51
23.Provides opportunities for staff education , based on learning needs assessment, informal feedback from staff, and program evaluation data	234	22.39	10.95
28.Collaborates on formal and informal performance appraisal processes for nursing practice	234	21.62	11.66
55.Represents the organization and the profession from a public relations perspective to the media and the broader community	234	21.43	12.89
8. Collaborates in the design, development, and improvement of information systems to ensure appropriate, effective and efficient patient and family centered clinical practice	234	21.28	11.43
7. Evaluates trends impacting nursing practice and the healthcare environment	234	21.18	11.31
44.Creates an environment where staff engages in reflective nursing practice	234	20.37	11.93
27.Collaborates within the organization and community to promote comprehensive patient focused healthcare delivery to the population served	234	20.3	11.96
48.Uses a variety of sources of power to change systems, structures, and policies to achieve alignment with vision	234	19.68	11.12
15.Develops the nursing strategic plan consistent with the organizational strategic plan	234	19.24	10.35
60.Aligns nursing research and evidence-based practice with nursing and organizational strategic plans.	234	18.8	10.43
65.Establishes procedures to ensure the review of proposed research studies, including protection of the rights of human subjects	234	18.78	13.29
68.Facilitates the appropriate use of innovative systems, applications and new technologies throughout the continuum of care.	234	18.44	10.77
13.Selects appropriate databases to measure and track desired outcomes.	234	18.35	11.36
34.Implements business plans, including new programs and services	234	17.52	9.96
63.Develops innovative plans related to care delivery systems	234	17.4	10.58

Nurse Executive, Advanced Activity/Task Statement	Overall Rank by Mean		
	N	Mean	SD
25.Establishes new roles and responsibilities based on the changing needs in the healthcare environment	234	17.07	9.94
24.Establishes new roles and responsibilities based on the changing needs in patient population	234	17.05	9.88
35.Evaluates business plans, including new programs and services	234	16.82	9.29
20.Plans for succession by mentoring nurse leaders and direct care nurses	234	16.43	9.13
33.Develops business plans, including new programs and services	234	16.35	9.59
30.Establishes mechanisms to assess community healthcare needs specific to populations served (patients/clients/residents/community)	234	13.19	8.43
53.Influences healthcare policy development through local, state, or national political advocacy	234	12.89	8.98

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2014 Nurse Executive, Advanced Role Delineation Study Summary Report

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