

Neonatal Clinical Nurse Specialist (Wellness Through Acute Care)

Study of Practice Summary & Test Plan

ACCNS-N



AACN
CERTIFICATION
CORPORATION

Certification Organization for the American Association of Critical-Care Nurses

MISSION

AACN Certification Corporation drives patient health and safety through comprehensive credentialing of acute and critical care nurses ensuring practice consistent with standards of excellence.

VISION

All nurses caring for acutely and critically ill patients and their families are certified.

VALUES

As the Corporation advances its mission and vision to fulfill its purpose and inherent obligation of ensuring the health and safety of patients experiencing acute and critical illness, the Corporation is guided by a set of deeply rooted values:

- **Providing leadership** to bring all stakeholders together to create and foster cultures of excellence and innovation.
- **Acting with integrity** and upholding ethical values and principles in all relationships and the provision of sound, fair and defensible credentialing programs.
- **Committing to excellence** in credentialing programs by striving to exceed industry standards and expectations.
- **Promoting leading edge, research-based credentialing programs** for all nurses who care for and influence the care of acutely and critically ill patients.
- **Demonstrating stewardship** through fair and responsible management of resources and cost-effective business processes.

ETHICS

AACN and AACN Certification Corporation consider the American Nurses Association (ANA) Code of Ethics for Nurses foundational for nursing practice, providing a framework for making ethical decisions and fulfilling responsibilities to the public, colleagues and the profession. AACN Certification Corporation's mission of public protection supports a standard of excellence that certified nurses have a responsibility to read, understand and act in a manner congruent with the ANA Code of Ethics for Nurses.

The following AACN Certification Corporation programs have been accredited by the National Commission for Certifying Agencies (NCCA), the accreditation arm of the Institute for Credentialing Excellence (ICE):



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ACCNS-AG[®]
ACCNS-P[®]
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Our advanced practice certification programs, ACCNS-AG, ACCNS-P, ACCNS-N and ACNPC-AG, meet the National Council of State Boards of Nursing (NCSBN) criteria for APRN certification programs.

AACN

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**Study of Practice Summary
for the
Neonatal
Clinical Nurse Specialist
Wellness Through Acute Care
and
New ACCNS-N Test Plan**

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Prepared for AACN Certification Corporation by:

Lawrence J. Fabrey, PhD
Senior Vice President, Psychometrics

Christopher Bialko, MA
Associate Psychometrician

James Hellrung, MA
Associate Psychometrician

Applied Measurement Professionals, Inc. (AMP), a PSI Business

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Executive Summary

The study of practice, also known as a job analysis, was completed in 2016 at the request of AACN Certification Corporation (the credentialing arm of the American Association of Critical-Care Nurses). The purpose of the job analysis was to describe the job activities of the Clinical Nurse Specialist (wellness through acute care) in sufficient detail to provide a basis for the development of a professional, job-related certification exam.

A Practice Analysis Task Force (PATF) was appointed by AACN Certification Corporation to conduct the activities necessary to identify the responsibilities of a Clinical Nurse Specialist, and to develop the test specifications. The diversity of this group was reflective of the Clinical Nurse Specialist's job. All PATF members demonstrated expertise in the duties and activities associated with this profession.

The study involved the development of a practice analysis survey, distribution of the survey to people involved in advanced practice nursing, and an analysis of the responses. Test specifications for the Adult-Gerontology, Pediatric, and Neonatal Clinical Nurse Specialist were developed on the basis of these data. The PATF was responsible for the following six tasks:

1. Developing a definition of the clinical nurse specialist, wellness through acute care
2. Developing a sampling plan for the survey
3. Identifying patient care problems, skills and procedures, and competencies for the survey instrument
4. Determining rating scales
5. Determining the relevant demographic variables of interest
6. Integrating the definition, patient care problems, skills and procedures, competencies, rating scale, and demographics into a survey instrument

The draft job analysis survey was distributed to the PATF for pilot testing. Modifications were made and the final survey was prepared for distribution.

Five thousand, seven hundred, ninety-five (5,795) invitations for the web survey were emailed to individuals identified by AACN Certification Corporation as holding Adult, Pediatric and Neonatal CCNS credentials, and/or the ACCNS-AG, ACCNS-P and ACCNS-N certification, as well as those AACN members who held the American Nurses Credentialing Center (ANCC) AGCNS-BC, ACNS-BC or PCNS-BC certifications for Adult, Gerontological and/or Pediatric populations.

In addition to the use of AACN Certification Corporation communications networks and strategies – including e-news blasts, AACN website and social media webpages to solicit participation from clinical nurse specialists, other stakeholders such as the National Association of Clinical Nurse Specialists and the National Association of Neonatal Nurses promoted the survey to CNSs within their membership. It was determined that approximately 21 percent of the sample responded; however, an exact figure cannot be determined because of the various methods used to contact survey participants. Additionally, the respondents' ratings displayed an acceptable level of interrater reliability for the patient care problems, skills and procedures and competencies.

After the survey data were analyzed, the results were reviewed by the PATF and decision rules were established. These rules were used to determine which patient care problems, skills and procedures and competencies were appropriate for assessment, and, therefore, for inclusion in the final test content outline. Application of the decision rules resulted in the retention of 123 patient care problems for the Adult-Gerontology Clinical Nurse Specialist, 151 for the Pediatric Clinical Nurse Specialist and 84 for the Neonatal Clinical Nurse Specialist.

Application of the decision rules resulted in the retention of 56 skills and procedures for the Adult-Gerontology Clinical Nurse Specialist, 52 for the Pediatric Clinical Nurse Specialist, and 24 for the Neonatal Clinical Nurse Specialist. A review of the respondents' comments did not result in the addition of any tasks. Each multiple-choice test will be comprised of 150 scored items. The resulting content outlines for the Adult-Gerontology, Pediatric, and Neonatal Clinical Nurse Specialist credentials will be used by AACN Certification Corporation's Exam Development Committee to assemble the exams.

Introduction

The purpose of conducting this job analysis, also known as a study of practice (SOP) or a practice analysis, was to describe the job activities of the Clinical Nurse Specialist in sufficient detail to provide a basis for the ACCNS-AG, ACCNS-P, and ACCNS-N exams. AACN Certification Corporation requested the services of PSI/AMP to design and conduct a study that would provide the support necessary to develop specifications upon which certification exams with substantial evidence of content validity could be developed.

As with all AACN Certification Corporation job analyses, several steps were undertaken to develop a comprehensive inventory of patient care problems, skills and procedures, and competencies performed or encountered by the Neonatal, Pediatric, and Adult-Gerontology Clinical Nurse Specialist. First, a Practice Analysis Task Force (PATF) comprised of a diverse group of experienced practitioners was selected. The PATF membership represented diversity that was reflective of the intended candidate population in terms of relevant demographic characteristics and took into account expertise related to the current role and knowledge needed for the anticipated evolution of the Clinical Nurse Specialist's scope of practice, including those with expertise in gerontology. Next, many sources of documentation were consulted regarding the role and competencies of the clinical nurse specialist. An inventory of patient care problems – both population-specific and those seen across the lifespan- skills and procedures, and competencies was developed by considering the current Clinical Nurse Specialist Test Plans, as well as the recently revised CNS Education Standards, Curriculum Guidelines, and Competencies for the Neonatal CNS (Draft) NANN 2016, Pediatric Nursing: Scope and Standards of Practice ANA 2015, Adult-Gerontology Clinical Nurse Specialist Competencies, and American Association of Colleges of Nursing, March 2010. This inventory was sent to the members of the PATF who were asked for their review and comment. The PATF then revised and finalized the inventory and survey instrument, distributed the instrument to at least 5,795 individuals, reviewed the results, and established the test specifications for the exams.

The job analysis survey was distributed to persons throughout the United States according to the sampling plan developed by the PATF. The data returned were evaluated to determine the degree of consensus among these experts on the significant aspects of the Adult-Gerontology Clinical Nurse Specialist's, Pediatric Clinical Nurse Specialist's, and Neonatal Clinical Nurse Specialist's job. Specifically, the data were analyzed to answer the following questions:

Is there a common knowledge base and set of core activities that is significant to the effective performance of the Certified Adult-Gerontology Clinical Nurse Specialist, Certified Pediatric Clinical Nurse Specialist, and Certified Neonatal Clinical Nurse Specialist?

What percentage of Certified Adult-Gerontology Clinical Nurse Specialists, Certified Pediatric Clinical Nurse Specialists, and Certified Neonatal Clinical Nurse Specialists encounter each patient care problem and perform each skill, procedure and competency?

The purpose of these questions was to identify the more significant topics to be considered for inclusion in the assessment procedure.

Methodology

Formation of the Practice Analysis Task Force

The Practice Analysis Task Force (PATF) was established to ensure that expert judgment was available to PSI/AMP staff at every stage of the project. Members of the PATF were experienced practitioners selected by AACN Certification Corporation, and included members who were familiar with the duties and activities of the Clinical Nurse Specialist's job.

The PATF membership represented diversity that was reflective of the intended candidate population in terms of relevant demographic characteristics and took into account expertise related to the current role and knowledge needed for the anticipated evolution of the Clinical Nurse Specialist's scope of practice. This study could not have been successful without the significant time involvement of the PATF. PSI/AMP is grateful to each of these individuals for their guidance and expertise, as well as their devotion to this project. Listed below are the responsibilities of the PATF.

Responsibilities of the Task Force

1. Determine a definition of the Certified Clinical Nurse Specialist
2. Determine a sampling plan for the survey
3. Identify patient care problems, skills and procedures, and competencies for the survey instrument
4. Determine rating scales
5. Determine the relevant demographic variables of interest
6. Identify the definitions, problems, tasks, competencies, rating scale, and demographics into a survey instrument

Development of the Job Analysis Inventory

Defining the Clinical Nurse Specialist, Wellness Through Acute Care. The first step in survey development was to operationally define the Clinical Nurse Specialist. For the purposes of the survey, the PATF defined the Clinical Nurse Specialist as follows:

The Clinical Nurse Specialist (CNS) is a nurse who has completed an accredited graduate-level CNS educational program within a defined population (adult-gerontology, pediatric, or neonatal). The CNS independently functions as an expert clinician and patient advocate (patient/family sphere), leads the advancement of nursing practice (nursing/nursing practice sphere), and identifies opportunities for and leads organizational and system change (organizations/systems sphere).

The CNS is responsible for diagnosis and treatment of health/illness states, disease management, health assessment, screening and promotion, and prevention of illness and risk behaviors among patients, families, groups, and communities. The CNS provides a scope of service anywhere within the wellness through healthcare continuum for at least one population.

Development of the Patient Care Problem, Skills and Procedures (Actions), and Competency List. While developing the survey, the PATF consulted a number of references regarding the role and competencies of the CNS. Patient care problem lists for the survey were developed and/or survey results validated by considering the current Clinical Nurse Specialist Test Plans, as well as the recently revised CNS Education Standards, Curriculum Guidelines, and Competencies for the Neonatal CNS (Draft) NANN 2016, Pediatric Nursing: Scope and Standards of Practice ANA 2015, Adult-Gerontology Clinical Nurse Specialist Competencies, and American Association of Colleges of Nursing, March 2010.

The PATF, with the assistance of PSI/AMP project staff, prepared a comprehensive inventory of patient care problems, actions, and competencies using all of these materials. The survey was designed to assess the job-related competencies needed for entry-level practices as a clinical nurse specialist. A pilot test of the survey instrument included several components, as discussed further in this report. The complete inventory consisted of 101 patient care problems from across the lifespan, 43 adult-specific, 45 pediatric-specific and 14 neonatal-specific patient care problems, 104 skills and procedures, and 144 competencies. Respondents were also encouraged to suggest additional patient care problems, skills and procedures, and competencies that were not included in the survey.

Clinical Nurse Specialist, Wellness Through Acute Care

- I. Patient Care Problems
 1. Cardiovascular
 2. Pulmonary
 3. Endocrine, Hematology, GI, Renal, and Integumentary
 4. Musculoskeletal, Neurology, and Psychosocial
 5. Factors Influencing Health Status and Multisystem
- II. Professional Caring and Ethical Practice
 6. Advocacy, Caring Practices, Response to Diversity, and Facilitation of Learning
 7. Collaboration, Systems Thinking, and Clinical Inquiry

Selection of the Rating Scale. The PATF also assisted in the development of the rating scale to be used with the inventory. The significance scale was used by respondents and was included as part of the inventory. This scale was recommended by PSI/AMP project staff and based on similar scales used in previous national and state job analysis studies.

Significance. This scale is designed to identify those patient care problems, skills and procedures, and competencies that are more significant to the achievement of the objectives of the Clinical Nurse Specialist's job. Thus, the following question was used:

How significant is this problem/task/action to your nursing practice area?

Not Necessary
Minimally Significant
Significant
Quite Significant

Selection of Background Information Questions. This section of the inventory was designed to gather information concerning the respondents' background characteristics. The PATF reviewed and adapted background information that had been used in previous job analysis studies, and selected the following areas to include:

- state of employment setting,
- size of community,
- primary employment setting,
- number of beds in facility,
- primary position,
- type of practice,
- precept CNS students,
- units/areas worked,
- percentage of patients from various age groups,
- percentage of time directed to various areas,
- years of experience as RN, advanced practice nurse, and in a setting,
- APRN license,
- prescriptive authority,
- own NPI number,
- highest nursing degree,
- other specialty certifications,
- primary population worked with,
- and gender, race, and age.

Several of these demographic variables were used to create subgroups, which the PATF would be able to analyze to ensure that the resulting specifications were applicable to the intended candidate population. For example, the state of employment setting was used to identify regional subgroups for separate analysis of the significance ratings for the Adult-Gerontology Clinical Nurse Specialist, to ensure that remaining problems, actions, and competencies were appropriate for a national exam.

Integration of Definition, Patient Care Problems, Skills and Procedures, Competencies, Rating Scale, and Demographics into a Survey Instrument. Following the first meeting with the PATF, all components of the survey were combined and designed into a draft survey instrument. Prior to distributing the survey to the full sample of professionals, the draft survey was distributed to the PATF for review and comment. The purpose of this review was to determine if any significant activities were missing from the survey, if the directions were clear, and if the rating scale was easy to use and understand. Comments from the PATF were reviewed with the PATF representatives, and minor changes were made prior to sending the survey invitations. Following the PATF's review, the survey was sent to Clinical Nurse Specialists credentialed by the Medical-Surgical Nursing Certification Board. These participants were asked to review the survey specifically looking for inclusion of topics from the wellness spectrum of care. In addition, other subject matter experts were consulted to ensure that the competencies appropriately reflected practice with Gerontological patients. Both aspects of the additional reviews were summarized and discussed with representatives of the PATF. This supplement to the pilot test confirmed that the survey was well-structured and no additional changes were needed.

Sample Selection

In an effort to obtain information from representative groups of respondents, 5,795 Adult-Gerontology, Pediatric, and Neonatal Clinical Nurse Specialists throughout the United States as well as those AACN members who held the American Nurses Credentialing Center (ANCC) CNS-BC certification for Adult-Gerontology, and/or Pediatric populations were identified by AACN Certification Corporation and emailed a survey invitation. In addition, other Adult CNSs were contacted via e-news blasts, AACN Certification Corporation's website and social media website. Respondents were offered an incentive to complete and return the survey by the published deadline.

Results

Return Rate

A survey invitation was sent to 5,795 individuals. Hyperlinks to the survey were also posted on AACN Certification Corporation websites. The various survey invitations resulted in 1,236 respondents taking the survey. This resulted in an approximate 21.3% usable response rate although an exact response rate could not be calculated due to the varied methodologies used to solicit participation.

Reliability of Ratings

To determine the extent to which the respondents were consistent in rating patient care problems, skills and procedures, and a statistic known as the intraclass correlation (Guilford, 1978) was used. Separate reliability estimates were calculated for each group. The content area intraclass reliability coefficients for the significance rating scale ranged from .821 to .996. Considering that 1.00 represents a maximum reliability coefficient, these scales demonstrate good reliability. Based on these data, it is likely that a different sample from the same population would have produced similar ratings.

Adequacy of the Instrument

After completing the patient care problem ratings, respondents were asked to indicate if they felt there was anything significant to their practice that was not included. After reviewing the responses, the PATF did not add any of these patient care problems.

Description of the Rating Sample

The Background Information section of the survey provides descriptive information about the rating sample. The data show that the most typical respondent is a 49-year-old, white female, practicing in the Midwest. Her highest degree in nursing is a Master's degree. She does not hold any of the CCNS certifications nor does she hold prescriptive authority, but she does hold the CCRN credential. She has over 24 years of experience as an RN, nearly 12 years as an advanced practice nurse, and 23 years in an acute/critical care setting. She works full-time as a Unit-based CNS at a community hospital in an urban setting with more than 500 beds. On average, she sees approximately ten, primarily adult, critical patients per day. The majority of her work day is devoted to teaching, and she spends most of her teaching time educating nursing personnel.

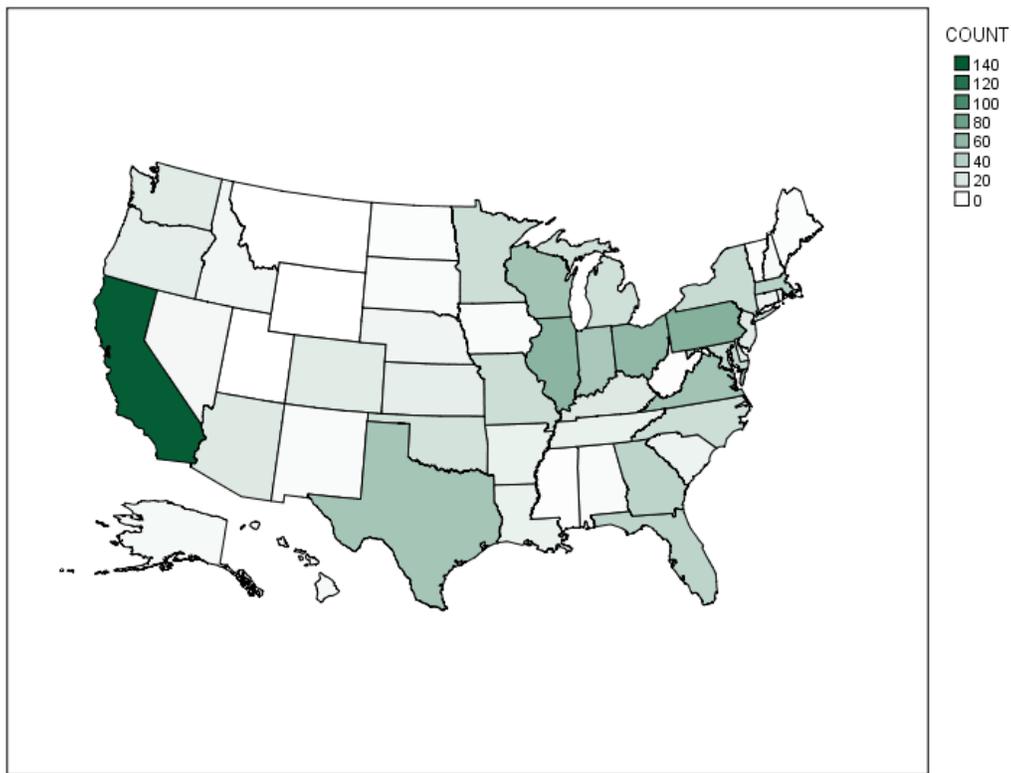


Figure 1. Number of Respondents by State

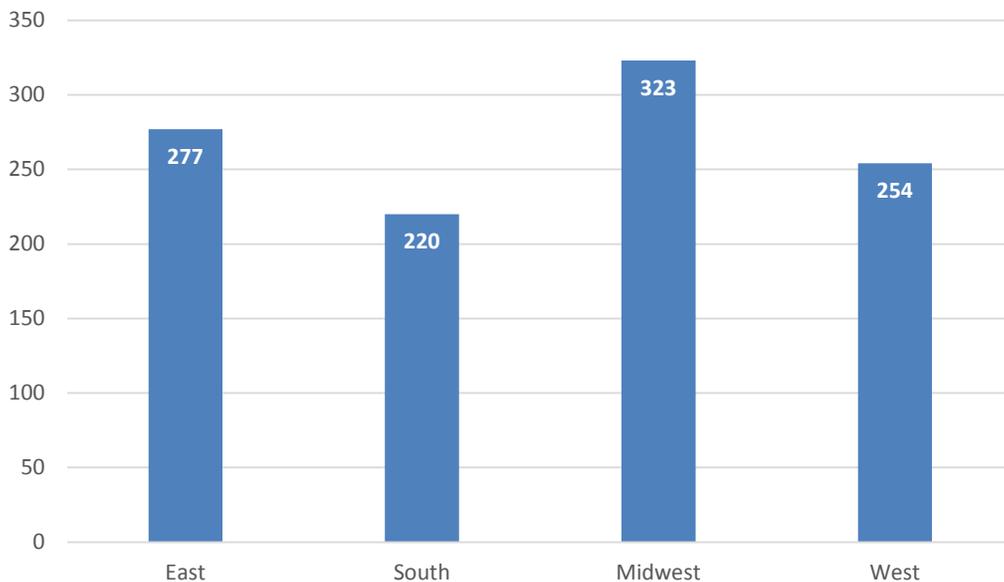


Figure 2. Number of Respondents by Region

East – CT, DC, DE, MA, MD, ME, NH, NJ, NY, PA, RI, VA, VT, WV;

South – AL, AR, FL, GA, LA, MS, NC, OK, TN, TX, SC;

Midwest – IA, IL, IN, KY, MI, MN, MO, OH, WI;

West – AK, AZ, CA, CO, HI, ID, KS, MT, ND, NE, NM, NV, OR, SD, UT, WA, WY

Responses from *Figure 1* were grouped into regions for *Figure 2*. One hundred eighty-two (182) respondents did not answer the question. These data show the largest group of respondents resides in the Midwestern states.

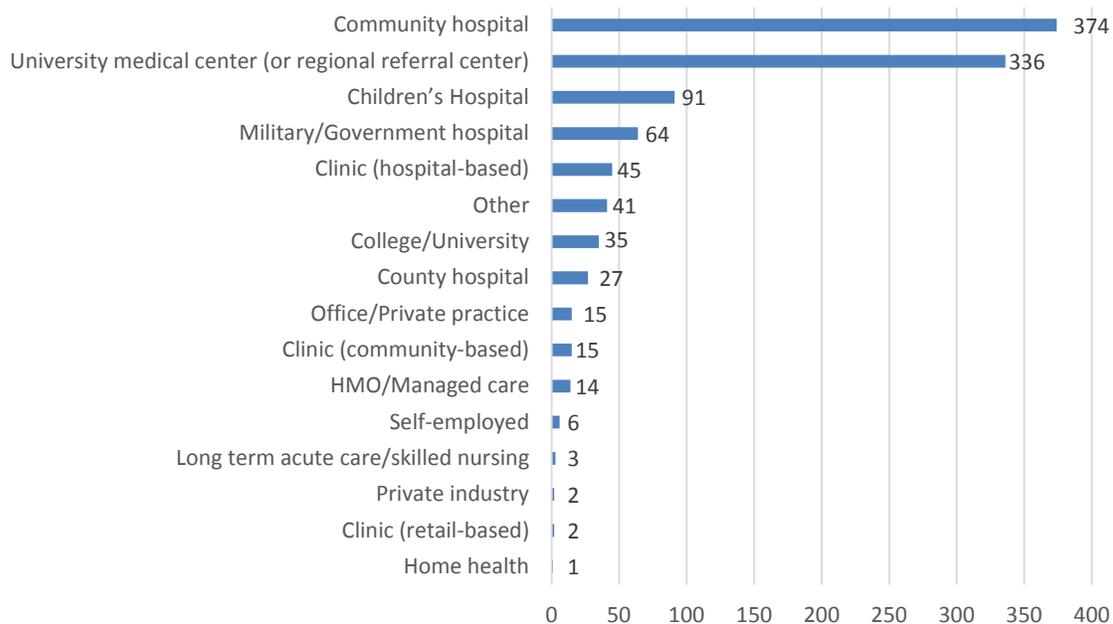


Figure 3. Employment Setting

Figure 3 shows respondents' employment setting. One hundred sixty-five (165) respondents did not answer the question. These data show the largest group of respondents worked at a Community Hospital (45.7%).

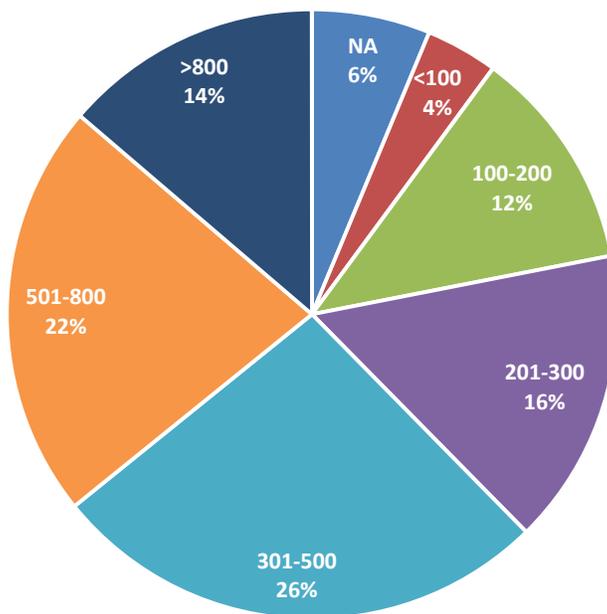


Figure 4. Number of Beds

Figure 4 shows the number of beds in respondents' facilities. The largest group of respondents (26.5%) work in a hospital with 301 to 500 beds. One hundred thirty-six (136) respondents did not answer this question.

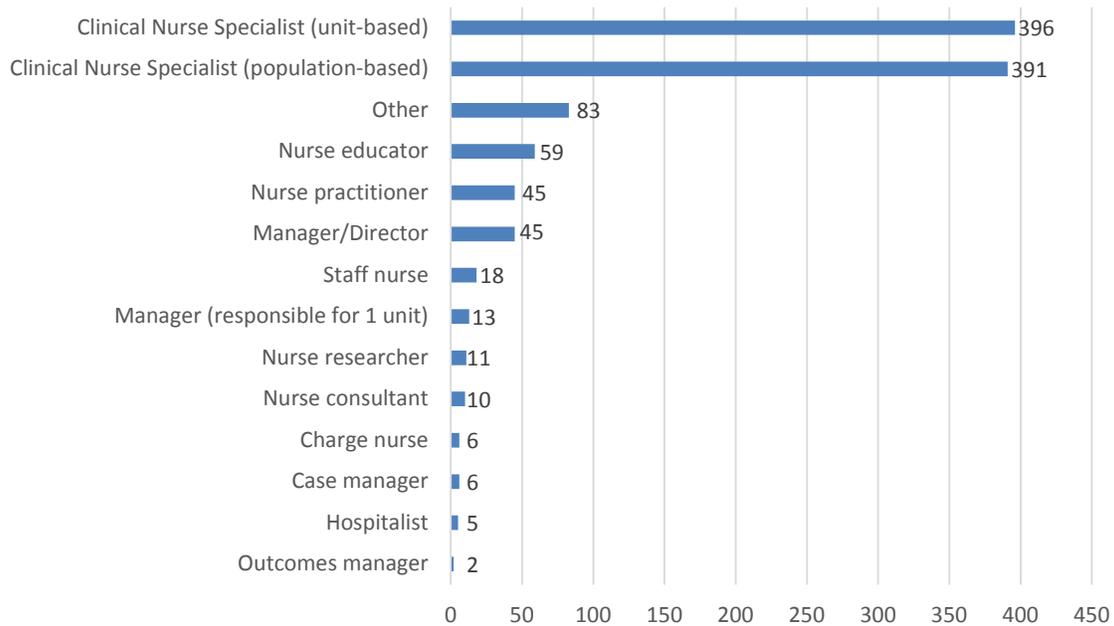


Figure 5. Primary Position

Figure 5 shows the largest group of respondents (396) hold the position of Unit-based CNS. One hundred forty-six (146) respondents did not answer this question.

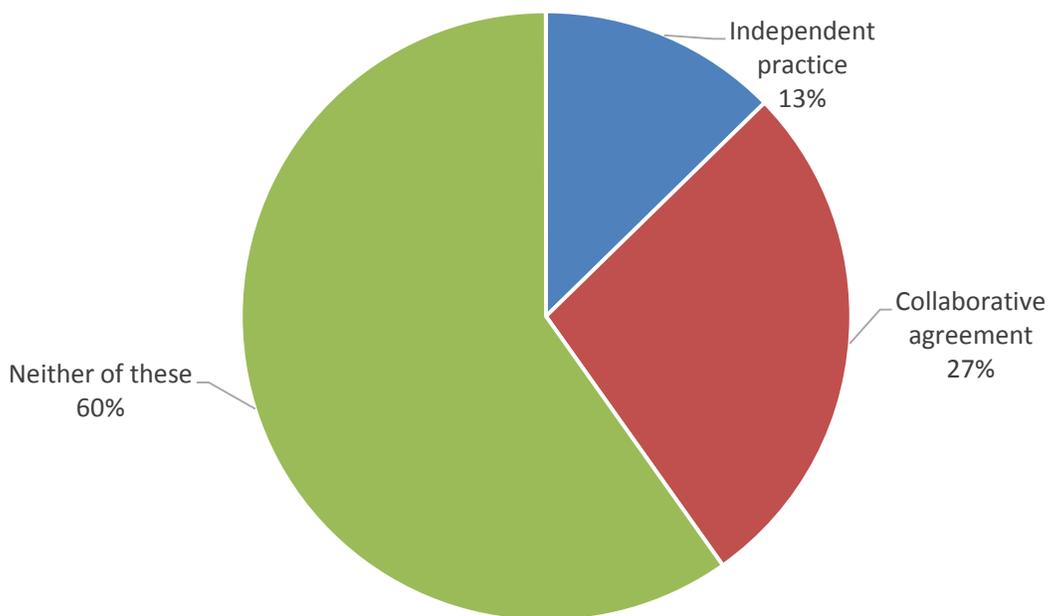


Figure 6. Type of Practice

Figure 6 shows the different types of respondents' practices. The majority of the respondents (59.8%) practice in neither an independent practice nor a collaborative agreement.

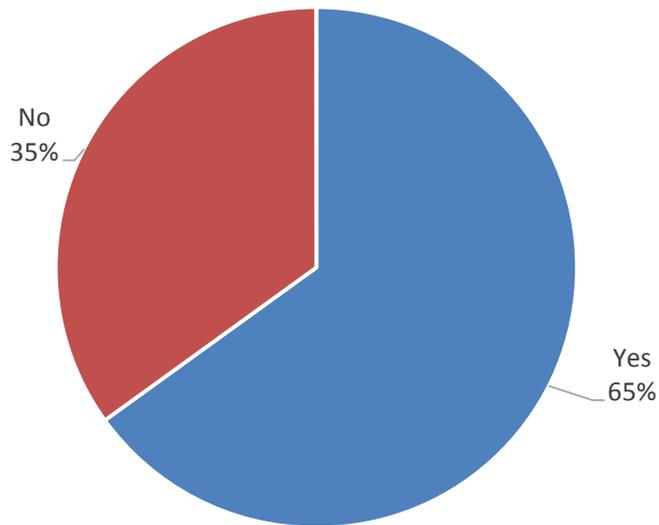


Figure 7. Precept CNS Students

Figure 7 displays respondents that do and do not precept CNS students. The majority of the respondents (65.0%) precept CNS students.

Table 1 shows the percent of work time respondents devote to nursing tasks. Respondents spend most time (23.98%) teaching.

Table 1. Percent of Work Time Devoted to Nursing Tasks

	N	Mean	Std. Error of Mean	Median	Std. Deviation	Min	Max
Administration	1054	22.82	0.68	20	22.05	0	100
Consultation	1054	22.37	0.55	20	17.81	0	95
Direct Patient Care	1054	21.02	0.77	10	25.03	0	100
Research	1054	9.81	0.34	10	10.93	0	100
Teaching	1054	23.98	0.59	20	19.11	0	100

Table 2 and *Figure 8* show respondents' years of experience as a Registered Nurse (RN). The average respondent has over 24 years of experience.

Table 2. Years of Experience as RN

N	Mean	Std. Error of Mean	Median	Std. Deviation	Min	Max
1048	24.12	.350	25.00	9.509	1	56

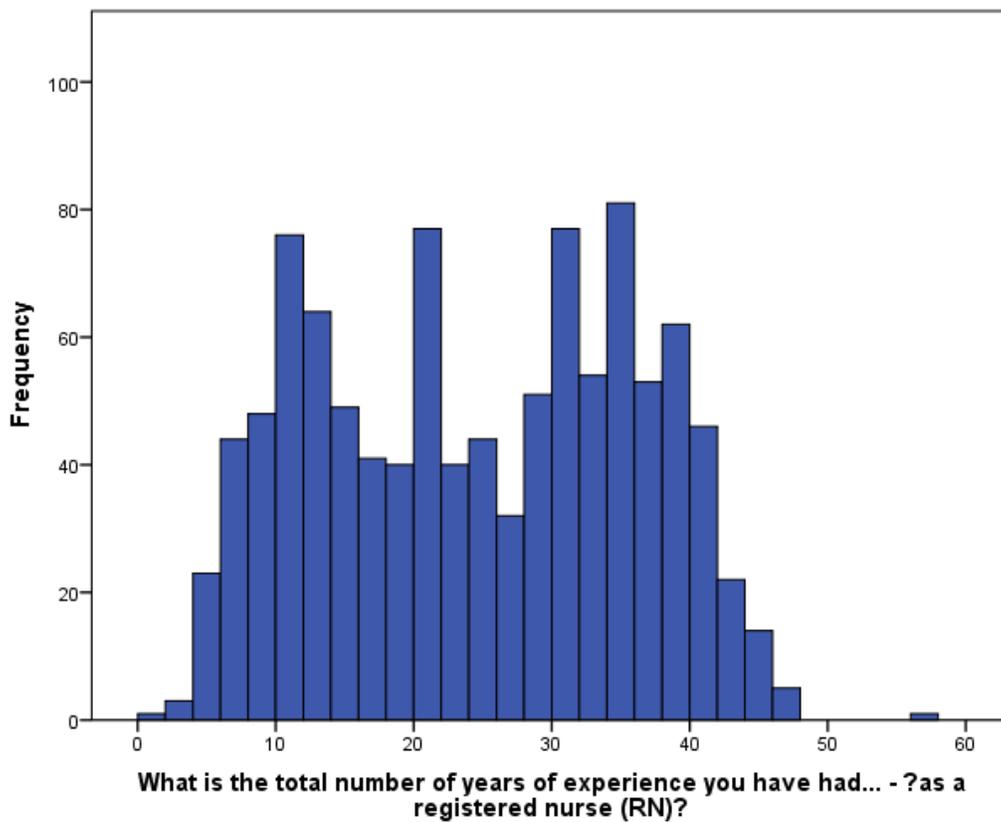


Figure 3. Years of Experience as an RN

Table 3 and Figure 9 show respondents' years of experience as an Advanced Practice Nurse (APRN). The average respondent had approximately 9 years of experience.

Table 3. Years of Experience as Advanced Practice Nurse

N	Mean	Std. Error of Mean	Median	Std. Deviation	Min	Max
1044	12.01	.300	9.00	9.69	0	40

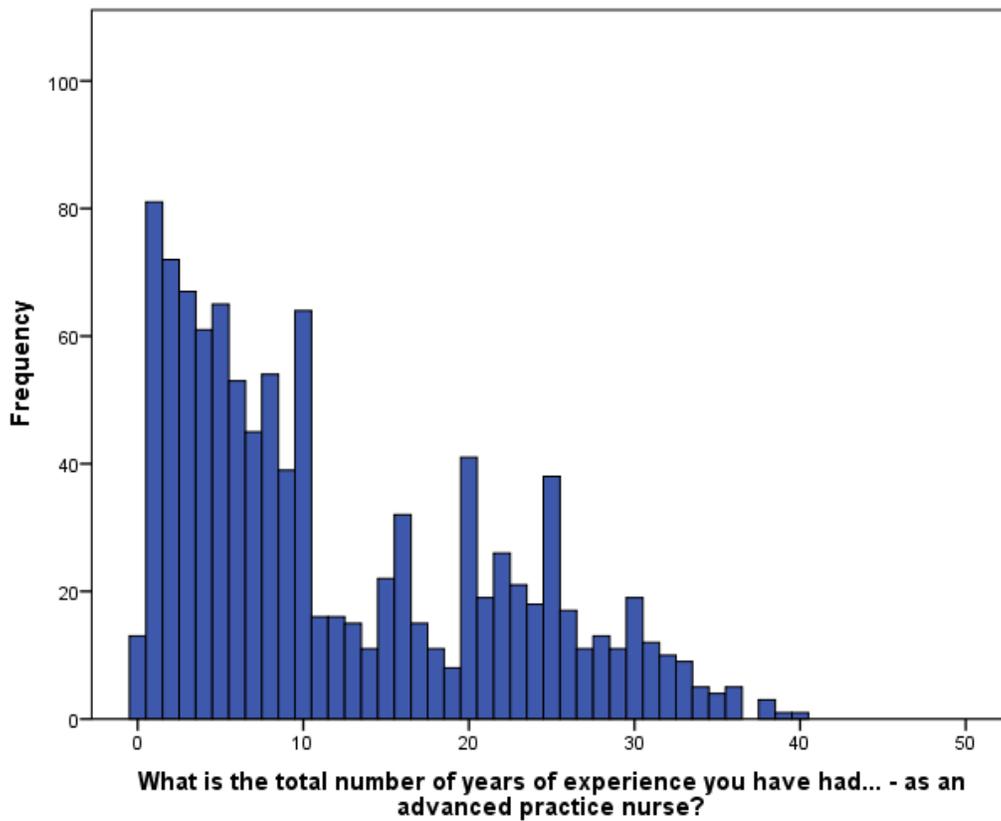


Figure 4. Years of Experience as Advanced Practice Nurse

Table 4 and *Figure 10* show respondents' years of experience as an Acute/Critical care setting. The average respondent had over 22 years of experience.

Table 4. Years of Experience in Acute/Critical Care Setting

N	Mean	Std. Error of Mean	Median	Std. Deviation	Min	Max
1019	22.44	.351	22.00	9.280	0	56

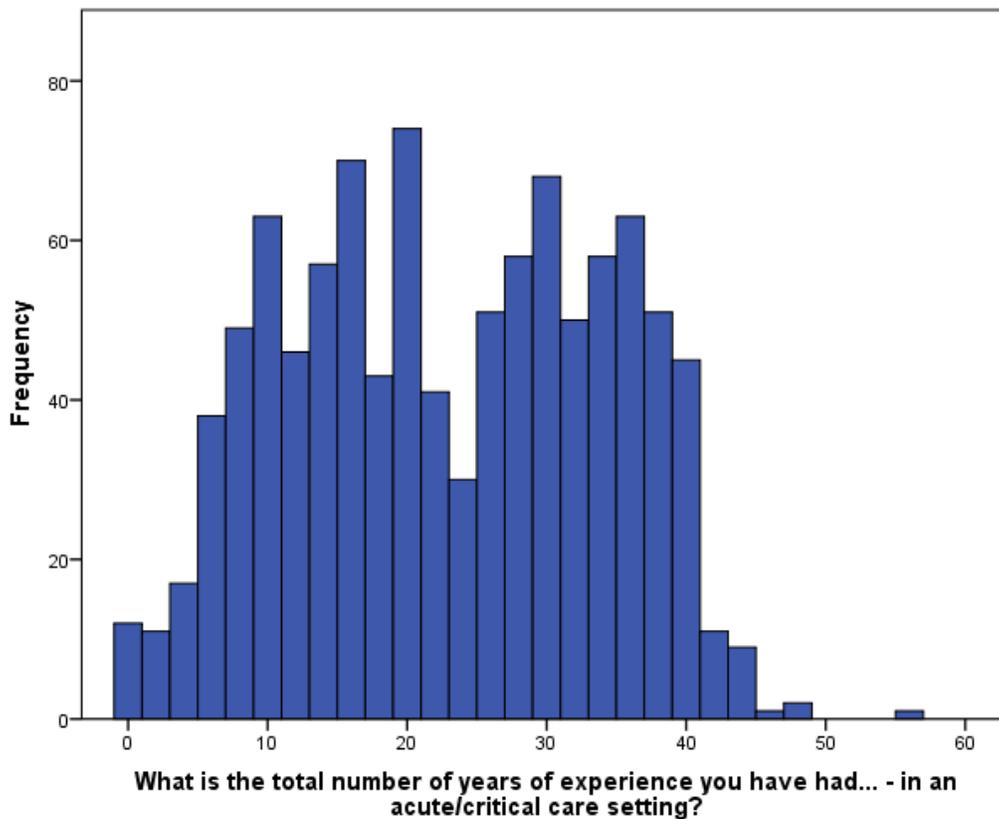


Figure 5. Years of Experience in Acute/Critical Care Setting

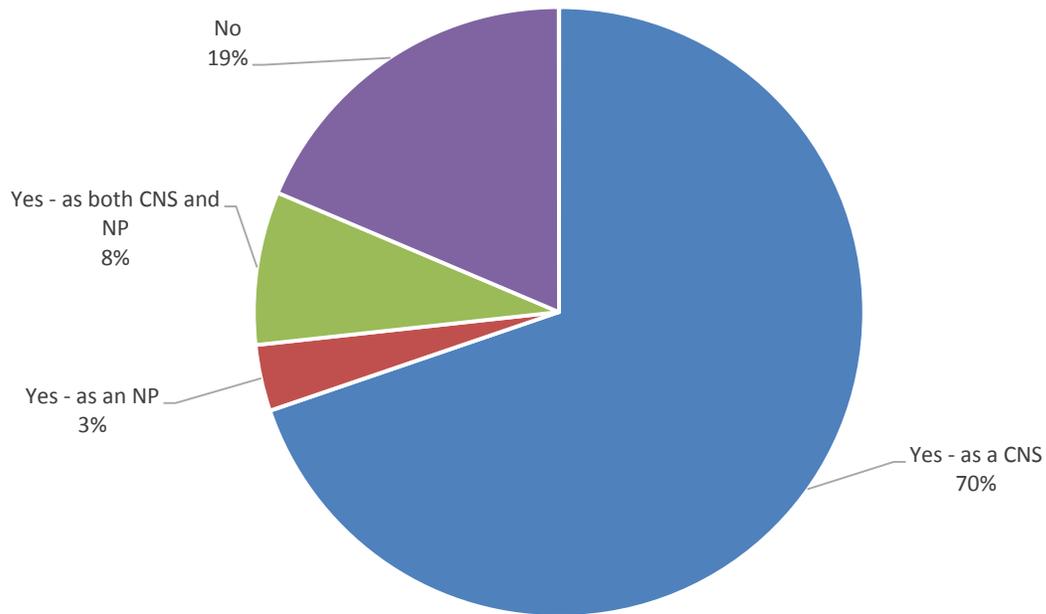


Figure 6. APRN license

Figure 11 shows most respondents have an APRN license in their state as a CNS.

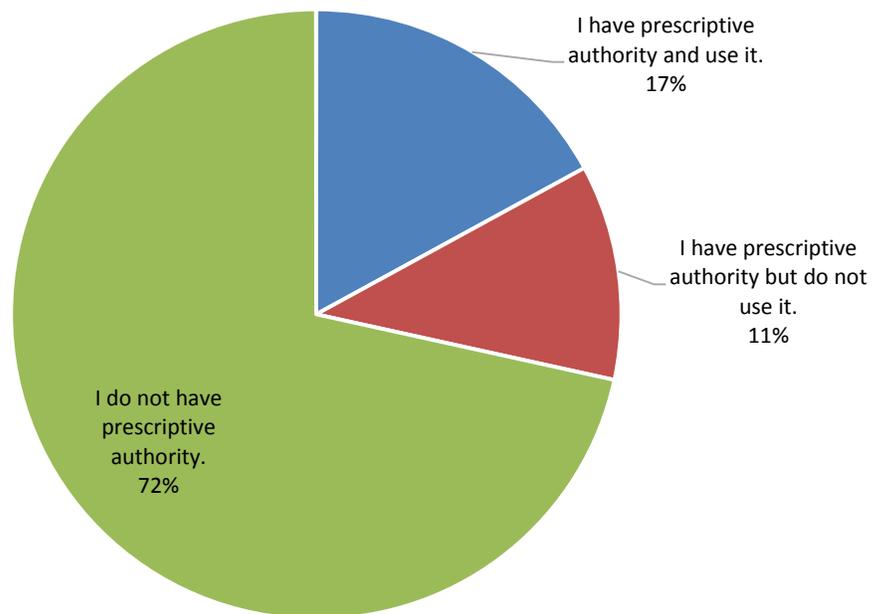


Figure 7. Prescriptive Authority

Figure 12 shows most respondents do not have prescriptive authority.

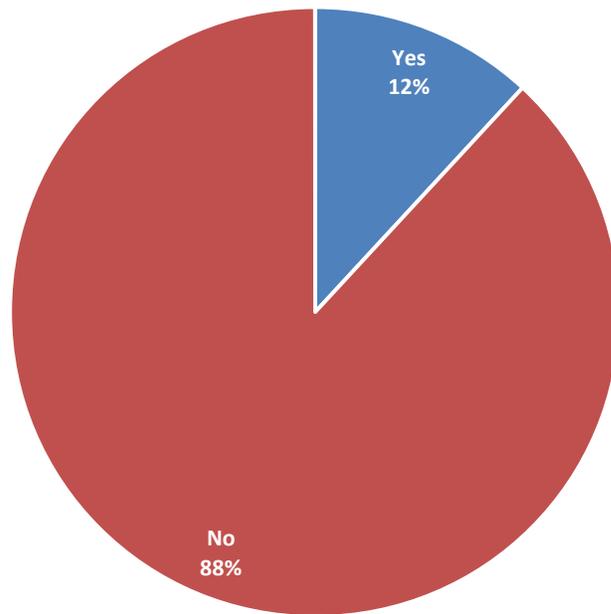


Figure 8. Bill Under Own NPI Number

Figure 13 shows most respondents do not bill under their own NPI number.

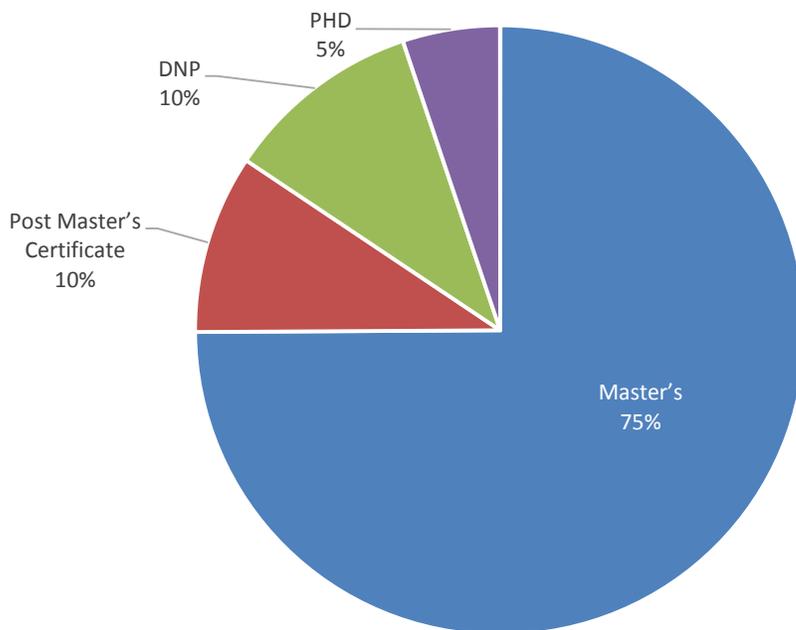


Figure 9. Highest Nursing Degree

Figure 14 shows most respondents' (75%) highest degree in nursing is a Master's degree.

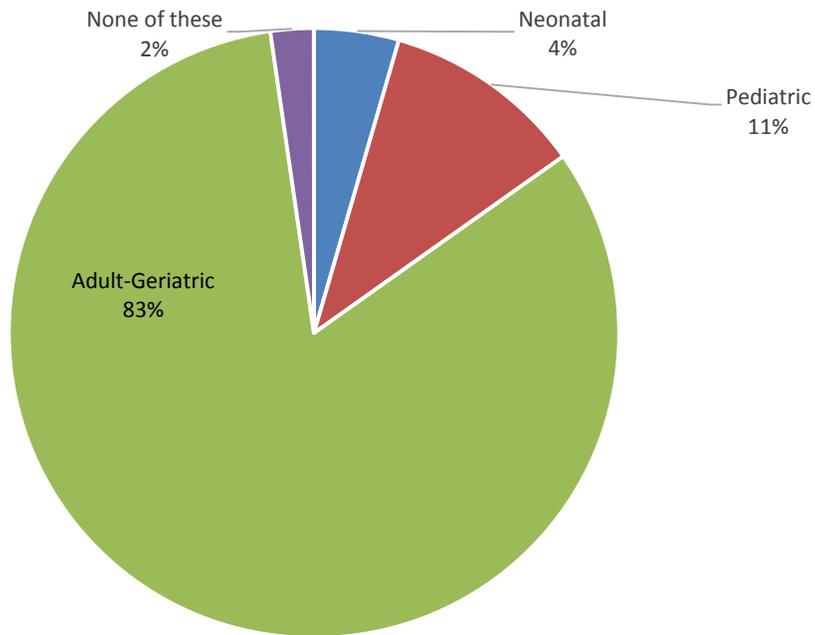


Figure 10. Primary Population

Respondents were asked to indicate the population that they primarily work with. *Figure 15* shows that most respondents (83%) primarily work with the adult-geriatric population.

Mean Ratings

Descriptive data for each of the 496 patient care problems from across the lifespan (192 adult-specific, 184 pediatric-specific, and 120 neonatal-specific patient care problems), 301 skills and procedures (159 adult-specific, 89 pediatric-specific, 53 neonatal-specific), 304 specific competencies (50 adult-specific, 116 pediatric-specific, 138 neonatal-specific), and 79 core competencies are presented in Appendix A. Included for each task is the descriptive label, number of respondents, mean significance rating, standard error, standard deviation, and the percentage of respondents not performing the task. For example, within the adult-specific patient care problems, Factors Influencing Health Status “Advance care planning” is listed as “AGT001”. Eight hundred and eighteen (818) respondents rated the task with a mean rating of 2.12, a standard error of the mean of 0.02, and a standard deviation of 0.70. The percentage of respondents who rated it as “not performed” was 3.88%. Therefore, 96.1% performed the patient care problem. The standard error indicates the “accuracy” of the mean. In this case, the “real mean” is likely to lie between 2.08 and 2.16, 95% of the time (mean +/- 2 standard errors). Appendix A will include the tasks in survey order, Appendix B will include the tasks by percent performed, and Appendix C will include the tasks by mean significance rating.

The Clinical Nurse Specialist PATF reviewed the results separately for each patient care problem, skill and procedure, and competency. They concluded that, in general, the ratings obtained in the practice analysis study were in agreement with their own judgments based on their experience in the field. Consequently, it was concluded that the job analysis survey data were adequate for defining the jobs of the Neonatal, Pediatric, and Adult-Gerontology Clinical Nurse Specialist on a national basis. Moreover, the data were judged to be sufficient for the purpose of delineating the structure and content of a voluntary national credentialing exam for AACN Certification Corporation.

Test Specifications

In developing the test specifications (or test content outline) for the exams, the judgment of the PATF was used to interpret the data gathered from the practice analysis survey. Of particular significance to a certification exam program is that the test specifications appropriately reflect the responsibilities of all groups who will participate in that program. Therefore, it is important to ensure that the test specifications and the resulting exam forms sample patient care problems, skills and procedures, and competencies that are considered to be significant responsibilities of the individuals for whom the exam is intended.

As previously discussed, Appendix C shows the mean significance ratings for each patient care problem, skill and procedure, and competency as well as percent rated as performed for each. Several decision rules were proposed for consideration by the PATF in determining which patient care problem, and skill and procedure should be excluded from the test content outline subgroup analyses. The topics chosen to eliminate Neonatal, Pediatric, and Adult-Gerontology statements are shown below. The PATF decided that none of the competencies were eligible for elimination under rules 3-12, the subgroup analyses. Rules 9-12 were only applied to the Adult-Gerontology mean significance ratings:

- 1. Overall percent of "performed" ratings**
- 2. Overall mean significance ratings for the total sample**
- 3. Comparison of mean significance ratings by region**
- 4. Comparison of mean significance ratings by Number of Beds in the Facility**
- 5. Comparison of mean significance ratings by Primary Position**
- 6. Comparison of mean significance ratings by Type of Practice**
- 7. Comparison of mean significance ratings by Primary Employer/setting**
- 8. Comparison of mean significance ratings by Number of Years of Experience as an APN**
- 9. Comparison of mean significance ratings by Size of Community**
- 10. Comparison of mean significance ratings by Highest Degree in Nursing**
- 11. Comparison of mean significance ratings by ACCNS-AG Certification**
- 12. Comparison of mean significance ratings by CCRN Certification**

The specific decision rules adopted by the PATF are discussed in detail in the following section. The first two decision rules are general and involve an analysis of all respondents. Decision rules 3 through 12 involve comparing mean ratings by subgroups. Applying these rules ensures that the resulting exam reflects the responsibilities of Neonatal, Pediatric, and Adult-Gerontology Clinical Nurse Specialists on a national basis and is representative of their typical activities. The PATF decided items should be written to reflect approved patient care problems, skills and procedures, and competencies.

Application of Decision Rules and Criteria

Rule 1. Is the patient care problem, skill and procedure, or competency performed by a majority of entry level Clinical Nurse Specialists?

By consensus, the PATF decided that a patient care problem, skill and procedure, or competency must be seen by at least 50% of the respondents in order to be included in the final test specifications. (Appendix B)

Twenty-three statements (NT: 059, 127, 129, 132, 133, 134, 135, 136, 138, 139, 149, 150, 151, 152, 155, 156, 157, 158, 159, 162, 168, 169, 170) were eliminated from the Neonatal test specifications.

Forty-five statements (PT: 013, 018, 022, 025, 026, 031, 033, 041, 071, 133, 173, 189, 193, 196, 197, 204, 206, 207, 208, 211, 214, 218, 223, 224, 225, 226, 228, 229, 235, 236, 237, 238, 239, 243, 248, 249, 251, 252, 253, 254, 255, 256, 258, 259, 268) were eliminated from the Pediatric test specifications.

One hundred and seven statements (AGT: 002, 135, 161, 164, 177, 194, 195, 196, 197, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 213, 214, 215, 217, 219, 224, 226, 227, 228, 230, 231, 234, 236, 242, 243, 244, 247, 248, 249, 251, 258, 263, 264, 265, 266, 267, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 280, 281, 282, 284, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 306, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 334, 336, 337, 340, 344, 345, 350) were eliminated from the Adult-Gerontology test specifications.

Thirty-three Neonatal statements (NT: 167, 185, 187, 188, 197, 198, 199, 203, 238, 239, 240, 242, 243, 244, 273, 275, 283, 285, 286, 287, 290, 295, 296, 297, 298, 299, 305, 307, 309, 310, 311, 324, 326) were retained by committee vote.

Rule 2. Is the patient care problem, skill and procedure, or competency considered significant to the practice of an entry level Clinical Nurse Specialist?

By consensus, the PATF decided that a mean significance rating of at least 1.75 would be used to include patient care problems, skills and procedures, and competencies. (Appendix C)

Under this rule, twenty-nine statements (NT: 008, 010, 012, 014, 017, 018, 020, 034, 036, 037, 049, 052, 055, 058, 069, 072, 073, 074, 075, 083, 087, 090, 091, 121, 131, 154, 160, 161, 172) were eliminated from the Neonatal test specifications. Sixteen additional statements (PT: 002, 006, 010, 035, 048, 057, 060, 064, 065, 067, 076, 078, 111, 127, 130, 135) were eliminated from the Pediatric test specifications. Fifty-one additional statements (AGT: 005, 006, 009, 013, 017, 022, 044, 054, 056, 071, 076, 077, 078, 079, 080, 082, 085, 087, 088, 092, 093, 095, 096, 099, 102, 103, 106, 116, 120, 128, 132, 136, 137, 138, 139, 140, 141, 142, 144, 145, 147, 151, 152, 162, 171, 176, 181, 182, 183, 184, 261) were eliminated from the Adult-Gerontology test specifications.

Two Neonatal statements (NT: 167, 241) were retained by committee vote.

Rule 3. Is the patient care problem or skill and procedure considered significant regardless of geographic region?

To determine if patient care problems and skills and procedures seen by the Clinical Nurse Specialist were viewed differently by geographic region, a comparison of the mean significance ratings between regions was made. The PATF decided to review patient care problems that had mean ratings of less than 1.7 in at least two of the four geographic subgroups. Application of this criterion helps to ensure that the exam reflects uniform practice across regions. Six additional Neonatal statements (NT: 011, 043, 044, 050, 056, 076) were removed as a result of this rule. Nine additional Pediatric statements (PT: 049, 072, 090, 118, 134, 163, 221, 233, 246) were removed as a result of this rule. Seven additional Adult-Gerontology statements (AG: T063, T068, T069, T070, T089, T091, T104) were removed as a result of this rule.

Twelve neonatal statements (NT: 015, 016, 045, 068, 093, 094, 095, 120, 124, 165, 171), forty-six pediatric statements (PT: 014, 016, 017, 029, 030, 037, 066, 073, 101, 115, 119, 123, 131, 136, 137, 138, 139, 142, 145, 147, 148, 156, 167, 175, 176, 181, 183, 187, 190, 191, 200, 201, 202, 205, 209, 212, 219, 222, 227, 250, 260, 263, 266, 271, 272, 274), and five Adult-Gerontology statements (AGT: 003, 008, 019, 235) were retained by committee vote.

Rule 4. Is the patient care problem or skill and procedure considered significant regardless of facility size?

To determine if patient care problems and skills and procedures seen by the Clinical Nurse Specialist were viewed differently by facility size, a comparison of the mean significance ratings between various sized facilities was made. The PATF decided to review problems that had mean ratings of less than 1.7 in at least two of the three facility size subgroups. Application of this criterion helps to ensure that the exam reflects uniform practice across different sized facilities. One Neonatal statement (NT101) was removed as a result of this rule.

Eight Pediatric statements (PT: 001, 011, 108, 146, 180, 184, 230, 247) were retained by committee vote.

Rule 5. Is the patient care problem or skill and procedure considered significant regardless of primary position?

To determine if patient care problems and skills and procedures seen by the Clinical Nurse Specialist were viewed differently by primary position held, a comparison of the mean significance ratings between positions was made. The PATF decided to review problems that had mean ratings of less than 1.7 in at least one of the two subgroups. Application of this criterion helps to ensure that the exam reflects uniform practice across positions.

Six Neonatal statements (NT: 021, 031, 039, 086, 099, 130), Sixteen Pediatric (PT: 002, 006, 010, 035, 048, 057, 060, 064, 065, 067, 076, 078, 111, 127, 130, 135) and three Adult-Gerontology (AGT: 073, 113, 125) were removed as a result of this rule.

Four Neonatal statements (NT: 082, 114, 147, 164), twenty-seven Pediatric statements (PT: 003, 004, 019, 021, 032, 046, 050, 051, 061, 063, 069, 087, 105, 125, 126, 169, 170, 171, 179, 186, 199, 216, 217, 241, 262, 265, 270), and four Adult-Gerontology statements (AGT: 114, 168, 170, 192) were retained by committee vote.

Rule 6. Is the patient care problem or skill and procedure considered significant regardless of type of practice?

To determine if patient care problems or skills and procedures seen by the Clinical Nurse Specialist were viewed differently by type of practice (independent, collaborative agreement, or neither), a comparison of the mean significance ratings between the subgroups was made. This rule was neither applied for Pediatric patient care problems nor skills and procedures. The PATF decided to review patient care problems that had mean ratings of less than 1.7 in at least two of the three subgroups. Application of this criterion helps to ensure that the exam reflects uniform practice across different types of practice. No additional patient care problems were removed as a result of this rule.

Rule 7. Is the patient care problem or skill and procedure considered significant regardless of primary employer/setting?

To determine if patient care problems or skills and procedures seen by the Clinical Nurse Specialist were viewed differently by primary employer/setting, a comparison of the mean significance ratings between settings was made. The PATF decided to review statements that had mean ratings of less than 1.7 in any of the subgroups for Neonatal and Pediatric and at least two for Adult-Gerontology. Application of this criterion helps to ensure that the exam reflects uniform practice across different settings. No additional patient care problems were removed as a result of this rule.

Eighteen Pediatric statements (PT: 012, 028, 039, 058, 081, 091, 107, 116, 120, 121, 140, 165, 172, 192, 203, 215, 231, 267) were retained by committee vote.

Rule 8. Is the patient care problem or skill and procedure considered significant regardless of years of experience as an advanced practice nurse?

To determine if patient care problems and skills and procedures seen by the Clinical Nurse Specialist were viewed differently by those with different amounts of experience, a comparison of the mean significance ratings was made. The PATF decided to review patient care problems that had mean ratings of less than 1.7 in either of the two subgroups to ensure problems were critical to entry level Clinical Nurse Specialists. Application of this criterion helps to ensure that the exam reflects uniform practice across years of experience. One Pediatric statement (PT055) and one Adult-Gerontology statement (AGT190) were removed as a result of this rule.

Seven Pediatric statements (PT: 008, 054, 074, 075, 096, 182, 234) were retained by committee vote.

Rule 9. Is the patient care problem or skill and procedure considered significant regardless of community size?

The following four rules below were applied to the mean significance ratings of the Adult-Gerontology patient care problems and skills and procedures. Data for the following rules were not collected for the Neonatal and Pediatric patient care problems and skills and procedures. To determine if patient care problems and skills and procedures are seen by the Clinical Nurse Specialist were viewed differently by community size, a comparison of the mean significance ratings between rural, suburban, and urban communities was made. The PATF decided to review statements that had mean ratings of less than 1.7 in at least two out of the three community subgroups. Application of this criterion helps to ensure that the exam reflects

uniform practice across communities. Three statements were removed as a result of this rule (AGT: 084, 187, 193).

Rule 10. Is the patient care problem or skill and procedure considered significant regardless of Highest Degree Achieved in Nursing?

To determine if patient care problems and skills and procedures seen by the Clinical Nurse Specialist were viewed differently across those who hold different levels of education in nursing, a comparison of the mean significance ratings across subgroups was made. The PATF decided to review statements that had mean ratings of less than 1.7 in at least two of four subgroups. Application of this criterion helps to ensure that the exam reflects uniform practice across those with different levels of education in nursing. No additional statements were removed as a result of this rule.

Rule 11. Is the patient care problem or skill and procedure significant regardless of ACCNS-AG certification?

To determine if patient care problems seen by the Clinical Nurse Specialist were viewed differently by those who did and did not hold the ACCNS-AG certification, a comparison of the mean significance ratings was made. The PATF decided to review the patient care problem ratings of those who held the ACCNS-AG certification. The PATF decided to review statements that had mean ratings of less than 1.7 in either subgroup. Application of this criterion helps to ensure that the exam reflects population-specific practice as determined by those who are most familiar with the population. No additional statements were removed as a result of this rule. One Adult-Gerontology task (AGT261) was retained by committee vote.

Rule 12. Is the patient care problem or skill and procedure considered significant regardless of CCRN certification?

To determine if patient care problems and skills and procedures seen by the Clinical Nurse Specialist were viewed differently by those who did and did not hold the CCRN certification, a comparison of the mean significance ratings was made. The PATF decided to review statements that had mean ratings of less than 1.7 in either subgroup. Application of this criterion helps to ensure that the exam reflects population-specific practice as determined by those who are most familiar with the population. No additional statements were removed as a result of this rule.

Edited Tasks. One patient care problem and one skill and procedure were edited by the PATF following survey distribution. Revisions are underlined.

Pediatric:

T036 1. Patient Care Problems: Pulmonary: Acute lung injury (ALI) (e.g., Acute Respiratory Distress Syndrome, ARDS)

Adult-Gerontology:

T109 Vascular malformation

T235 Interpret pulmonary function test results

T268 Support organ procurement after brain death

Decision Rule Summary

Three hundred twenty-five (325) of the 390 ACCNS-N statements were approved. This includes 84 of 120 patient care problems and 24 of 53 skills and procedures. Two hundred ninety-two (292) of the 469 ACCNS-P statements were approved. This includes 151 of 185 patient care problems and 52 of 89 skills and procedures. Three hundred eight (308) of the 480 ACCNS-AG statements were approved. This includes 123 of 192 patient care problems and 56 of 159 skills and procedures.

Appendix D presents the Detailed Content Outline (DCO) for the multiple choice exam developed after the application of the decision rules and review of respondent comments.

Development of Multiple-Choice Detailed Test Content Outline and Test Specifications

The PATF reviewed the patient care problems, skills, procedures, and competencies that remained after application of the above decision rules. They considered the mean significance ratings for each of the content categories, as well as the number of remaining patient care problems and competencies in each category. The PATF used this information, along with current test specifications to guide their final decisions regarding the number of items for each of the areas of practice. The goal was to distribute items in accordance with known working patterns across the content areas. The final item distributions are presented in Table 5.

Table 5. AACN Neonatal Clinical Nurse Specialist, Wellness Through Acute Care, Certification Item Allocation

Section Title	# of items	% of exam
I. Clinical Judgment	98	65
A. Cardiovascular	11	7
B. Pulmonary	16	11
C. Endocrine	4	3
D. Hematology/Immunology/Oncology	5	3
E. Gastrointestinal	7	5
F. Renal/Genitourinary	6	4
G. Integumentary	5	3
H. Musculoskeletal	5	3
I. Neurology	9	6
J. Psychosocial, Behavioral and Cognitive Health Issues	5	3
K. Factors Influencing Health Status	9	6
L. Multisystem	16	11
II. Professional Caring and Ethical Practice	52	35
A. Advocacy and Moral Agency	6	4
B. Caring Practices	9	6
C. Response to Diversity	4	3
D. Facilitation of Learning	7	5
E. Collaboration	8	5
F. Systems Thinking	9	6
G. Clinical Inquiry	9	6
Total	150	

Summary

The practice analysis described in this report was undertaken to serve as the basis for documenting the content validity of the Clinical Nurse Specialist certification exams for AACN Certification Corporation. The purpose of this study was twofold: (1) to determine and comprehensively describe the job of the Clinical Nurse Specialist, and (2) to evaluate these descriptions through the ratings of job experts to define areas that should be assessed on a certification exam.

A Practice Analysis Task Force was formed to prepare a comprehensive list of patient care problems, skills and procedures, and competencies describing the job. This inventory was completed by a representative sample of job experts throughout the United States, and the rating results were reviewed by the Clinical Nurse Specialist exam committees. These results were used to develop test specifications directly related to the significant activities performed by the Clinical Nurse Specialist. These test specifications, empirically derived from a national practice analysis study, represent the plan for development of criterion-referenced exams. Each form of each exam will contain the specified number of items, with a representative sampling of patient care problems, skills and procedures, and competencies within each domain. Each test form developed to match these job-related test specifications will demonstrate substantial evidence of content validity.

Appendix A. Tasks in Survey Order

Key	
	In by committee vote during current rule
	Eliminated under current rule /Out by committee vote during current rule
	In by committee vote during previous or subsequent rule
	Eliminated under previous or subsequent rule/Out by committee vote on previous or subsequent rule

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT001	I. Patient Care Problems: A. Factors Influencing Health Status (risk assessment, prevention and wellness): Discharge planning	45	2.31	0.10	0.67	0	100.0%
NT002	I. Patient Care Problems: A. Factors Influencing Health Status (risk assessment, prevention and wellness): Feeding (e.g., breast, cue-based, techniques)	46	2.54	0.10	0.66	0	100.0%
NT003	I. Patient Care Problems: A. Factors Influencing Health Status (risk assessment, prevention and wellness): Monitoring anthropometric measurements	39	2.05	0.12	0.72	7	84.8%
NT004	I. Patient Care Problems: A. Factors Influencing Health Status (risk assessment, prevention and wellness): Safety (e.g., safe sleep)	46	2.61	0.09	0.58	0	100.0%
NT005	I. Patient Care Problems: A. Factors Influencing Health Status (risk assessment, prevention and wellness): Screening (e.g., hearing, CCHD, metabolic, car seat challenge, ROP)	44	2.45	0.09	0.63	2	95.7%
NT006	I. Patient Care Problems: A. Factors Influencing Health Status (risk assessment, prevention and wellness): Wellness promotion (e.g., normal variants, immunizations)	45	2.09	0.10	0.70	1	97.8%
NT007	I. Patient Care Problems: A. Factors Influencing Health Status (risk assessment, prevention and wellness): Developmental care	46	2.67	0.08	0.56	0	100.0%

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Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT008	I. Patient Care Problems: B. Cardiovascular: Acute inflammatory disease (e.g., myocarditis, endocarditis, pericarditis)	34	1.47	0.12	0.71	10	77.3%
NT009	I. Patient Care Problems: B. Cardiovascular: Cardiac surgery	33	1.76	0.12	0.71	11	75.0%
NT010	I. Patient Care Problems: B. Cardiovascular: Cardiac tamponade	36	1.44	0.12	0.69	8	81.8%
NT011	I. Patient Care Problems: B. Cardiovascular: Cardiogenic shock	38	1.74	0.13	0.79	6	86.4%
NT012	I. Patient Care Problems: B. Cardiovascular: Cardiomyopathies (e.g., hypertrophic, dilated, restrictive, idiopathic)	34	1.53	0.11	0.61	9	79.1%
NT013	I. Patient Care Problems: B. Cardiovascular: Congenital heart defects	42	2.43	0.10	0.67	2	95.5%
NT014	I. Patient Care Problems: B. Cardiovascular: Decompensated heart failure	35	1.66	0.11	0.64	9	79.5%
NT015	I. Patient Care Problems: B. Cardiovascular: Dysrhythmias	41	1.61	0.10	0.67	3	93.2%
NT016	I. Patient Care Problems: B. Cardiovascular: Heart failure	38	1.61	0.11	0.68	6	86.4%
NT017	I. Patient Care Problems: B. Cardiovascular: Hypertension	39	1.67	0.11	0.66	5	88.6%
NT018	I. Patient Care Problems: B. Cardiovascular: Hypertensive crisis	29	1.45	0.13	0.69	15	65.9%
NT019	I. Patient Care Problems: B. Cardiovascular: Patent Ductus Arteriosus (PDA)	42	2.62	0.09	0.58	2	95.5%
NT020	I. Patient Care Problems: B. Cardiovascular: Peripheral vascular insufficiency (e.g., acute, arterial occlusion)	28	1.50	0.12	0.64	16	63.6%
NT021	I. Patient Care Problems: B. Cardiovascular: Pulmonary edema	41	1.83	0.11	0.70	2	95.3%
NT022	I. Patient Care Problems: C. Pulmonary: Acute respiratory failure	44	2.66	0.09	0.57	0	100.0%
NT023	I. Patient Care Problems: C. Pulmonary: Air-leak syndromes (e.g., pneumothorax, pulmonary interstitial emphysema [PIE], pneumopericardium, pneumomediastinum)	43	2.51	0.09	0.59	1	97.7%

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Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT024	I. Patient Care Problems: C. Pulmonary: Airway obstruction	43	2.07	0.12	0.77	1	97.7%
NT025	I. Patient Care Problems: C. Pulmonary: Apnea of prematurity	43	2.72	0.08	0.50	1	97.7%
NT026	I. Patient Care Problems: C. Pulmonary: Aspirations (e.g., meconium aspiration)	43	2.49	0.09	0.59	0	100.0%
NT027	I. Patient Care Problems: C. Pulmonary: Bronchopulmonary dysplasia	43	2.65	0.07	0.48	1	97.7%
NT028	I. Patient Care Problems: C. Pulmonary: Congenital anomalies	43	2.56	0.09	0.59	1	97.7%
NT029	I. Patient Care Problems: C. Pulmonary: Exacerbation of chronic lung disease	42	2.38	0.11	0.73	2	95.5%
NT030	I. Patient Care Problems: C. Pulmonary: Persistent pulmonary hypertension of the newborn (PPHN)	43	2.49	0.10	0.67	1	97.7%
NT031	I. Patient Care Problems: C. Pulmonary: Pulmonary arterial hypertension	43	1.70	0.13	0.83	1	97.7%
NT032	I. Patient Care Problems: C. Pulmonary: Pulmonary hemorrhage	43	1.86	0.12	0.80	1	97.7%
NT033	I. Patient Care Problems: C. Pulmonary: Pulmonary infections	43	2.12	0.12	0.76	1	97.7%
NT034	I. Patient Care Problems: C. Pulmonary: Reactive airway disease	39	1.74	0.14	0.85	5	88.6%
NT035	I. Patient Care Problems: C. Pulmonary: Respiratory distress syndrome (e.g., surfactant deficiency)	44	2.84	0.06	0.43	0	100.0%
NT036	I. Patient Care Problems: C. Pulmonary: Thoracic and pulmonary trauma and injuries	25	1.48	0.15	0.77	19	56.8%
NT037	I. Patient Care Problems: C. Pulmonary: Thoracic surgery (e.g., pneumonectomy, lobectomy, tracheal surgery)	32	1.66	0.12	0.70	12	72.7%
NT038	I. Patient Care Problems: C. Pulmonary: Transient tachypnea of the newborn	43	2.30	0.11	0.74	1	97.7%
NT039	I. Patient Care Problems: D. Endocrine: Adrenal disorders	40	1.58	0.10	0.64	4	90.9%
NT040	I. Patient Care Problems: D. Endocrine: Hyperglycemia	43	2.02	0.11	0.74	0	100.0%
NT041	I. Patient Care Problems: D. Endocrine: Hypoglycemia	44	2.55	0.10	0.66	0	100.0%

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT042	I. Patient Care Problems: D. Endocrine: Infant of diabetic mother	43	2.53	0.10	0.63	1	97.7%
NT043	I. Patient Care Problems: D. Endocrine: Syndrome of inappropriate secretion of antidiuretic hormone (SIADH)	42	1.57	0.10	0.67	2	95.5%
NT044	I. Patient Care Problems: D. Endocrine: Thyroid disorders	40	1.48	0.09	0.60	4	90.9%
NT045	I. Patient Care Problems: E. Musculoskeletal: Bone disease (e.g., osteopenia, osteogenesis imperfecta)	41	1.56	0.10	0.63	2	95.3%
NT046	I. Patient Care Problems: E. Musculoskeletal: Congenital anomalies	42	2.31	0.10	0.64	1	97.7%
NT047	I. Patient Care Problems: E. Musculoskeletal: Functional issues (e.g., immobility, birth injuries)	42	1.86	0.11	0.68	1	97.7%
NT048	I. Patient Care Problems: E. Musculoskeletal: Infections (e.g., cellulitis)	41	2.07	0.11	0.69	2	95.3%
NT049	I. Patient Care Problems: E. Musculoskeletal: Traumatic fractures	36	1.36	0.10	0.59	7	83.7%
NT050	I. Patient Care Problems: F. Hematology/Immunology/Oncology: AIDS and HIV	39	1.23	0.07	0.43	3	92.9%
NT051	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Anemia	40	2.20	0.10	0.65	2	95.2%
NT052	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Autoimmune diseases	37	1.49	0.11	0.65	4	90.2%
NT053	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Blood group incompatibilities	40	2.03	0.11	0.70	2	95.2%
NT054	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Coagulopathies (including thrombocytopenia)	41	2.02	0.11	0.69	1	97.6%
NT055	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Hematologic and solid tumors	30	1.33	0.10	0.55	11	73.2%
NT056	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Hemorrhagic disease of the newborn	39	1.77	0.11	0.71	3	92.9%

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Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT057	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Hyperbilirubinemia	42	2.62	0.10	0.62	0	100.0%
NT058	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Immune deficiency disorders	38	1.58	0.11	0.68	3	92.7%
NT059	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Organ and tissue transplantation and associated problems	17	1.24	0.11	0.44	25	40.5%
NT060	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Polycythemia	40	1.80	0.11	0.72	2	95.2%
NT061	I. Patient Care Problems: G. Neurology: Congenital neurological abnormalities	41	2.15	0.11	0.69	1	97.6%
NT062	I. Patient Care Problems: G. Neurology: Encephalopathy	41	2.15	0.12	0.76	1	97.6%
NT063	I. Patient Care Problems: G. Neurology: Head and brain trauma/injury	39	2.00	0.13	0.79	3	92.9%
NT064	I. Patient Care Problems: G. Neurology: Hydrocephalus	42	2.12	0.12	0.77	0	100.0%
NT065	I. Patient Care Problems: G. Neurology: Hypoxic ischemic encephalopathy	41	2.49	0.10	0.64	0	100.0%
NT066	I. Patient Care Problems: G. Neurology: Increased intracranial pressure	41	1.85	0.13	0.82	1	97.6%
NT067	I. Patient Care Problems: G. Neurology: Intracranial hemorrhage/intraventricular hemorrhage	42	2.45	0.11	0.71	0	100.0%
NT068	I. Patient Care Problems: G. Neurology: Neurologic infectious diseases	40	1.73	0.12	0.75	2	95.2%
NT069	I. Patient Care Problems: G. Neurology: Neuromuscular disorders	39	1.59	0.12	0.75	2	95.1%
NT070	I. Patient Care Problems: G. Neurology: Periventricular leukomalacia	40	2.13	0.12	0.76	2	95.2%
NT071	I. Patient Care Problems: G. Neurology: Seizure disorders	40	2.08	0.12	0.76	1	97.6%
NT072	I. Patient Care Problems: G. Neurology: Space-occupying lesions	35	1.37	0.11	0.65	7	83.3%

Clinical Nurse Specialist – Wellness Through Acute Care Job Analysis

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT073	I. Patient Care Problems: G. Neurology: Spinal cord injury	23	1.43	0.14	0.66	19	54.8%
NT074	I. Patient Care Problems: G. Neurology: Stroke	28	1.25	0.10	0.52	14	66.7%
NT075	I. Patient Care Problems: G. Neurology: Vascular malformation	35	1.57	0.12	0.70	7	83.3%
NT076	I. Patient Care Problems: H. Gastrointestinal: GI hemorrhage	37	1.59	0.14	0.83	2	94.9%
NT077	I. Patient Care Problems: H. Gastrointestinal: Bowel infarction/obstruction/perforation	41	2.44	0.11	0.71	0	100.0%
NT078	I. Patient Care Problems: H. Gastrointestinal: Gastro-esophageal reflux	41	2.29	0.12	0.75	0	100.0%
NT079	I. Patient Care Problems: H. Gastrointestinal: GI abnormalities	41	2.20	0.11	0.68	0	100.0%
NT080	I. Patient Care Problems: H. Gastrointestinal: GI motility disorders	40	2.08	0.12	0.73	1	97.6%
NT081	I. Patient Care Problems: H. Gastrointestinal: GI surgeries	37	2.30	0.13	0.78	4	90.2%
NT082	I. Patient Care Problems: H. Gastrointestinal: Hepatic failure	37	1.65	0.12	0.72	4	90.2%
NT083	I. Patient Care Problems: H. Gastrointestinal: Hepatitis	33	1.55	0.13	0.75	8	80.5%
NT084	I. Patient Care Problems: H. Gastrointestinal: Feeding intolerance	41	2.56	0.10	0.63	0	100.0%
NT085	I. Patient Care Problems: H. Gastrointestinal: Necrotizing enterocolitis	41	2.49	0.11	0.68	0	100.0%
NT086	I. Patient Care Problems: I. Renal/Genitourinary: Acute kidney injury	36	1.81	0.13	0.79	4	90.0%
NT087	I. Patient Care Problems: I. Renal/Genitourinary: Chronic kidney disease	32	1.53	0.13	0.72	8	80.0%
NT088	I. Patient Care Problems: I. Renal/Genitourinary: Congenital renal/genitourinary abnormalities	38	1.76	0.12	0.71	2	95.0%
NT089	I. Patient Care Problems: I. Renal/Genitourinary: Infections	39	2.28	0.13	0.79	1	97.5%
NT090	I. Patient Care Problems: I. Renal/Genitourinary: Renal and genitourinary surgeries	32	1.59	0.09	0.50	8	80.0%
NT091	I. Patient Care Problems: I. Renal/Genitourinary: Renal calculi	26	1.38	0.11	0.57	14	65.0%

Clinical Nurse Specialist – Wellness Through Acute Care Job Analysis

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT092	I. Patient Care Problems: J. Integumentary: Congenital abnormalities	38	2.18	0.12	0.77	2	95.0%
NT093	I. Patient Care Problems: J. Integumentary: Dermatologic disorders	38	1.58	0.12	0.72	2	95.0%
NT094	I. Patient Care Problems: J. Integumentary: Infectious skin disorders	37	1.65	0.12	0.72	3	92.5%
NT095	I. Patient Care Problems: J. Integumentary: Pressure ulcers	34	1.76	0.13	0.74	6	85.0%
NT096	I. Patient Care Problems: J. Integumentary: Skin integrity protection for extremely low birth-weight infants.	38	2.74	0.07	0.45	2	95.0%
NT097	I. Patient Care Problems: J. Integumentary: Wounds (surgical and non-surgical)	38	2.05	0.12	0.77	2	95.0%
NT098	I. Patient Care Problems: K. Multisystem: Acid-base imbalances	40	2.58	0.09	0.55	0	100.0%
NT099	I. Patient Care Problems: K. Multisystem: Distributive shock	39	1.85	0.12	0.74	1	97.5%
NT100	I. Patient Care Problems: K. Multisystem: End of life issues	39	2.36	0.11	0.67	1	97.5%
NT101	I. Patient Care Problems: K. Multisystem: Failure to Thrive	38	1.82	0.13	0.80	2	95.0%
NT102	I. Patient Care Problems: K. Multisystem: Fluids, electrolytes and nutrition	40	2.68	0.09	0.57	0	100.0%
NT103	I. Patient Care Problems: K. Multisystem: Genetics (e.g., metabolic screening, recurrence risk, life planning)	39	2.21	0.10	0.61	1	97.5%
NT104	I. Patient Care Problems: K. Multisystem: Hospital acquired conditions (e.g., CLABSI, CAUTI, VAP/VAE)	40	2.55	0.09	0.60	0	100.0%
NT105	I. Patient Care Problems: K. Multisystem: Hypovolemic shock	40	2.18	0.13	0.81	0	100.0%
NT106	I. Patient Care Problems: K. Multisystem: Iatrogenic drug exposed newborn	38	2.39	0.13	0.79	1	97.4%
NT107	I. Patient Care Problems: K. Multisystem: Inborn errors of metabolism	39	2.03	0.12	0.74	1	97.5%

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Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT108	I. Patient Care Problems: K. Multisystem: Infectious diseases (e.g., congenital viral, bacterial, hospital acquired infections)	40	2.30	0.11	0.72	0	100.0%
NT109	I. Patient Care Problems: K. Multisystem: Low birth weight/prematurity (including late pre-term populations)	39	2.82	0.07	0.45	1	97.5%
NT110	I. Patient Care Problems: K. Multisystem: Maternal drug exposed newborn	40	2.48	0.11	0.72	0	100.0%
NT111	I. Patient Care Problems: K. Multisystem: Maternal-fetal complications (e.g., HELLP, preeclampsia)	39	2.38	0.11	0.67	0	100.0%
NT112	I. Patient Care Problems: K. Multisystem: Pain	40	2.63	0.09	0.54	0	100.0%
NT113	I. Patient Care Problems: K. Multisystem: Palliative care issues	39	2.28	0.11	0.69	1	97.5%
NT114	I. Patient Care Problems: K. Multisystem: Sensory impairment (e.g., hearing loss)	38	1.71	0.13	0.80	2	95.0%
NT115	I. Patient Care Problems: K. Multisystem: Systemic inflammatory response syndrome (SIRS)/sepsis/severe sepsis/septic shock/MODS	40	1.90	0.13	0.84	0	100.0%
NT116	I. Patient Care Problems: K. Multisystem: Thermoregulation	40	2.75	0.07	0.44	0	100.0%
NT117	I. Patient Care Problems: K. Multisystem: Transition to extrauterine life	40	2.68	0.10	0.62	0	100.0%
NT118	I. Patient Care Problems: L. Psychosocial, Behavioral and Cognitive Health Issues: Behavioral state (e.g., NPASS, Brazelton, stress in extremely low birth weight infants)	38	2.55	0.09	0.55	2	95.0%
NT119	I. Patient Care Problems: L. Psychosocial, Behavioral and Cognitive Health Issues: Developmental care (e.g., skin to skin care)	39	2.79	0.07	0.41	1	97.5%

Clinical Nurse Specialist – Wellness Through Acute Care Job Analysis

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT120	I. Patient Care Problems: L. Psychosocial, Behavioral and Cognitive Health Issues: Maltreatment (abuse/neglect/medical nonadherence)	38	1.68	0.10	0.62	2	95.0%
NT121	II. Skills and Procedures: A. Cardiovascular: Determine lead selection for ECGs	35	1.60	0.14	0.81	4	89.7%
NT122	II. Skills and Procedures: A. Cardiovascular: Direct cardiopulmonary resuscitation	39	2.23	0.12	0.74	0	100.0%
NT123	II. Skills and Procedures: A. Cardiovascular: Insert peripherally inserted central catheters (PICC)	34	2.59	0.10	0.61	4	89.5%
NT124	II. Skills and Procedures: A. Cardiovascular: Interpret ECG rhythms	38	1.58	0.11	0.68	1	97.4%
NT125	II. Skills and Procedures: A. Cardiovascular: Interpret hemodynamic values	38	2.24	0.10	0.63	1	97.4%
NT126	II. Skills and Procedures: A. Cardiovascular: Interpret non-invasive hemodynamic values	37	2.24	0.11	0.68	1	97.4%
NT127	II. Skills and Procedures: A. Cardiovascular: Manage patients with transesophageal pacemakers	15	1.40	0.16	0.63	24	38.5%
NT128	II. Skills and Procedures: A. Cardiovascular: Manage patients with arterial pressure catheters	35	2.31	0.13	0.80	4	89.7%
NT129	II. Skills and Procedures: A. Cardiovascular: Manage patients with cardiac assist devices (e.g., RVAD, BVAD, LVAD, ECMO)	15	1.80	0.22	0.86	24	38.5%
NT130	II. Skills and Procedures: A. Cardiovascular: Manage patients with central venous pressure catheters	24	2.00	0.19	0.93	15	61.5%
NT131	II. Skills and Procedures: A. Cardiovascular: Manage patients with elective cardioversion	27	1.63	0.14	0.74	12	69.2%
NT132	II. Skills and Procedures: A. Cardiovascular: Manage patients with epicardial pacemakers	14	1.36	0.17	0.63	25	35.9%
NT133	II. Skills and Procedures: A. Cardiovascular: Manage patients with implantable cardioverter defibrillators (ICD)	9	1.44	0.24	0.73	30	23.1%

Clinical Nurse Specialist – Wellness Through Acute Care Job Analysis

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT134	II. Skills and Procedures: A. Cardiovascular: Manage patients with permanent transvenous pacemakers	9	1.44	0.24	0.73	30	23.1%
NT135	II. Skills and Procedures: A. Cardiovascular: Manage patients with temporary transvenous pacemakers	10	1.40	0.22	0.70	29	25.6%
NT136	II. Skills and Procedures: A. Cardiovascular: Manage patients with transcutaneous (external) pacemakers	10	1.20	0.20	0.63	29	25.6%
NT137	II. Skills and Procedures: A. Cardiovascular: Remove peripherally inserted central catheters (PICC)	29	2.72	0.13	0.70	10	74.4%
NT138	II. Skills and Procedures: B. Pulmonary: Assist with bronchial alveolar lavage	15	1.27	0.18	0.70	23	39.5%
NT139	II. Skills and Procedures: B. Pulmonary: Assist with bronchoscopy	13	1.31	0.21	0.75	25	34.2%
NT140	II. Skills and Procedures: B. Pulmonary: Manage a patient receiving surfactant therapy	30	2.67	0.14	0.76	8	78.9%
NT141	II. Skills and Procedures: B. Pulmonary: Manage patients receiving mechanical ventilation	31	2.81	0.11	0.60	7	81.6%
NT142	II. Skills and Procedures: B. Pulmonary: Manage patients receiving nitric oxide	26	2.85	0.11	0.54	12	68.4%
NT143	II. Skills and Procedures: B. Pulmonary: Manage patients receiving non-invasive support	32	2.88	0.09	0.49	6	84.2%
NT144	II. Skills and Procedures: B. Pulmonary: Manage patients with chest tubes	25	2.84	0.11	0.55	13	65.8%
NT145	II. Skills and Procedures: B. Pulmonary: Perform arterial punctures	19	2.37	0.22	0.96	19	50.0%
NT146	II. Skills and Procedures: C. Endocrine: Glycemic management	28	2.86	0.10	0.52	10	73.7%
NT147	II. Skills and Procedures: D. Hematology/Immunology/Oncology: Manage patients with exchange transfusions	20	1.90	0.23	1.02	18	52.6%
NT148	II. Skills and Procedures: E. Neurology: Assist with lumbar puncture	23	2.13	0.21	1.01	15	60.5%

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Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT149	II. Skills and Procedures: E. Neurology: Manage patients with cerebral oxygenation monitoring devices	17	1.94	0.25	1.03	21	44.7%
NT150	II. Skills and Procedures: E. Neurology: Manage patients with epidural catheters	14	1.14	0.14	0.53	24	36.8%
NT151	II. Skills and Procedures: E. Neurology: Manage patients with intraventricular ICP monitoring devices	12	1.50	0.26	0.90	26	31.6%
NT152	II. Skills and Procedures: E. Neurology: Manage patients with ventricular reservoirs/shunts	17	1.82	0.25	1.01	21	44.7%
NT153	II. Skills and Procedures: E. Neurology: Manage patients with whole body/head therapeutic hypothermia	23	2.65	0.16	0.78	14	62.2%
NT154	II. Skills and Procedures: F. Gastrointestinal: Insert postpyloric feeding tubes	19	1.63	0.22	0.96	18	51.4%
NT155	II. Skills and Procedures: F. Gastrointestinal: Manage patients with G tube	16	2.50	0.22	0.89	21	43.2%
NT156	II. Skills and Procedures: G. Renal/Genitourinary: Maintain dialysis catheters	7	1.86	0.40	1.07	30	18.9%
NT157	II. Skills and Procedures: G. Renal/Genitourinary: Manage patients receiving peritoneal dialysis	10	1.60	0.31	0.97	27	27.0%
NT158	II. Skills and Procedures: G. Renal/Genitourinary: Manage patients receiving renal replacement therapies	7	1.29	0.29	0.76	30	18.9%
NT159	II. Skills and Procedures: G. Renal/Genitourinary: Manage patients with flush renal stent	5	1.00	0.00	0.00	32	13.5%
NT160	II. Skills and Procedures: H. Musculoskeletal: Apply orthotic devices	22	1.18	0.13	0.59	15	59.5%
NT161	II. Skills and Procedures: H. Musculoskeletal: Manage patients with casting/splinting	22	1.18	0.13	0.59	15	59.5%
NT162	II. Skills and Procedures: I. Integumentary: Consult for patients with ostomy devices	15	2.07	0.27	1.03	22	40.5%

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT163	II. Skills and Procedures: I. Integumentary: Consult for patients with/at risk for pressure areas	23	2.30	0.20	0.97	14	62.2%
NT164	II. Skills and Procedures: I. Integumentary: Provide wound care	23	1.96	0.21	1.02	14	62.2%
NT165	II. Skills and Procedures: J. Multisystem: Interpret diagnostic imaging	22	1.82	0.21	1.01	15	59.5%
NT166	II. Skills and Procedures: J. Multisystem: Interpret laboratory results	24	2.42	0.19	0.93	13	64.9%
NT167	II. Skills and Procedures: J. Multisystem: Order diagnostic imaging	14	2.29	0.27	0.99	23	37.8%
NT168	II. Skills and Procedures: J. Multisystem: Order laboratory tests	12	2.67	0.22	0.78	25	32.4%
NT169	II. Skills and Procedures: J. Multisystem: Perform RetCam	3	1.00	0.00	0.00	34	8.1%
NT170	II. Skills and Procedures: J. Multisystem: Prescribe specialty formula/supplements	13	2.23	0.28	1.01	24	35.1%
NT171	II. Skills and Procedures: K. Behavioral: De-escalation techniques (e.g., crisis prevention)	22	1.45	0.18	0.86	15	59.5%
NT172	II. Skills and Procedures: K. Behavioral: Manage assaultive behavior	21	1.19	0.13	0.60	16	56.8%
NT173	II. Skills and Procedures: K. Behavioral: Manage patients with neonatal abstinence syndrome	24	2.75	0.14	0.68	13	64.9%
NT174	III. NEO Competencies: A. Direct Care Competency: Conducts a comprehensive history and assessment of the neonate/infant and family, using known or innovative evidence-based techniques, tools, and direct and indirect methods	19	2.26	0.23	0.99	14	57.6%
NT175	III. NEO Competencies: A. Direct Care Competency: Develops a comprehensive database (both disease and non-disease factors) that includes pertinent history, diagnostic tests, and physical assessment	18	2.33	0.23	0.97	15	54.5%

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Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT176	III. NEO Competencies: A. Direct Care Competency: Distinguishes between normal, variations of normal and abnormal findings, including developmental, physiologic, and behavioral states	19	2.68	0.17	0.75	14	57.6%
NT177	III. NEO Competencies: A. Direct Care Competency: Assesses the effects of interactions among the neonate/infant, family, and the community on the patient/family dyad	17	2.76	0.16	0.66	16	51.5%
NT178	III. NEO Competencies: A. Direct Care Competency: Identifies potential risks to patient safety, the patient/family dyad, and quality of care	19	3.00	0.00	0.00	14	57.6%
NT179	III. NEO Competencies: A. Direct Care Competency: Identifies evidence-based clinical practice guidelines to guide screening, diagnosis, and management of the neonate/infant	24	3.00	0.00	0.00	9	72.7%
NT180	III. NEO Competencies: A. Direct Care Competency: Develops a plan of care and interventions according to established protocol and current standards of care	20	2.80	0.14	0.62	13	60.6%
NT181	III. NEO Competencies: A. Direct Care Competency: Develops a plan of care based on scientific evidence and practice guidelines	23	2.83	0.12	0.58	10	69.7%
NT182	III. NEO Competencies: A. Direct Care Competency: Develops interventions to promote patient safety, strengthen the patient/family dyad, and improve the quality of care	19	2.79	0.14	0.63	14	57.6%
NT183	III. NEO Competencies: A. Direct Care Competency: Provides developmentally appropriate care	20	2.80	0.14	0.62	13	60.6%
NT184	III. NEO Competencies: A. Direct Care Competency: Applies principles of pain management to care	20	3.00	0.00	0.00	13	60.6%
NT185	III. NEO Competencies: A. Direct Care Competency: Applies end-of-life and palliative care principles to the delivery of care	16	2.88	0.13	0.50	17	48.5%

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Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT186	III. NEO Competencies: A. Direct Care Competency: Uses therapeutic communication skills with special attention to the capacities and needs of the neonate/infant and family	20	2.80	0.14	0.62	13	60.6%
NT187	III. NEO Competencies: A. Direct Care Competency: Prescribes nursing therapeutics, pharmacologic and nonpharmacologic interventions, diagnostic measures, equipment, procedures, and treatments to meet the needs of neonates/infants, families, and groups, in accordance with professional preparation, institutional privileges, and state and federal laws and practice acts	12	2.50	0.26	0.90	21	36.4%
NT188	III. NEO Competencies: A. Direct Care Competency: Provides direct care to selected neonates/infants and families based on the needs of the patient and the CNS's specialty knowledge and skills	15	2.33	0.25	0.98	18	45.5%
NT189	III. NEO Competencies: A. Direct Care Competency: Recognizes opportunities for staff development of programs and process changes to improve cost-effectiveness	22	3.00	0.00	0.00	11	66.7%
NT190	III. NEO Competencies: A. Direct Care Competency: Recognizes nursing practice/performance improvement opportunities with consideration of safety, timeliness, effectiveness, efficacy, and patient-centered care at the unit level	23	3.00	0.00	0.00	10	69.7%
NT191	III. NEO Competencies: A. Direct Care Competency: Aligns nursing practice with evidence-based information to achieve nurse-sensitive outcomes for the unit population	27	3.00	0.00	0.00	6	81.8%
NT192	III. NEO Competencies: A. Direct Care Competency: Participates in unit-based planning for data collection and quality monitoring	24	3.00	0.00	0.00	9	72.7%
NT193	III. NEO Competencies: A. Direct Care Competency: Develops and implements audits at the unit level	19	2.79	0.14	0.63	14	57.6%

Clinical Nurse Specialist – Wellness Through Acute Care Job Analysis

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT194	III. NEO Competencies: A. Direct Care Competency: Recognizes when evidence-based guidelines, policies, or procedures fail to meet the needs of the individual neonate/infant and family	22	3.00	0.00	0.00	11	66.7%
NT195	III. NEO Competencies: A. Direct Care Competency: Tailors the plan of care as indicated	20	2.70	0.16	0.73	13	60.6%
NT196	III. NEO Competencies: A. Direct Care Competency: Communicates to the healthcare team the rationale for any deviations from the established guidelines, policies, or procedures	21	3.00	0.00	0.00	12	63.6%
NT197	III. NEO Competencies: B. Consultation Competency: Assesses the needs, preferences, and strengths of the neonate/infant and family and recommends a healthcare plan in order to optimize health outcomes	15	2.20	0.26	1.01	17	46.9%
NT198	III. NEO Competencies: B. Consultation Competency: Seeks applicable nursing, medical staff, and interdisciplinary input regarding the healthcare plan	14	2.86	0.14	0.53	18	43.8%
NT199	III. NEO Competencies: B. Consultation Competency: Identifies gaps in care requiring additional resources to achieve identified outcomes	13	2.85	0.15	0.55	19	40.6%
NT200	III. NEO Competencies: B. Consultation Competency: Communicates consultation findings to the family and members of the healthcare team and completes the necessary documentation	18	2.22	0.24	1.00	13	58.1%
NT201	III. NEO Competencies: B. Consultation Competency: Applies data collected from consultations to plan or revise care for the individual patient or family	16	2.13	0.26	1.02	16	50.0%
NT202	III. NEO Competencies: C: Systems Leadership Competency: Operates primarily at the unit level	20	2.20	0.22	1.01	11	64.5%

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT203	III. NEO Competencies: C: Systems Leadership Competency: Identifies population variables at the unit level.	14	3.00	0.00	0.00	17	45.2%
NT204	III. NEO Competencies: C: Systems Leadership Competency: Identifies unit environment variables that influence nursing practice	16	3.00	0.00	0.00	15	51.6%
NT205	III. NEO Competencies: C: Systems Leadership Competency: Develops constructive relationships across disciplines and departments	24	3.00	0.00	0.00	7	77.4%
NT206	III. NEO Competencies: C: Systems Leadership Competency: Evaluates unit-level culture and practices for safety implications	20	2.90	0.10	0.45	11	64.5%
NT207	III. NEO Competencies: C: Systems Leadership Competency: Designs and implements safety systems within the home unit	20	2.60	0.18	0.82	11	64.5%
NT208	III. NEO Competencies: C: Systems Leadership Competency: Includes staff in the development of safety programs	23	2.83	0.12	0.58	8	74.2%
NT209	III. NEO Competencies: C: Systems Leadership Competency: Identifies the need for evidence-based practice changes	25	3.00	0.00	0.00	6	80.6%
NT210	III. NEO Competencies: C: Systems Leadership Competency: Provides summaries of the evidence basis for proposed practice change	23	3.00	0.00	0.00	8	74.2%
NT211	III. NEO Competencies: C: Systems Leadership Competency: Provides unit leadership members with evidence regarding the impact of personnel practices on safe patient care and workforce maintenance	23	2.83	0.12	0.58	8	74.2%
NT212	III. NEO Competencies: C: Systems Leadership Competency: Provides evidence-based information on work-related self-care to staff	18	2.33	0.23	0.97	13	58.1%

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Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT213	III. NEO Competencies: C: Systems Leadership Competency: Provides clinical expertise to collaborative, consensus-based work teams to develop clinical programs related to patient and family care	21	3.00	0.00	0.00	10	67.7%
NT214	III. NEO Competencies: C: Systems Leadership Competency: Leads unit-level groups to develop standards, policies, and procedures related to care of the neonate/infant and family	20	2.90	0.10	0.45	11	64.5%
NT215	III. NEO Competencies: C: Systems Leadership Competency: Builds partnerships with unit-based staff and leadership	20	3.00	0.00	0.00	10	66.7%
NT216	III. NEO Competencies: C: Systems Leadership Competency: Identifies general transition resources needed by neonates/infants and families upon discharge	15	2.33	0.25	0.98	15	50.0%
NT217	III. NEO Competencies: C: Systems Leadership Competency: Evaluates use of products and services for appropriateness and cost/benefit in meeting care needs	18	2.56	0.20	0.86	12	60.0%
NT218	III. NEO Competencies: C: Systems Leadership Competency: Communicates the above findings to staff members in collaboration with unit management	19	2.79	0.14	0.63	12	61.3%
NT219	III. NEO Competencies: C: Systems Leadership Competency: Identifies nurse-sensitive outcomes related to the neonate/infant and family	18	3.00	0.00	0.00	13	58.1%
NT220	III. NEO Competencies: C: Systems Leadership Competency: Collaborates to establish appropriate metrics for these outcomes	20	2.90	0.10	0.45	11	64.5%
NT221	III. NEO Competencies: C: Systems Leadership Competency: Collaborates to develop data sources for these metrics	22	2.73	0.15	0.70	9	71.0%
NT222	III. NEO Competencies: C: Systems Leadership Competency: Collects baseline data for these outcomes	16	3.00	0.00	0.00	15	51.6%

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT223	III. NEO Competencies: C: Systems Leadership Competency: Identifies evidence-based practices that have a positive impact on nurse-sensitive outcomes of interest	20	2.90	0.10	0.45	11	64.5%
NT224	III. NEO Competencies: C: Systems Leadership Competency: Disseminates baseline outcomes data to unit-based teams and staff	18	2.89	0.11	0.47	13	58.1%
NT225	III. NEO Competencies: C: Systems Leadership Competency: Disseminates outcomes of system-level change to unit-based teams and staff	20	2.80	0.14	0.62	11	64.5%
NT226	III. NEO Competencies: D. Collaboration Competency: Participates on an interdisciplinary team	22	3.00	0.00	0.00	6	78.6%
NT227	III. NEO Competencies: D. Collaboration Competency: Engages participation from other team members (patients, families, physicians, and coworkers)	19	3.00	0.00	0.00	9	67.9%
NT228	III. NEO Competencies: D. Collaboration Competency: Conducts literature searches for clarification of information	17	2.88	0.12	0.49	11	60.7%
NT229	III. NEO Competencies: D. Collaboration Competency: Applies an interdisciplinary approach to the care of neonates/infants and families	22	2.91	0.09	0.43	6	78.6%
NT230	III. NEO Competencies: D. Collaboration Competency: Uses appropriate terminology, format, and technology to communicate effectively with team members and discipline experts in problem solving and decision making	20	3.00	0.00	0.00	8	71.4%
NT231	III. NEO Competencies: D. Collaboration Competency: Communicates the components of the CNS role to colleagues to increase understanding of the role's impact on quality initiatives	17	2.76	0.16	0.66	11	60.7%

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Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT232	III. NEO Competencies: D. Collaboration Competency: Participates in interdisciplinary projects	23	3.00	0.00	0.00	5	82.1%
NT233	III. NEO Competencies: D. Collaboration Competency: Participates in collaborative efforts to identify cost-saving strategies that optimize patient outcomes	17	2.88	0.12	0.49	11	60.7%
NT234	III. NEO Competencies: D. Collaboration Competency: Promotes awareness of evidence-based initiatives and healthcare policies that improve the care and discharge of neonates/infants and families	21	3.00	0.00	0.00	7	75.0%
NT235	III. NEO Competencies: D. Collaboration Competency: Engages and participates constructively with agencies	15	2.07	0.27	1.03	13	53.6%
NT236	III. NEO Competencies: D. Collaboration Competency: Participates in collaborative efforts to improve intra-agency and inter-agency communication	16	2.25	0.25	1.00	12	57.1%
NT237	III. NEO Competencies: E. Coaching and Teaching Competency: Coaches and advocates for neonates/infants and families based on their culture, religious beliefs, and health issues	16	2.50	0.22	0.89	11	59.3%
NT238	III. NEO Competencies: E. Coaching and Teaching Competency: Assists families in navigating the healthcare system to obtain the appropriate resources for their needs and problems	9	1.44	0.29	0.88	18	33.3%
NT239	III. NEO Competencies: E. Coaching and Teaching Competency: Assesses the educational needs of the neonate's/infant's family members based on their knowledge of health issues, developmental level, health literacy level, learning needs, readiness to learn, and culture and beliefs	11	1.91	0.31	1.04	16	40.7%

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT240	III. NEO Competencies: E. Coaching and Teaching Competency: Develops an education plan based the family assessment	13	1.46	0.24	0.88	14	48.1%
NT241	III. NEO Competencies: E. Coaching and Teaching Competency: Assesses neonate's/infant's family to determine the family members' education needs regarding the neonate's/infant's disease processes	15	1.67	0.25	0.98	12	55.6%
NT242	III. NEO Competencies: E. Coaching and Teaching Competency: Recognizes the family's learning needs throughout the continuum	12	1.67	0.28	0.98	15	44.4%
NT243	III. NEO Competencies: E. Coaching and Teaching Competency: Intervenes when the neonate's/infant's needs are complicated and the family's needs for education exceed those that can be met by the standard teaching content	12	2.83	0.17	0.58	14	46.2%
NT244	III. NEO Competencies: E. Coaching and Teaching Competency: Provides educational resources to the neonate's/infant's family or provides a referral to obtain information if resources are unavailable	9	1.89	0.35	1.05	18	33.3%
NT245	III. NEO Competencies: E. Coaching and Teaching Competency: Implements education needs assessment with unit-based staff	15	2.73	0.18	0.70	12	55.6%
NT246	III. NEO Competencies: E. Coaching and Teaching Competency: Develops and provides education for staff	17	2.88	0.12	0.49	10	63.0%
NT247	III. NEO Competencies: E. Coaching and Teaching Competency: Develops poster presentation or dashboard for unit to share outcomes of CNS practice, with guidance of CNS mentor, as needed	19	2.58	0.19	0.84	8	70.4%
NT248	III. NEO Competencies: E. Coaching and Teaching Competency: Shares poster presentation or dashboard at the institution's nursing professional development or quality forums	18	2.67	0.18	0.77	9	66.7%

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Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT249	III. NEO Competencies: E. Coaching and Teaching Competency: Mentors staff RNs and other neonatal providers to acquire new knowledge and skills in their bedside care	18	2.89	0.11	0.47	9	66.7%
NT250	III. NEO Competencies: E. Coaching and Teaching Competency: Provides career guidance to staff RNs in their career development via clinical advancement and/or graduate education	16	2.88	0.13	0.50	11	59.3%
NT251	III. NEO Competencies: E. Coaching and Teaching Competency: Identifies and implements evidence-based care on projects with the neonatal interdisciplinary team	19	3.00	0.00	0.00	8	70.4%
NT252	III. NEO Competencies: E. Coaching and Teaching Competency: Mentors novice members of the neonatal interdisciplinary team on the implementation of evidence-based care	16	2.88	0.13	0.50	11	59.3%
NT253	III. NEO Competencies: E. Coaching and Teaching Competency: Identifies communication strengths and weaknesses by using self-reflection and the observation of others	17	2.88	0.12	0.49	10	63.0%
NT254	III. NEO Competencies: E. Coaching and Teaching Competency: Models appropriate communication techniques in all interactions	17	2.88	0.12	0.49	10	63.0%
NT255	III. NEO Competencies: E. Coaching and Teaching Competency: Engages in conflict-resolution activities, supported by more experienced leaders	16	2.63	0.20	0.81	11	59.3%
NT256	III. NEO Competencies: F. Research and Quality Competency: Recognizes opportunities for improving clinical practice at the unit level	15	3.00	0.00	0.00	11	57.7%
NT257	III. NEO Competencies: F. Research and Quality Competency: Identifies research and best practice findings to improve clinical practice at the unit level	17	3.00	0.00	0.00	9	65.4%

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Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT258	III. NEO Competencies: F. Research and Quality Competency: Prioritizes evidence-based practice changes to address safety and quality concerns at the unit level	18	3.00	0.00	0.00	8	69.2%
NT259	III. NEO Competencies: F. Research and Quality Competency: Identifies barriers to the implementation of evidence-based practice at the unit level	17	3.00	0.00	0.00	9	65.4%
NT260	III. NEO Competencies: F. Research and Quality Competency: Develops and conducts evidence-based project at the unit level	19	3.00	0.00	0.00	7	73.1%
NT261	III. NEO Competencies: F. Research and Quality Competency: Recognizes performance improvement opportunities at the unit level	18	3.00	0.00	0.00	8	69.2%
NT262	III. NEO Competencies: F. Research and Quality Competency: Aligns nursing practice with evidence-based information to achieve nurse-sensitive outcomes for the unit population	17	3.00	0.00	0.00	9	65.4%
NT263	III. NEO Competencies: F. Research and Quality Competency: Participates in unit-based planning for data collection and quality monitoring	19	3.00	0.00	0.00	7	73.1%
NT264	III. NEO Competencies: F. Research and Quality Competency: Develops and implements audits at the unit level	15	2.87	0.13	0.52	11	57.7%
NT265	III. NEO Competencies: F. Research and Quality Competency: Advocates across interdisciplinary teams to promote evidence-based practice, research, and translation of research into best practices	19	2.89	0.11	0.46	7	73.1%
NT266	III. NEO Competencies: F. Research and Quality Competency: Identifies clinical questions suitable for clinical inquiry	14	2.86	0.14	0.53	12	53.8%
NT267	III. NEO Competencies: F. Research and Quality Competency: Conducts literature review for topics pertinent to clinical practice	17	2.88	0.12	0.49	9	65.4%

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Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT268	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Performs self-assessment to identify own personal values and beliefs that influence the provision of care as an expert clinician	13	3.00	0.00	0.00	13	50.0%
NT269	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Seeks feedback from other CNSs, advanced practice registered nurses (APRNs), and other healthcare providers within the unit	14	2.86	0.14	0.53	12	53.8%
NT270	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Models professional accountability to others	18	2.89	0.11	0.47	8	69.2%
NT271	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Identifies ethical dilemmas unique to neonatal care at the unit level	16	2.63	0.20	0.81	10	61.5%
NT272	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Identifies the need to involve the institutional ethics team in finding resolutions to the dilemmas using ethical principles	13	2.69	0.21	0.75	13	50.0%
NT273	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Analyzes the medical advances, cost, clinical effectiveness, impact on the patient and family, and the family's values	12	2.50	0.26	0.90	14	46.2%
NT274	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Encourages discussion of ethical issues, dilemmas, and principles at the unit level	13	3.00	0.00	0.00	13	50.0%
NT275	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Facilitates interdisciplinary teams to address ethical concerns, risk, benefits, and outcomes at the unit level	12	2.50	0.26	0.90	14	46.2%

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT276	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Facilitates the discussion with families of neonates/infants regarding a proposed healthcare regimen for their child, to assist parents to make informed decisions, ensuring that families have full access to and understanding of all information related to the current situation of their child	14	2.29	0.27	0.99	12	53.8%
NT277	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Participates in unit policy-making committees regarding the equitable treatment of neonates/infants and their families	17	2.76	0.16	0.66	9	65.4%
NT278	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Evaluates hospital policies for their impact on neonatal nursing care practice and neonatal/infant care	18	2.78	0.15	0.65	8	69.2%
NT279	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Promotes the role of the CNS to unit leadership, healthcare providers, and families within the neonatal unit	17	2.88	0.12	0.49	9	65.4%
NT280	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Verbalizes effective communication strategies to include appropriate methods, behaviors, and positive interventions	14	2.71	0.19	0.73	12	53.8%
NT281	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Evaluates and recommends strategies for using interventions and resources to improve communication that will provide optimal outcomes related to the health and needs of the neonate/infant and family	17	2.41	0.23	0.94	9	65.4%

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT282	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Seeks applicable input from nursing, medical staff, interdisciplinary teams, and support systems necessary for communicating the healthcare status of the neonate/infant and patient's family	14	2.71	0.19	0.73	12	53.8%
NT283	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Identifies the family's methods of communication and decision making	12	2.00	0.30	1.04	14	46.2%
NT284	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Identifies gaps in communication between family members and healthcare professionals	15	2.33	0.25	0.98	11	57.7%
NT285	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Assesses interactions of family members, including variations in social, cultural, and spiritual beliefs that may affect decision making	12	2.00	0.30	1.04	14	46.2%
NT286	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Verbalizes awareness of legal issues affecting neonate/infant care and professional practice regarding ethical decision making	11	2.45	0.28	0.93	15	42.3%
NT287	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Recognizes ethical conflicts and dilemmas and distinguishes ethical decisions to be made	11	2.45	0.28	0.93	15	42.3%
NT288	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Applies ethical principles across the spheres of influence	16	2.63	0.20	0.81	10	61.5%

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT289	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Facilitates the incorporation of strategies for evidence-based practice specific to the neonatal population into crisis management	13	2.23	0.28	1.01	12	52.0%
NT290	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Applies knowledge of and utilization of available resources to assist with crisis management	12	2.00	0.30	1.04	14	46.2%
NT291	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Conducts ongoing assessment of the neonatal intensive care unit (NICU) environment, evaluating specifically its family-centeredness and its impact on the care of the patient	16	2.88	0.13	0.50	10	61.5%
NT292	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Determines nursing practice and interventions that will promote a family-centered care environment	18	2.89	0.11	0.47	8	69.2%
NT293	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Develops a plan to assist in establishing a family-centered care environment	15	2.87	0.13	0.52	11	57.7%
NT294	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Promotes policies that further family-centered care	16	3.00	0.00	0.00	10	61.5%
NT295	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Identifies ethical and legal issues related to worth and dignity that can affect patient care and professional practice	12	2.33	0.28	0.98	14	46.2%

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT296	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Distinguishes differences in abnormal and normal behaviors related to dignity of life and death and demonstrates awareness of palliative care options	12	2.50	0.26	0.90	14	46.2%
NT297	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Identifies and communicates family functions and interactions that can affect social, cultural, and spiritual variations	11	2.45	0.28	0.93	15	42.3%
NT298	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Identifies patient and family support systems	12	2.33	0.28	0.98	14	46.2%
NT299	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Interprets the role of the CNS to the patient, family, healthcare team, and community	11	2.45	0.28	0.93	15	42.3%
NT300	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Develops and preserves a therapeutic relationship and connection with the neonate's/infant's family and other professionals in order to facilitate optimal care and patient outcomes	14	2.43	0.25	0.94	12	53.8%
NT301	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Advocates for the neonate/infant and family in the NICU	15	3.00	0.00	0.00	11	57.7%
NT302	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Models behaviors that maintain professional boundaries (e.g., in social media, social life) and assists families in acknowledging and respecting professional boundaries	15	3.00	0.00	0.00	11	57.7%

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT303	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Maintains balance between personal and professional life, using appropriate conduct in social media	15	2.87	0.13	0.52	11	57.7%
NT304	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Fosters professional accountability to self and others	18	3.00	0.00	0.00	8	69.2%
NT305	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Balances the needs of the neonate/infant and family preferences while making choices and decisions related to professional accountability	10	2.80	0.20	0.63	16	38.5%
NT306	III. NEO Competencies: I. Culturally Sensitive Care Competency: Takes leadership in demonstrating and embracing the value of diversity in caring for neonates/infants and their families as well as working with other healthcare professionals at the unit level	14	3.00	0.00	0.00	12	53.8%
NT307	III. NEO Competencies: I. Culturally Sensitive Care Competency: Performs a self-assessment of cultural values and the impact of those values on the care of the neonate/infant and family	10	2.80	0.20	0.63	16	38.5%
NT308	III. NEO Competencies: I. Culturally Sensitive Care Competency: Recognizes at the unit level the cultural dynamics of individuals from varying cultures and their effect on the care of the neonate/infant and family	13	2.85	0.15	0.55	13	50.0%
NT309	III. NEO Competencies: I. Culturally Sensitive Care Competency: Recognizes cultural diversity and seeks input for adapting care on the basis of the family's culture	10	2.80	0.20	0.63	16	38.5%
NT310	III. NEO Competencies: I. Culturally Sensitive Care Competency: Provides care on the basis of the family's belief system and learns the culture of the healthcare environment	10	2.40	0.31	0.97	16	38.5%

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT311	III. NEO Competencies: I. Culturally Sensitive Care Competency: Develops culturally sensitive practices that address cultural, ethnic, spiritual, and intergenerational or age differences among families and healthcare providers	12	2.50	0.26	0.90	14	46.2%
NT312	IV. Core Competencies: A. Direct Care Competency: Conducts comprehensive, holistic wellness and illness assessments using known or innovative evidence-based techniques, tools, and direct and indirect methods.	23	2.09	0.17	0.79	2	92.0%
NT313	IV. Core Competencies: A. Direct Care Competency: Obtains data about context and etiologies (including both non-disease and disease-related factors) necessary to formulate differential diagnoses and plans of care, and to identify and evaluate of outcomes.	23	2.17	0.15	0.72	2	92.0%
NT314	IV. Core Competencies: A. Direct Care Competency: Employs evidence-based clinical practice guidelines to guide screening and diagnosis.	22	2.55	0.11	0.51	3	88.0%
NT315	IV. Core Competencies: A. Direct Care Competency: Assesses the effects of interactions among the individual, family, community, and social systems on health and illness.	22	2.27	0.15	0.70	3	88.0%
NT316	IV. Core Competencies: A. Direct Care Competency: Identifies potential risks to patient safety, autonomy and quality of care based on assessments across the patient, nurse and system spheres of influence.	22	2.50	0.11	0.51	3	88.0%
NT317	IV. Core Competencies: A. Direct Care Competency: Assesses the impact of environmental/system factors on care.	24	2.46	0.10	0.51	1	96.0%

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Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT318	IV. Core Competencies: A. Direct Care Competency: Synthesizes assessment data, advanced knowledge, and experience, using critical thinking and clinical judgment to formulate differential diagnoses for clinical problems amenable to CNS intervention.	23	2.52	0.14	0.67	2	92.0%
NT319	IV. Core Competencies: A. Direct Care Competency: Prioritizes differential diagnoses to reflect those conditions most relevant to signs, symptoms and patterns amenable to CNS interventions.	22	2.36	0.14	0.66	3	88.0%
NT320	IV. Core Competencies: A. Direct Care Competency: Selects interventions that may include, but are not limited to: Application of advanced nursing therapies, Initiation of interdisciplinary team meetings, consultations and other communications to benefit patient care, Management of patient medications, clinical procedures and other interventions, Psychosocial support including patient counseling and spiritual interventions	22	2.45	0.14	0.67	3	88.0%
NT321	IV. Core Competencies: A. Direct Care Competency: Designs strategies, including advanced nursing therapies, to meet the multifaceted needs of complex patients and groups of patients.	23	2.48	0.12	0.59	2	92.0%
NT322	IV. Core Competencies: A. Direct Care Competency: Develops evidence-based clinical interventions and systems to achieve defined patient and system outcomes.	24	2.67	0.10	0.48	1	96.0%
NT323	IV. Core Competencies: A. Direct Care Competency: Uses advanced communication skills within therapeutic relationships to improve patient outcomes.	24	2.54	0.12	0.59	1	96.0%
NT324	IV. Core Competencies: A. Direct Care Competency: Prescribe: pharmacologic interventions	8	2.50	0.27	0.76	17	32.0%

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Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT325	IV. Core Competencies: A. Direct Care Competency: Prescribe: non-pharmacologic interventions	17	2.41	0.17	0.71	8	68.0%
NT326	IV. Core Competencies: A. Direct Care Competency: Prescribe: diagnostic measures	10	2.20	0.29	0.92	15	40.0%
NT327	IV. Core Competencies: A. Direct Care Competency: Prescribe: equipment	13	2.15	0.15	0.55	12	52.0%
NT328	IV. Core Competencies: A. Direct Care Competency: Prescribe: treatments	14	2.07	0.20	0.73	10	58.3%
NT329	IV. Core Competencies: A. Direct Care Competency: Provides direct care to selected patients based on the needs of the patient and the CNS's specialty knowledge and skills	22	1.95	0.18	0.84	3	88.0%
NT330	IV. Core Competencies: A. Direct Care Competency: Assists staff in the development of innovative, cost effective programs or protocols of care	24	2.54	0.13	0.66	1	96.0%
NT331	IV. Core Competencies: A. Direct Care Competency: Evaluates nursing practice that considers Safety, Timeliness, Effectiveness, Efficiency, Efficacy and Patient-centered care.	24	2.58	0.12	0.58	1	96.0%
NT332	IV. Core Competencies: A. Direct Care Competency: Determines when evidence based guidelines, policies, procedures and plans of care need to be tailored to the individual.	24	2.58	0.12	0.58	1	96.0%
NT333	IV. Core Competencies: A. Direct Care Competency: Differentiates between outcomes that require care process modification at the individual patient level and those that require modification at the system level.	24	2.42	0.13	0.65	1	96.0%
NT334	IV. Core Competencies: A. Direct Care Competency: Leads development of evidence-based plans for meeting individual, family, community, and population needs.	24	2.46	0.12	0.59	1	96.0%
NT335	IV. Core Competencies: A. Direct Care Competency: Provides leadership for collaborative, evidence-based revision of diagnoses and plans of care, to improve patient outcomes	23	2.65	0.10	0.49	2	92.0%

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Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT336	IV. Core Competencies: B. Consultation Competency: Provides consultation to staff nurses, medical staff and interdisciplinary colleagues	24	2.58	0.10	0.50	1	96.0%
NT337	IV. Core Competencies: B. Consultation Competency: Initiates consultation to obtain resources as necessary to facilitate progress toward achieving identified outcomes.	24	2.42	0.13	0.65	1	96.0%
NT338	IV. Core Competencies: B. Consultation Competency: Communicates consultation findings to appropriate parties consistent with professional and institutional standards.	24	2.50	0.12	0.59	1	96.0%
NT339	IV. Core Competencies: B. Consultation Competency: Analyzes data from consultations to implement practice improvements.	24	2.42	0.13	0.65	1	96.0%
NT340	IV. Core Competencies: C. Systems Leadership Competency: Facilitates the provision of clinically competent care by staff/team through education, role modeling, teambuilding, and quality monitoring.	24	2.67	0.10	0.48	1	96.0%
NT341	IV. Core Competencies: C. Systems Leadership Competency: Performs system level assessments to identify variables that influence nursing practice and outcomes, including but not limited to: Population variables, Environment, System of health care delivery, Regulatory requirements, Internal and external political influences/stability, Health care financing, Recurring practices that enhance or compromise patient or system outcomes.	24	2.38	0.15	0.71	1	96.0%
NT342	IV. Core Competencies: C. Systems Leadership Competency: Determines nursing practice and system interventions that will promote patient, family and community safety.	24	2.54	0.10	0.51	1	96.0%

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT343	IV. Core Competencies: C. Systems Leadership Competency: Uses effective strategies for changing clinician and team behavior to encourage adoption of evidence-based practices and innovations in care delivery.	24	2.67	0.10	0.48	1	96.0%
NT344	IV. Core Competencies: C. Systems Leadership Competency: Provides leadership in maintaining a supportive and healthy work environment.	24	2.54	0.10	0.51	1	96.0%
NT345	IV. Core Competencies: C. Systems Leadership Competency: Provides leadership in promoting interdisciplinary collaboration to implement outcome-focused patient care programs meeting the clinical needs of patients, families, populations and communities.	24	2.50	0.10	0.51	1	96.0%
NT346	IV. Core Competencies: C. Systems Leadership Competency: Develops age-specific clinical standards, policies and procedures.	24	2.63	0.10	0.49	1	96.0%
NT347	IV. Core Competencies: C. Systems Leadership Competency: Uses leadership, team building, negotiation, and conflict resolution skills to build partnerships within and across systems, including communities.	24	2.58	0.12	0.58	1	96.0%
NT348	IV. Core Competencies: C. Systems Leadership Competency: Coordinates the care of patients with use of system and community resources to assure successful health/illness/wellness transitions, enhance delivery of care, and achieve optimal patient outcomes.	22	2.32	0.15	0.72	3	88.0%

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT349	IV. Core Competencies: C. Systems Leadership Competency: Considers fiscal and budgetary implications in decision making regarding practice and system modifications: Evaluates use of products and services for appropriateness and cost/benefit in meeting care needs, Conducts cost/benefit analysis of new clinical technologies, Evaluates impact of introduction or withdrawal of products, services, and technologies	24	2.46	0.13	0.66	1	96.0%
NT350	IV. Core Competencies: C. Systems Leadership Competency: Leads system change to improve health outcomes through evidence based practice: Specifies expected clinical and system level outcomes., Designs programs to improve clinical and system level processes and outcomes., Facilitates the adoption of practice change	24	2.63	0.12	0.58	1	96.0%
NT351	IV. Core Competencies: C. Systems Leadership Competency: Evaluates impact of CNS and other nursing practice on systems of care using nurse-sensitive outcomes	23	2.61	0.12	0.58	2	92.0%
NT352	IV. Core Competencies: C. Systems Leadership Competency: Disseminates outcomes of system-level change internally and externally	24	2.54	0.12	0.59	1	96.0%
NT353	IV. Core Competencies: D. Collaboration Competency: Assesses the quality and effectiveness of interdisciplinary, intra-agency, and inter-agency communication and collaboration.	24	2.50	0.13	0.66	1	96.0%
NT354	IV. Core Competencies: D. Collaboration Competency: Establishes collaborative relationships within and across departments that promote patient safety, culturally competent care, and clinical excellence	24	2.67	0.10	0.48	1	96.0%

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT355	IV. Core Competencies: D. Collaboration Competency: Provides leadership for establishing, improving, and sustaining collaborative relationships to meet clinical needs.	24	2.67	0.10	0.48	1	96.0%
NT356	IV. Core Competencies: D. Collaboration Competency: Practices collegially with medical staff and other members of the healthcare team so that all providers' unique contributions to health outcomes will be enhanced.	24	2.71	0.09	0.46	1	96.0%
NT357	IV. Core Competencies: D. Collaboration Competency: Facilitates intra-agency and inter-agency communication.	23	2.35	0.15	0.71	2	92.0%
NT358	IV. Core Competencies: E. Coaching Competency: Coaches patients and families to help them navigate the healthcare system.	21	1.90	0.17	0.77	4	84.0%
NT359	IV. Core Competencies: E. Coaching Competency: Designs health information and patient education appropriate to the patient's developmental level, health literacy level, learning needs, readiness to learn, and cultural values and beliefs.	23	2.43	0.11	0.51	2	92.0%
NT360	IV. Core Competencies: E. Coaching Competency: Provides education to individuals, families, groups and communities to promote knowledge, understanding and optimal functioning across the wellness-illness continuum.	22	2.05	0.17	0.79	3	88.0%
NT361	IV. Core Competencies: E. Coaching Competency: participates in pre-professional, graduate and continuing education of nurses and other health care providers: Completes a needs assessment as appropriate to guide interventions with staff; Promotes professional development of staff nurses and continuing education activities; Implements staff development and continuing education activities; Mentors nurses to translate research into practice.	24	2.46	0.13	0.66	1	96.0%

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Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT362	IV. Core Competencies: E. Coaching Competency: Contributes to the advancement of the profession as a whole by disseminating outcomes of CNS practice through presentations and publications.	24	2.50	0.15	0.72	1	96.0%
NT363	IV. Core Competencies: E. Coaching Competency: Mentors staff nurses, graduate students and others to acquire new knowledge and skills and develop their careers.	24	2.58	0.12	0.58	1	96.0%
NT364	IV. Core Competencies: E. Coaching Competency: Mentors health professionals in applying the principles of evidence-based care.	24	2.63	0.10	0.49	1	96.0%
NT365	IV. Core Competencies: E. Coaching Competency: Uses coaching and advanced communication skills to facilitate the development of effective clinical teams.	24	2.58	0.12	0.58	1	96.0%
NT366	IV. Core Competencies: E. Coaching Competency: Provides leadership in conflict management and negotiation to address problems in the healthcare system.	24	2.29	0.15	0.75	1	96.0%
NT367	IV. Core Competencies: F. Research Competency: I. Interpretation, Translation and Use of Evidence: Analyzes research findings and other evidence for their potential application to clinical practice	24	2.75	0.09	0.44	1	96.0%
NT368	IV. Core Competencies: F. Research Competency: I. Interpretation, Translation and Use of Evidence: Integrates evidence into the health, illness, and wellness management of patients, families, communities and groups.	24	2.79	0.08	0.41	1	96.0%
NT369	IV. Core Competencies: F. Research Competency: I. Interpretation, Translation and Use of Evidence: Applies principles of evidence-based practice and quality improvement to all patient care.	24	2.88	0.07	0.34	1	96.0%

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Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT370	IV. Core Competencies: F. Research Competency: I. Interpretation, Translation and Use of Evidence: Assesses system barriers and facilitators to adoption of evidence-based practices.	24	2.63	0.10	0.49	1	96.0%
NT371	IV. Core Competencies: F. Research Competency: I. Interpretation, Translation and Use of Evidence: Designs programs for effective implementation of research findings and other evidence in clinical practice	24	2.46	0.13	0.66	1	96.0%
NT372	IV. Core Competencies: F. Research Competency: I. Interpretation, Translation and Use of Evidence: Cultivates a climate of clinical inquiry across spheres of influence: Evaluates the need for improvement or redesign of care delivery processes to improve safety, efficiency, reliability, and quality., Disseminates expert knowledge.	24	2.58	0.12	0.58	1	96.0%
NT373	IV. Core Competencies: F. Research Competency: II. Evaluation of Clinical Practice: Fosters an interdisciplinary approach to quality improvement, evidence-based practice, research, and translation of research into practice	24	2.58	0.12	0.58	1	96.0%
NT374	IV. Core Competencies: F. Research Competency: II. Evaluation of Clinical Practice: Participates in establishing quality improvement agenda for unit, department, program, system, or population	24	2.79	0.08	0.41	1	96.0%
NT375	IV. Core Competencies: F. Research Competency: II. Evaluation of Clinical Practice: Provides leadership in planning data collection and quality monitoring	24	2.67	0.12	0.56	1	96.0%
NT376	IV. Core Competencies: F. Research Competency: II. Evaluation of Clinical Practice: Uses quality monitoring data to assess the quality and effectiveness of clinical programs in meeting outcomes.	24	2.75	0.11	0.53	1	96.0%

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT377	IV. Core Competencies: F. Research Competency: II. Evaluation of Clinical Practice: Develops quality improvement initiatives based on assessments.	24	2.75	0.11	0.53	1	96.0%
NT378	IV. Core Competencies: F. Research Competency: II. Evaluation of Clinical Practice: Provides leadership in the design, implementation and evaluation of process improvement initiatives.	24	2.71	0.11	0.55	1	96.0%
NT379	IV. Core Competencies: F. Research Competency: II. Evaluation of Clinical Practice: Provides leadership in the system-wide implementation of quality improvements and innovations.	23	2.61	0.12	0.58	2	92.0%
NT380	IV. Core Competencies: F. Research Competency: III. Conduct of Research: Participates in conduct and implementation of research which includes one or more of the following: Identification of questions for clinical inquiry, Conduct of literature reviews, Study design and implementation, Data collection,	24	2.29	0.14	0.69	1	96.0%
NT381	IV. Core Competencies: F. Research Competency: III. Conduct of Research: Dissemination of findings	24	2.25	0.14	0.68	1	96.0%
NT382	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Engages in a formal self-evaluation process, seeking feedback regarding own practice, from patients, peers, professional colleagues and others	24	2.54	0.10	0.51	1	96.0%
NT383	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Fosters professional accountability in self or others.	24	2.63	0.10	0.49	1	96.0%

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT384	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Facilitates resolution of ethical conflicts: Identifies ethical implications of complex care situations, Considers the impact of scientific advances, cost, clinical effectiveness, patient and family values and preferences, and other external influences., Applies ethical principles to resolving concerns across the three spheres of influence	23	2.39	0.14	0.66	1	95.8%
NT385	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Promotes a practice climate conducive to providing ethical care.	24	2.50	0.10	0.51	1	96.0%
NT386	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Facilitates interdisciplinary teams to address ethical concerns, risks or considerations, benefits and outcomes of patient care.	23	2.30	0.15	0.70	2	92.0%
NT387	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Facilitates patient and family understanding of the risks, benefits, and outcomes of proposed healthcare regimen to promote informed decision making.	21	2.10	0.17	0.77	4	84.0%
NT388	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Advocates for equitable patient care by: Participating in organizational, local, state, national, or international level of policy-making activities for issues related to their expertise, Evaluating the impact of legislative and regulatory policies as they apply to nursing practice and patient or population outcomes	23	2.17	0.16	0.78	2	92.0%

Tasks in Survey Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT389	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Promotes the role and scope of practice of the CNS to legislators, regulators, other health care providers, and the public: Communicates information that promotes nursing, the role of the CNS and outcomes of nursing and CNS practice through the use of the media, advanced technologies, and community networks.	22	2.18	0.17	0.80	3	88.0%
NT390	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Advocates for the CNS/APRN role and for positive legislative response to issues affecting nursing practice.	21	2.14	0.17	0.79	3	87.5%

Appendix B. Tasks in Percent Performed Order

Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT169	II. Skills and Procedures: J. Multisystem: Perform RetCam	3	1.00	0.00	0.00	34	8.1
NT159	II. Skills and Procedures: G. Renal/Genitourinary: Manage patients with flush renal stent	5	1.00	0.00	0.00	32	13.5
NT156	II. Skills and Procedures: G. Renal/Genitourinary: Maintain dialysis catheters	7	1.86	0.40	1.07	30	18.9
NT158	II. Skills and Procedures: G. Renal/Genitourinary: Manage patients receiving renal replacement therapies	7	1.29	0.29	0.76	30	18.9
NT133	II. Skills and Procedures: A. Cardiovascular: Manage patients with implantable cardioverter defibrillators (ICD)	9	1.44	0.24	0.73	30	23.1
NT134	II. Skills and Procedures: A. Cardiovascular: Manage patients with permanent transvenous pacemakers	9	1.44	0.24	0.73	30	23.1
NT135	II. Skills and Procedures: A. Cardiovascular: Manage patients with temporary transvenous pacemakers	10	1.40	0.22	0.70	29	25.6
NT136	II. Skills and Procedures: A. Cardiovascular: Manage patients with transcutaneous (external) pacemakers	10	1.20	0.20	0.63	29	25.6
NT157	II. Skills and Procedures: G. Renal/Genitourinary: Manage patients receiving peritoneal dialysis	10	1.60	0.31	0.97	27	27.0
NT151	II. Skills and Procedures: E. Neurology: Manage patients with intraventricular ICP monitoring devices	12	1.50	0.26	0.90	26	31.6
NT324	IV. Core Competencies: A. Direct Care Competency: Prescribe: pharmacologic interventions	8	2.50	0.27	0.76	17	32.0
NT168	II. Skills and Procedures: J. Multisystem: Order laboratory tests	12	2.67	0.22	0.78	25	32.4
NT238	III. NEO Competencies: E. Coaching and Teaching Competency: Assists families in navigating the healthcare system to obtain the appropriate resources for their needs and problems	9	1.44	0.29	0.88	18	33.3

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT244	III. NEO Competencies: E. Coaching and Teaching Competency: Provides educational resources to the neonate's/infant's family or provides a referral to obtain information if resources are unavailable	9	1.89	0.35	1.05	18	33.3
NT139	II. Skills and Procedures: B. Pulmonary: Assist with bronchoscopy	13	1.31	0.21	0.75	25	34.2
NT170	II. Skills and Procedures: J. Multisystem: Prescribe specialty formula/supplements	13	2.23	0.28	1.01	24	35.1
NT132	II. Skills and Procedures: A. Cardiovascular: Manage patients with epicardial pacemakers	14	1.36	0.17	0.63	25	35.9
NT187	III. NEO Competencies: A. Direct Care Competency: Prescribes nursing therapeutics, pharmacologic and nonpharmacologic interventions, diagnostic measures, equipment, procedures, and treatments to meet the needs of neonates/infants, families, and groups, in accordance with professional preparation, institutional privileges, and state and federal laws and practice acts	12	2.50	0.26	0.90	21	36.4
NT150	II. Skills and Procedures: E. Neurology: Manage patients with epidural catheters	14	1.14	0.14	0.53	24	36.8
NT167	II. Skills and Procedures: J. Multisystem: Order diagnostic imaging	14	2.29	0.27	0.99	23	37.8
NT127	II. Skills and Procedures: A. Cardiovascular: Manage patients with transesophageal pacemakers	15	1.40	0.16	0.63	24	38.5
NT129	II. Skills and Procedures: A. Cardiovascular: Manage patients with cardiac assist devices (e.g., RVAD, BVAD, LVAD, ECMO)	15	1.80	0.22	0.86	24	38.5
NT305	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Balances the needs of the neonate/infant and family preferences while making choices and decisions related to professional accountability	10	2.80	0.20	0.63	16	38.5

Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT307	III. NEO Competencies: I. Culturally Sensitive Care Competency: Performs a self-assessment of cultural values and the impact of those values on the care of the neonate/infant and family	10	2.80	0.20	0.63	16	38.5
NT309	III. NEO Competencies: I. Culturally Sensitive Care Competency: Recognizes cultural diversity and seeks input for adapting care on the basis of the family's culture	10	2.80	0.20	0.63	16	38.5
NT310	III. NEO Competencies: I. Culturally Sensitive Care Competency: Provides care on the basis of the family's belief system and learns the culture of the healthcare environment	10	2.40	0.31	0.97	16	38.5
NT138	II. Skills and Procedures: B. Pulmonary: Assist with bronchial alveolar lavage	15	1.27	0.18	0.70	23	39.5
NT326	IV. Core Competencies: A. Direct Care Competency: Prescribe: diagnostic measures	10	2.20	0.29	0.92	15	40.0
NT059	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Organ and tissue transplantation and associated problems	17	1.24	0.11	0.44	25	40.5
NT162	II. Skills and Procedures: I. Integumentary: Consult for patients with ostomy devices	15	2.07	0.27	1.03	22	40.5
NT199	III. NEO Competencies: B. Consultation Competency: Identifies gaps in care requiring additional resources to achieve identified outcomes	13	2.85	0.15	0.55	19	40.6
NT239	III. NEO Competencies: E. Coaching and Teaching Competency: Assesses the educational needs of the neonate's/infant's family members based on their knowledge of health issues, developmental level, health literacy level, learning needs, readiness to learn, and culture and beliefs	11	1.91	0.31	1.04	16	40.7

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT286	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Verbalizes awareness of legal issues affecting neonate/infant care and professional practice regarding ethical decision making	11	2.45	0.28	0.93	15	42.3
NT287	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Recognizes ethical conflicts and dilemmas and distinguishes ethical decisions to be made	11	2.45	0.28	0.93	15	42.3
NT297	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Identifies and communicates family functions and interactions that can affect social, cultural, and spiritual variations	11	2.45	0.28	0.93	15	42.3
NT299	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Interprets the role of the CNS to the patient, family, healthcare team, and community	11	2.45	0.28	0.93	15	42.3
NT155	II. Skills and Procedures: F. Gastrointestinal: Manage patients with G tube	16	2.50	0.22	0.89	21	43.2
NT198	III. NEO Competencies: B. Consultation Competency: Seeks applicable nursing, medical staff, and interdisciplinary input regarding the healthcare plan	14	2.86	0.14	0.53	18	43.8
NT242	III. NEO Competencies: E. Coaching and Teaching Competency: Recognizes the family's learning needs throughout the continuum	12	1.67	0.28	0.98	15	44.4
NT149	II. Skills and Procedures: E. Neurology: Manage patients with cerebral oxygenation monitoring devices	17	1.94	0.25	1.03	21	44.7
NT152	II. Skills and Procedures: E. Neurology: Manage patients with ventricular reservoirs/shunts	17	1.82	0.25	1.01	21	44.7
NT203	III. NEO Competencies: C. Systems Leadership Competency: Identifies population variables at the unit level.	14	3.00	0.00	0.00	17	45.2

Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT188	III. NEO Competencies: A. Direct Care Competency: Provides direct care to selected neonates/infants and families based on the needs of the patient and the CNS's specialty knowledge and skills	15	2.33	0.25	0.98	18	45.5
NT243	III. NEO Competencies: E. Coaching and Teaching Competency: Intervenes when the neonate's/infant's needs are complicated and the family's needs for education exceed those that can be met by the standard teaching content	12	2.83	0.17	0.58	14	46.2
NT273	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Analyzes the medical advances, cost, clinical effectiveness, impact on the patient and family, and the family's values	12	2.50	0.26	0.90	14	46.2
NT275	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Facilitates interdisciplinary teams to address ethical concerns, risk, benefits, and outcomes at the unit level	12	2.50	0.26	0.90	14	46.2
NT283	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Identifies the family's methods of communication and decision making	12	2.00	0.30	1.04	14	46.2
NT285	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Assesses interactions of family members, including variations in social, cultural, and spiritual beliefs that may affect decision making	12	2.00	0.30	1.04	14	46.2
NT290	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Applies knowledge of and utilization of available resources to assist with crisis management	12	2.00	0.30	1.04	14	46.2
NT295	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Identifies ethical and legal issues related to worth and dignity that can affect patient care and professional practice	12	2.33	0.28	0.98	14	46.2

Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT296	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Distinguishes differences in abnormal and normal behaviors related to dignity of life and death and demonstrates awareness of palliative care options	12	2.50	0.26	0.90	14	46.2
NT298	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Identifies patient and family support systems	12	2.33	0.28	0.98	14	46.2
NT311	III. NEO Competencies: I. Culturally Sensitive Care Competency: Develops culturally sensitive practices that address cultural, ethnic, spiritual, and intergenerational or age differences among families and healthcare providers	12	2.50	0.26	0.90	14	46.2
NT197	III. NEO Competencies: B. Consultation Competency: Assesses the needs, preferences, and strengths of the neonate/infant and family and recommends a healthcare plan in order to optimize health outcomes	15	2.20	0.26	1.01	17	46.9
NT240	III. NEO Competencies: E. Coaching and Teaching Competency: Develops an education plan based the family assessment	13	1.46	0.24	0.88	14	48.1
NT185	III. NEO Competencies: A. Direct Care Competency: Applies end-of-life and palliative care principles to the delivery of care	16	2.88	0.13	0.50	17	48.5
NT145	II. Skills and Procedures: B. Pulmonary: Perform arterial punctures	19	2.37	0.22	0.96	19	50.0
NT201	III. NEO Competencies: B. Consultation Competency: Applies data collected from consultations to plan or revise care for the individual patient or family	16	2.13	0.26	1.02	16	50.0
NT216	III. NEO Competencies: C: Systems Leadership Competency: Identifies general transition resources needed by neonates/infants and families upon discharge	15	2.33	0.25	0.98	15	50.0

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT268	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Performs self-assessment to identify own personal values and beliefs that influence the provision of care as an expert clinician	13	3.00	0.00	0.00	13	50.0
NT272	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Identifies the need to involve the institutional ethics team in finding resolutions to the dilemmas using ethical principles	13	2.69	0.21	0.75	13	50.0
NT274	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Encourages discussion of ethical issues, dilemmas, and principles at the unit level	13	3.00	0.00	0.00	13	50.0
NT308	III. NEO Competencies: I. Culturally Sensitive Care Competency: Recognizes at the unit level the cultural dynamics of individuals from varying cultures and their effect on the care of the neonate/infant and family	13	2.85	0.15	0.55	13	50.0
NT154	II. Skills and Procedures: F. Gastrointestinal: Insert postpyloric feeding tubes	19	1.63	0.22	0.96	18	51.4
NT177	III. NEO Competencies: A. Direct Care Competency: Assesses the effects of interactions among the neonate/infant, family, and the community on the patient/family dyad	17	2.76	0.16	0.66	16	51.5
NT204	III. NEO Competencies: C: Systems Leadership Competency: Identifies unit environment variables that influence nursing practice	16	3.00	0.00	0.00	15	51.6
NT222	III. NEO Competencies: C: Systems Leadership Competency: Collects baseline data for these outcomes	16	3.00	0.00	0.00	15	51.6
NT289	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Facilitates the incorporation of strategies for evidence-based practice specific to the neonatal population into crisis management	13	2.23	0.28	1.01	12	52.0

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT327	IV. Core Competencies: A. Direct Care Competency: Prescribe: equipment	13	2.15	0.15	0.55	12	52.0
NT147	II. Skills and Procedures: D. Hematology/Immunology/Oncology: Manage patients with exchange transfusions	20	1.90	0.23	1.02	18	52.6
NT235	III. NEO Competencies: D. Collaboration Competency: Engages and participates constructively with agencies	15	2.07	0.27	1.03	13	53.6
NT266	III. NEO Competencies: F. Research and Quality Competency: Identifies clinical questions suitable for clinical inquiry	14	2.86	0.14	0.53	12	53.8
NT269	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Seeks feedback from other CNSs, advanced practice registered nurses (APRNs), and other healthcare providers within the unit	14	2.86	0.14	0.53	12	53.8
NT276	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Facilitates the discussion with families of neonates/infants regarding a proposed healthcare regimen for their child, to assist parents to make informed decisions, ensuring that families have full access to and understanding of all information related to the current situation of their child	14	2.29	0.27	0.99	12	53.8
NT280	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Verbalizes effective communication strategies to include appropriate methods, behaviors, and positive interventions	14	2.71	0.19	0.73	12	53.8
NT282	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Seeks applicable input from nursing, medical staff, interdisciplinary teams, and support systems necessary for communicating the healthcare status of the neonate/infant and patient's family	14	2.71	0.19	0.73	12	53.8

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT300	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Develops and preserves a therapeutic relationship and connection with the neonate's/infant's family and other professionals in order to facilitate optimal care and patient outcomes	14	2.43	0.25	0.94	12	53.8
NT306	III. NEO Competencies: I. Culturally Sensitive Care Competency: Takes leadership in demonstrating and embracing the value of diversity in caring for neonates/infants and their families as well as working with other healthcare professionals at the unit level	14	3.00	0.00	0.00	12	53.8
NT175	III. NEO Competencies: A. Direct Care Competency: Develops a comprehensive database (both disease and non-disease factors) that includes pertinent history, diagnostic tests, and physical assessment	18	2.33	0.23	0.97	15	54.5
NT073	I. Patient Care Problems: G. Neurology: Spinal cord injury	23	1.43	0.14	0.66	19	54.8
NT241	III. NEO Competencies: E. Coaching and Teaching Competency: Assesses neonate's/infant's family to determine the family members' education needs regarding the neonate's/infant's disease processes	15	1.67	0.25	0.98	12	55.6
NT245	III. NEO Competencies: E. Coaching and Teaching Competency: Implements education needs assessment with unit-based staff	15	2.73	0.18	0.70	12	55.6
NT172	II. Skills and Procedures: K. Behavioral: Manage assaultive behavior	21	1.19	0.13	0.60	16	56.8
NT036	I. Patient Care Problems: C. Pulmonary: Thoracic and pulmonary trauma and injuries	25	1.48	0.15	0.77	19	56.8
NT236	III. NEO Competencies: D. Collaboration Competency: Participates in collaborative efforts to improve intra-agency and inter-agency communication	16	2.25	0.25	1.00	12	57.1

Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT174	III. NEO Competencies: A. Direct Care Competency: Conducts a comprehensive history and assessment of the neonate/infant and family, using known or innovative evidence-based techniques, tools, and direct and indirect methods	19	2.26	0.23	0.99	14	57.6
NT176	III. NEO Competencies: A. Direct Care Competency: Distinguishes between normal, variations of normal and abnormal findings, including developmental, physiologic, and behavioral states	19	2.68	0.17	0.75	14	57.6
NT178	III. NEO Competencies: A. Direct Care Competency: Identifies potential risks to patient safety, the patient/family dyad, and quality of care	19	3.00	0.00	0.00	14	57.6
NT182	III. NEO Competencies: A. Direct Care Competency: Develops interventions to promote patient safety, strengthen the patient/family dyad, and improve the quality of care	19	2.79	0.14	0.63	14	57.6
NT193	III. NEO Competencies: A. Direct Care Competency: Develops and implements audits at the unit level	19	2.79	0.14	0.63	14	57.6
NT256	III. NEO Competencies: F. Research and Quality Competency: Recognizes opportunities for improving clinical practice at the unit level	15	3.00	0.00	0.00	11	57.7
NT264	III. NEO Competencies: F. Research and Quality Competency: Develops and implements audits at the unit level	15	2.87	0.13	0.52	11	57.7
NT284	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Identifies gaps in communication between family members and healthcare professionals	15	2.33	0.25	0.98	11	57.7
NT293	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Develops a plan to assist in establishing a family-centered care environment	15	2.87	0.13	0.52	11	57.7
NT301	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Advocates for the neonate/infant and family in the NICU	15	3.00	0.00	0.00	11	57.7

Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT302	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Models behaviors that maintain professional boundaries (e.g., in social media, social life) and assists families in acknowledging and respecting professional boundaries	15	3.00	0.00	0.00	11	57.7
NT303	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Maintains balance between personal and professional life, using appropriate conduct in social media	15	2.87	0.13	0.52	11	57.7
NT200	III. NEO Competencies: B. Consultation Competency: Communicates consultation findings to the family and members of the healthcare team and completes the necessary documentation	18	2.22	0.24	1.00	13	58.1
NT212	III. NEO Competencies: C: Systems Leadership Competency: Provides evidence-based information on work-related self-care to staff	18	2.33	0.23	0.97	13	58.1
NT219	III. NEO Competencies: C: Systems Leadership Competency: Identifies nurse-sensitive outcomes related to the neonate/infant and family	18	3.00	0.00	0.00	13	58.1
NT224	III. NEO Competencies: C: Systems Leadership Competency: Disseminates baseline outcomes data to unit-based teams and staff	18	2.89	0.11	0.47	13	58.1
NT328	IV. Core Competencies: A. Direct Care Competency: Prescribe: treatments	14	2.07	0.20	0.73	10	58.3
NT237	III. NEO Competencies: E. Coaching and Teaching Competency: Coaches and advocates for neonates/infants and families based on their culture, religious beliefs, and health issues	16	2.50	0.22	0.89	11	59.3
NT250	III. NEO Competencies: E. Coaching and Teaching Competency: Provides career guidance to staff RNs in their career development via clinical advancement and/or graduate education	16	2.88	0.13	0.50	11	59.3

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT252	III. NEO Competencies: E. Coaching and Teaching Competency: Mentors novice members of the neonatal interdisciplinary team on the implementation of evidence-based care	16	2.88	0.13	0.50	11	59.3
NT255	III. NEO Competencies: E. Coaching and Teaching Competency: Engages in conflict-resolution activities, supported by more experienced leaders	16	2.63	0.20	0.81	11	59.3
NT160	II. Skills and Procedures: H. Musculoskeletal: Apply orthotic devices	22	1.18	0.13	0.59	15	59.5
NT161	II. Skills and Procedures: H. Musculoskeletal: Manage patients with casting/splinting	22	1.18	0.13	0.59	15	59.5
NT165	II. Skills and Procedures: J. Multisystem: Interpret diagnostic imaging	22	1.82	0.21	1.01	15	59.5
NT171	II. Skills and Procedures: K. Behavioral: De-escalation techniques (e.g., crisis prevention)	22	1.45	0.18	0.86	15	59.5
NT217	III. NEO Competencies: C: Systems Leadership Competency: Evaluates use of products and services for appropriateness and cost/benefit in meeting care needs	18	2.56	0.20	0.86	12	60.0
NT148	II. Skills and Procedures: E. Neurology: Assist with lumbar puncture	23	2.13	0.21	1.01	15	60.5
NT180	III. NEO Competencies: A. Direct Care Competency: Develops a plan of care and interventions according to established protocol and current standards of care	20	2.80	0.14	0.62	13	60.6
NT183	III. NEO Competencies: A. Direct Care Competency: Provides developmentally appropriate care	20	2.80	0.14	0.62	13	60.6
NT184	III. NEO Competencies: A. Direct Care Competency: Applies principles of pain management to care	20	3.00	0.00	0.00	13	60.6

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT186	III. NEO Competencies: A. Direct Care Competency: Uses therapeutic communication skills with special attention to the capacities and needs of the neonate/infant and family	20	2.80	0.14	0.62	13	60.6
NT195	III. NEO Competencies: A. Direct Care Competency: Tailors the plan of care as indicated	20	2.70	0.16	0.73	13	60.6
NT228	III. NEO Competencies: D. Collaboration Competency: Conducts literature searches for clarification of information	17	2.88	0.12	0.49	11	60.7
NT231	III. NEO Competencies: D. Collaboration Competency: Communicates the components of the CNS role to colleagues to increase understanding of the role's impact on quality initiatives	17	2.76	0.16	0.66	11	60.7
NT233	III. NEO Competencies: D. Collaboration Competency: Participates in collaborative efforts to identify cost-saving strategies that optimize patient outcomes	17	2.88	0.12	0.49	11	60.7
NT218	III. NEO Competencies: C. Systems Leadership Competency: Communicates the above findings to staff members in collaboration with unit management	19	2.79	0.14	0.63	12	61.3
NT130	II. Skills and Procedures: A. Cardiovascular: Manage patients with central venous pressure catheters	24	2.00	0.19	0.93	15	61.5
NT271	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Identifies ethical dilemmas unique to neonatal care at the unit level	16	2.63	0.20	0.81	10	61.5
NT288	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Applies ethical principles across the spheres of influence	16	2.63	0.20	0.81	10	61.5

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT291	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Conducts ongoing assessment of the neonatal intensive care unit (NICU) environment, evaluating specifically its family-centeredness and its impact on the care of the patient	16	2.88	0.13	0.50	10	61.5
NT294	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Promotes policies that further family-centered care	16	3.00	0.00	0.00	10	61.5
NT153	II. Skills and Procedures: E. Neurology: Manage patients with whole body/head therapeutic hypothermia	23	2.65	0.16	0.78	14	62.2
NT163	II. Skills and Procedures: I. Integumentary: Consult for patients with/at risk for pressure areas	23	2.30	0.20	0.97	14	62.2
NT164	II. Skills and Procedures: I. Integumentary: Provide wound care	23	1.96	0.21	1.02	14	62.2
NT246	III. NEO Competencies: E. Coaching and Teaching Competency: Develops and provides education for staff	17	2.88	0.12	0.49	10	63.0
NT253	III. NEO Competencies: E. Coaching and Teaching Competency: Identifies communication strengths and weaknesses by using self-reflection and the observation of others	17	2.88	0.12	0.49	10	63.0
NT254	III. NEO Competencies: E. Coaching and Teaching Competency: Models appropriate communication techniques in all interactions	17	2.88	0.12	0.49	10	63.0
NT020	I. Patient Care Problems: B. Cardiovascular: Peripheral vascular insufficiency (e.g., acute, arterial occlusion)	28	1.50	0.12	0.64	16	63.6
NT196	III. NEO Competencies: A. Direct Care Competency: Communicates to the healthcare team the rationale for any deviations from the established guidelines, policies, or procedures	21	3.00	0.00	0.00	12	63.6
NT202	III. NEO Competencies: C. Systems Leadership Competency: Operates primarily at the unit level	20	2.20	0.22	1.01	11	64.5

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT206	III. NEO Competencies: C: Systems Leadership Competency: Evaluates unit-level culture and practices for safety implications	20	2.90	0.10	0.45	11	64.5
NT207	III. NEO Competencies: C: Systems Leadership Competency: Designs and implements safety systems within the home unit	20	2.60	0.18	0.82	11	64.5
NT214	III. NEO Competencies: C: Systems Leadership Competency: Leads unit-level groups to develop standards, policies, and procedures related to care of the neonate/infant and family	20	2.90	0.10	0.45	11	64.5
NT220	III. NEO Competencies: C: Systems Leadership Competency: Collaborates to establish appropriate metrics for these outcomes	20	2.90	0.10	0.45	11	64.5
NT223	III. NEO Competencies: C: Systems Leadership Competency: Identifies evidence-based practices that have a positive impact on nurse-sensitive outcomes of interest	20	2.90	0.10	0.45	11	64.5
NT225	III. NEO Competencies: C: Systems Leadership Competency: Disseminates outcomes of system-level change to unit-based teams and staff	20	2.80	0.14	0.62	11	64.5
NT166	II. Skills and Procedures: J. Multisystem: Interpret laboratory results	24	2.42	0.19	0.93	13	64.9
NT173	II. Skills and Procedures: K. Behavioral: Manage patients with neonatal abstinence syndrome	24	2.75	0.14	0.68	13	64.9
NT091	I. Patient Care Problems: I. Renal/Genitourinary: Renal calculi	26	1.38	0.11	0.57	14	65.0
NT257	III. NEO Competencies: F. Research and Quality Competency: Identifies research and best practice findings to improve clinical practice at the unit level	17	3.00	0.00	0.00	9	65.4
NT259	III. NEO Competencies: F. Research and Quality Competency: Identifies barriers to the implementation of evidence-based practice at the unit level	17	3.00	0.00	0.00	9	65.4

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT262	III. NEO Competencies: F. Research and Quality Competency: Aligns nursing practice with evidence-based information to achieve nurse-sensitive outcomes for the unit population	17	3.00	0.00	0.00	9	65.4
NT267	III. NEO Competencies: F. Research and Quality Competency: Conducts literature review for topics pertinent to clinical practice	17	2.88	0.12	0.49	9	65.4
NT277	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Participates in unit policy-making committees regarding the equitable treatment of neonates/infants and their families	17	2.76	0.16	0.66	9	65.4
NT279	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Promotes the role of the CNS to unit leadership, healthcare providers, and families within the neonatal unit	17	2.88	0.12	0.49	9	65.4
NT281	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Evaluates and recommends strategies for using interventions and resources to improve communication that will provide optimal outcomes related to the health and needs of the neonate/infant and family	17	2.41	0.23	0.94	9	65.4
NT144	II. Skills and Procedures: B. Pulmonary: Manage patients with chest tubes	25	2.84	0.11	0.55	13	65.8
NT018	I. Patient Care Problems: B. Cardiovascular: Hypertensive crisis	29	1.45	0.13	0.69	15	65.9
NT074	I. Patient Care Problems: G. Neurology: Stroke	28	1.25	0.10	0.52	14	66.7
NT189	III. NEO Competencies: A. Direct Care Competency: Recognizes opportunities for staff development of programs and process changes to improve cost-effectiveness	22	3.00	0.00	0.00	11	66.7

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT194	III. NEO Competencies: A. Direct Care Competency: Recognizes when evidence-based guidelines, policies, or procedures fail to meet the needs of the individual neonate/infant and family	22	3.00	0.00	0.00	11	66.7
NT215	III. NEO Competencies: C: Systems Leadership Competency: Builds partnerships with unit-based staff and leadership	20	3.00	0.00	0.00	10	66.7
NT248	III. NEO Competencies: E. Coaching and Teaching Competency: Shares poster presentation or dashboard at the institution's nursing professional development or quality forums	18	2.67	0.18	0.77	9	66.7
NT249	III. NEO Competencies: E. Coaching and Teaching Competency: Mentors staff RNs and other neonatal providers to acquire new knowledge and skills in their bedside care	18	2.89	0.11	0.47	9	66.7
NT213	III. NEO Competencies: C: Systems Leadership Competency: Provides clinical expertise to collaborative, consensus-based work teams to develop clinical programs related to patient and family care	21	3.00	0.00	0.00	10	67.7
NT227	III. NEO Competencies: D. Collaboration Competency: Engages participation from other team members (patients, families, physicians, and coworkers)	19	3.00	0.00	0.00	9	67.9
NT325	IV. Core Competencies: A. Direct Care Competency: Prescribe: non-pharmacologic interventions	17	2.41	0.17	0.71	8	68.0
NT142	II. Skills and Procedures: B. Pulmonary: Manage patients receiving nitric oxide	26	2.85	0.11	0.54	12	68.4
NT131	II. Skills and Procedures: A. Cardiovascular: Manage patients with elective cardioversion	27	1.63	0.14	0.74	12	69.2
NT258	III. NEO Competencies: F. Research and Quality Competency: Prioritizes evidence-based practice changes to address safety and quality concerns at the unit level	18	3.00	0.00	0.00	8	69.2

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT261	III. NEO Competencies: F. Research and Quality Competency: Recognizes performance improvement opportunities at the unit level	18	3.00	0.00	0.00	8	69.2
NT270	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Models professional accountability to others	18	2.89	0.11	0.47	8	69.2
NT278	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Evaluates hospital policies for their impact on neonatal nursing care practice and neonatal/infant care	18	2.78	0.15	0.65	8	69.2
NT292	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Determines nursing practice and interventions that will promote a family-centered care environment	18	2.89	0.11	0.47	8	69.2
NT304	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Fosters professional accountability to self and others	18	3.00	0.00	0.00	8	69.2
NT181	III. NEO Competencies: A. Direct Care Competency: Develops a plan of care based on scientific evidence and practice guidelines	23	2.83	0.12	0.58	10	69.7
NT190	III. NEO Competencies: A. Direct Care Competency: Recognizes nursing practice/performance improvement opportunities with consideration of safety, timeliness, effectiveness, efficacy, and patient-centered care at the unit level	23	3.00	0.00	0.00	10	69.7
NT247	III. NEO Competencies: E. Coaching and Teaching Competency: Develops poster presentation or dashboard for unit to share outcomes of CNS practice, with guidance of CNS mentor, as needed	19	2.58	0.19	0.84	8	70.4
NT251	III. NEO Competencies: E. Coaching and Teaching Competency: Identifies and implements evidence-based care on projects with the neonatal interdisciplinary team	19	3.00	0.00	0.00	8	70.4

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT221	III. NEO Competencies: C: Systems Leadership Competency: Collaborates to develop data sources for these metrics	22	2.73	0.15	0.70	9	71.0
NT230	III. NEO Competencies: D. Collaboration Competency: Uses appropriate terminology, format, and technology to communicate effectively with team members and discipline experts in problem solving and decision making	20	3.00	0.00	0.00	8	71.4
NT037	I. Patient Care Problems: C. Pulmonary: Thoracic surgery (e.g., pneumonectomy, lobectomy, tracheal surgery)	32	1.66	0.12	0.70	12	72.7
NT179	III. NEO Competencies: A. Direct Care Competency: Identifies evidence-based clinical practice guidelines to guide screening, diagnosis, and management of the neonate/infant	24	3.00	0.00	0.00	9	72.7
NT192	III. NEO Competencies: A. Direct Care Competency: Participates in unit-based planning for data collection and quality monitoring	24	3.00	0.00	0.00	9	72.7
NT260	III. NEO Competencies: F. Research and Quality Competency: Develops and conducts evidence-based project at the unit level	19	3.00	0.00	0.00	7	73.1
NT263	III. NEO Competencies: F. Research and Quality Competency: Participates in unit-based planning for data collection and quality monitoring	19	3.00	0.00	0.00	7	73.1
NT265	III. NEO Competencies: F. Research and Quality Competency: Advocates across interdisciplinary teams to promote evidence-based practice, research, and translation of research into best practices	19	2.89	0.11	0.46	7	73.1
NT055	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Hematologic and solid tumors	30	1.33	0.10	0.55	11	73.2
NT146	II. Skills and Procedures: C. Endocrine: Glycemic management	28	2.86	0.10	0.52	10	73.7
NT208	III. NEO Competencies: C: Systems Leadership Competency: Includes staff in the development of safety programs	23	2.83	0.12	0.58	8	74.2

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT210	III. NEO Competencies: C: Systems Leadership Competency: Provides summaries of the evidence basis for proposed practice change	23	3.00	0.00	0.00	8	74.2
NT211	III. NEO Competencies: C: Systems Leadership Competency: Provides unit leadership members with evidence regarding the impact of personnel practices on safe patient care and workforce maintenance	23	2.83	0.12	0.58	8	74.2
NT137	II. Skills and Procedures: A. Cardiovascular: Remove peripherally inserted central catheters (PICC)	29	2.72	0.13	0.70	10	74.4
NT009	I. Patient Care Problems: B. Cardiovascular: Cardiac surgery	33	1.76	0.12	0.71	11	75.0
NT234	III. NEO Competencies: D. Collaboration Competency: Promotes awareness of evidence-based initiatives and healthcare policies that improve the care and discharge of neonates/infants and families	21	3.00	0.00	0.00	7	75.0
NT008	I. Patient Care Problems: B. Cardiovascular: Acute inflammatory disease (e.g., myocarditis, endocarditis, pericarditis)	34	1.47	0.12	0.71	10	77.3
NT205	III. NEO Competencies: C: Systems Leadership Competency: Develops constructive relationships across disciplines and departments	24	3.00	0.00	0.00	7	77.4
NT226	III. NEO Competencies: D. Collaboration Competency: Participates on an interdisciplinary team	22	3.00	0.00	0.00	6	78.6
NT229	III. NEO Competencies: D. Collaboration Competency: Applies an interdisciplinary approach to the care of neonates/infants and families	22	2.91	0.09	0.43	6	78.6
NT140	II. Skills and Procedures: B. Pulmonary: Manage a patient receiving surfactant therapy	30	2.67	0.14	0.76	8	78.9
NT012	I. Patient Care Problems: B. Cardiovascular: Cardiomyopathies (e.g., hypertrophic, dilated, restrictive, idiopathic)	34	1.53	0.11	0.61	9	79.1

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT014	I. Patient Care Problems: B. Cardiovascular: Decompensated heart failure	35	1.66	0.11	0.64	9	79.5
NT087	I. Patient Care Problems: I. Renal/Genitourinary: Chronic kidney disease	32	1.53	0.13	0.72	8	80.0
NT090	I. Patient Care Problems: I. Renal/Genitourinary: Renal and genitourinary surgeries	32	1.59	0.09	0.50	8	80.0
NT083	I. Patient Care Problems: H. Gastrointestinal: Hepatitis	33	1.55	0.13	0.75	8	80.5
NT209	III. NEO Competencies: C: Systems Leadership Competency: Identifies the need for evidence-based practice changes	25	3.00	0.00	0.00	6	80.6
NT141	II. Skills and Procedures: B. Pulmonary: Manage patients receiving mechanical ventilation	31	2.81	0.11	0.60	7	81.6
NT010	I. Patient Care Problems: B. Cardiovascular: Cardiac tamponade	36	1.44	0.12	0.69	8	81.8
NT191	III. NEO Competencies: A. Direct Care Competency: Aligns nursing practice with evidence-based information to achieve nurse-sensitive outcomes for the unit population	27	3.00	0.00	0.00	6	81.8
NT232	III. NEO Competencies: D. Collaboration Competency: Participates in interdisciplinary projects	23	3.00	0.00	0.00	5	82.1
NT072	I. Patient Care Problems: G. Neurology: Space-occupying lesions	35	1.37	0.11	0.65	7	83.3
NT075	I. Patient Care Problems: G. Neurology: Vascular malformation	35	1.57	0.12	0.70	7	83.3
NT049	I. Patient Care Problems: E. Musculoskeletal: Traumatic fractures	36	1.36	0.10	0.59	7	83.7
NT358	IV. Core Competencies: E. Coaching Competency: Coaches patients and families to help them navigate the healthcare system.	21	1.90	0.17	0.77	4	84.0
NT387	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Facilitates patient and family understanding of the risks, benefits, and outcomes of proposed healthcare regimen to promote informed decision making.	21	2.10	0.17	0.77	4	84.0

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT143	II. Skills and Procedures: B. Pulmonary: Manage patients receiving non-invasive support	32	2.88	0.09	0.49	6	84.2
NT003	I. Patient Care Problems: A. Factors Influencing Health Status (risk assessment, prevention and wellness): Monitoring anthropometric measurements	39	2.05	0.12	0.72	7	84.8
NT095	I. Patient Care Problems: J. Integumentary: Pressure ulcers	34	1.76	0.13	0.74	6	85.0
NT011	I. Patient Care Problems: B. Cardiovascular: Cardiogenic shock	38	1.74	0.13	0.79	6	86.4
NT016	I. Patient Care Problems: B. Cardiovascular: Heart failure	38	1.61	0.11	0.68	6	86.4
NT390	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Advocates for the CNS/APRN role and for positive legislative response to issues affecting nursing practice.	21	2.14	0.17	0.79	3	87.5
NT314	IV. Core Competencies: A. Direct Care Competency: Employs evidence-based clinical practice guidelines to guide screening and diagnosis.	22	2.55	0.11	0.51	3	88.0
NT315	IV. Core Competencies: A. Direct Care Competency: Assesses the effects of interactions among the individual, family, community, and social systems on health and illness.	22	2.27	0.15	0.70	3	88.0
NT316	IV. Core Competencies: A. Direct Care Competency: Identifies potential risks to patient safety, autonomy and quality of care based on assessments across the patient, nurse and system spheres of influence.	22	2.50	0.11	0.51	3	88.0
NT319	IV. Core Competencies: A. Direct Care Competency: Prioritizes differential diagnoses to reflect those conditions most relevant to signs, symptoms and patterns amenable to CNS interventions.	22	2.36	0.14	0.66	3	88.0

Clinical Nurse Specialist – Wellness Through Acute Care Job Analysis

Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT320	IV. Core Competencies: A. Direct Care Competency: Selects interventions that may include, but are not limited to: Application of advanced nursing therapies, Initiation of interdisciplinary team meetings, consultations and other communications to benefit patient care, Management of patient medications, clinical procedures and other interventions, Psychosocial support including patient counseling and spiritual interventions	22	2.45	0.14	0.67	3	88.0
NT329	IV. Core Competencies: A. Direct Care Competency: Provides direct care to selected patients based on the needs of the patient and the CNS's specialty knowledge and skills	22	1.95	0.18	0.84	3	88.0
NT348	IV. Core Competencies: C. Systems Leadership Competency: Coordinates the care of patients with use of system and community resources to assure successful health/illness/wellness transitions, enhance delivery of care, and achieve optimal patient outcomes.	22	2.32	0.15	0.72	3	88.0
NT360	IV. Core Competencies: E. Coaching Competency: Provides education to individuals, families, groups and communities to promote knowledge, understanding and optimal functioning across the wellness-illness continuum.	22	2.05	0.17	0.79	3	88.0
NT389	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Promotes the role and scope of practice of the CNS to legislators, regulators, other health care providers, and the public: Communicates information that promotes nursing, the role of the CNS and outcomes of nursing and CNS practice through the use of the media, advanced technologies, and community networks.	22	2.18	0.17	0.80	3	88.0
NT017	I. Patient Care Problems: B. Cardiovascular: Hypertension	39	1.67	0.11	0.66	5	88.6
NT034	I. Patient Care Problems: C. Pulmonary: Reactive airway disease	39	1.74	0.14	0.85	5	88.6

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT123	II. Skills and Procedures: A. Cardiovascular: Insert peripherally inserted central catheters (PICC)	34	2.59	0.10	0.61	4	89.5
NT121	II. Skills and Procedures: A. Cardiovascular: Determine lead selection for ECGs	35	1.60	0.14	0.81	4	89.7
NT128	II. Skills and Procedures: A. Cardiovascular: Manage patients with arterial pressure catheters	35	2.31	0.13	0.80	4	89.7
NT086	I. Patient Care Problems: I. Renal/Genitourinary: Acute kidney injury	36	1.81	0.13	0.79	4	90.0
NT052	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Autoimmune diseases	37	1.49	0.11	0.65	4	90.2
NT081	I. Patient Care Problems: H. Gastrointestinal: GI surgeries	37	2.30	0.13	0.78	4	90.2
NT082	I. Patient Care Problems: H. Gastrointestinal: Hepatic failure	37	1.65	0.12	0.72	4	90.2
NT039	I. Patient Care Problems: D. Endocrine: Adrenal disorders	40	1.58	0.10	0.64	4	90.9
NT044	I. Patient Care Problems: D. Endocrine: Thyroid disorders	40	1.48	0.09	0.60	4	90.9
NT312	IV. Core Competencies: A. Direct Care Competency: Conducts comprehensive, holistic wellness and illness assessments using known or innovative evidence-based techniques, tools, and direct and indirect methods.	23	2.09	0.17	0.79	2	92.0
NT313	IV. Core Competencies: A. Direct Care Competency: Obtains data about context and etiologies (including both non-disease and disease-related factors) necessary to formulate differential diagnoses and plans of care, and to identify and evaluate of outcomes.	23	2.17	0.15	0.72	2	92.0
NT318	IV. Core Competencies: A. Direct Care Competency: Synthesizes assessment data, advanced knowledge, and experience, using critical thinking and clinical judgment to formulate differential diagnoses for clinical problems amenable to CNS intervention.	23	2.52	0.14	0.67	2	92.0

Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT321	IV. Core Competencies: A. Direct Care Competency: Designs strategies, including advanced nursing therapies, to meet the multifaceted needs of complex patients and groups of patients.	23	2.48	0.12	0.59	2	92.0
NT335	IV. Core Competencies: A. Direct Care Competency: Provides leadership for collaborative, evidence-based revision of diagnoses and plans of care, to improve patient outcomes	23	2.65	0.10	0.49	2	92.0
NT351	IV. Core Competencies: C. Systems Leadership Competency: Evaluates impact of CNS and other nursing practice on systems of care using nurse-sensitive outcomes	23	2.61	0.12	0.58	2	92.0
NT357	IV. Core Competencies: D. Collaboration Competency: Facilitates intra-agency and inter-agency communication.	23	2.35	0.15	0.71	2	92.0
NT359	IV. Core Competencies: E. Coaching Competency: Designs health information and patient education appropriate to the patient's developmental level, health literacy level, learning needs, readiness to learn, and cultural values and beliefs.	23	2.43	0.11	0.51	2	92.0
NT379	IV. Core Competencies: F. Research Competency: II. Evaluation of Clinical Practice: Provides leadership in the system-wide implementation of quality improvements and innovations.	23	2.61	0.12	0.58	2	92.0
NT386	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Facilitates interdisciplinary teams to address ethical concerns, risks or considerations, benefits and outcomes of patient care.	23	2.30	0.15	0.70	2	92.0

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT388	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Advocates for equitable patient care by: Participating in organizational, local, state, national, or international level of policy-making activities for issues related to their expertise, Evaluating the impact of legislative and regulatory policies as they apply to nursing practice and patient or population outcomes	23	2.17	0.16	0.78	2	92.0
NT094	I. Patient Care Problems: J. Integumentary: Infectious skin disorders	37	1.65	0.12	0.72	3	92.5
NT058	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Immune deficiency disorders	38	1.58	0.11	0.68	3	92.7
NT050	I. Patient Care Problems: F. Hematology/Immunology/Oncology: AIDS and HIV	39	1.23	0.07	0.43	3	92.9
NT056	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Hemorrhagic disease of the newborn	39	1.77	0.11	0.71	3	92.9
NT063	I. Patient Care Problems: G. Neurology: Head and brain trauma/injury	39	2.00	0.13	0.79	3	92.9
NT015	I. Patient Care Problems: B. Cardiovascular: Dysrhythmias	41	1.61	0.10	0.67	3	93.2
NT076	I. Patient Care Problems: H. Gastrointestinal: GI hemorrhage	37	1.59	0.14	0.83	2	94.9
NT088	I. Patient Care Problems: I. Renal/Genitourinary: Congenital renal/genitourinary abnormalities	38	1.76	0.12	0.71	2	95.0
NT092	I. Patient Care Problems: J. Integumentary: Congenital abnormalities	38	2.18	0.12	0.77	2	95.0
NT093	I. Patient Care Problems: J. Integumentary: Dermatologic disorders	38	1.58	0.12	0.72	2	95.0
NT096	I. Patient Care Problems: J. Integumentary: Skin integrity protection for extremely low birth-weight infants.	38	2.74	0.07	0.45	2	95.0
NT097	I. Patient Care Problems: J. Integumentary: Wounds (surgical and non-surgical)	38	2.05	0.12	0.77	2	95.0

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT101	I. Patient Care Problems: K. Multisystem: Failure to Thrive	38	1.82	0.13	0.80	2	95.0
NT114	I. Patient Care Problems: K. Multisystem: Sensory impairment (e.g., hearing loss)	38	1.71	0.13	0.80	2	95.0
NT118	I. Patient Care Problems: L. Psychosocial, Behavioral and Cognitive Health Issues: Behavioral state (e.g., NPASS, Brazelton, stress in extremely low birth weight infants)	38	2.55	0.09	0.55	2	95.0
NT120	I. Patient Care Problems: L. Psychosocial, Behavioral and Cognitive Health Issues: Maltreatment (abuse/neglect/medical nonadherence)	38	1.68	0.10	0.62	2	95.0
NT069	I. Patient Care Problems: G. Neurology: Neuromuscular disorders	39	1.59	0.12	0.75	2	95.1
NT051	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Anemia	40	2.20	0.10	0.65	2	95.2
NT053	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Blood group incompatibilities	40	2.03	0.11	0.70	2	95.2
NT060	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Polycythemia	40	1.80	0.11	0.72	2	95.2
NT068	I. Patient Care Problems: G. Neurology: Neurologic infectious diseases	40	1.73	0.12	0.75	2	95.2
NT070	I. Patient Care Problems: G. Neurology: Periventricular leukomalacia	40	2.13	0.12	0.76	2	95.2
NT021	I. Patient Care Problems: B. Cardiovascular: Pulmonary edema	41	1.83	0.11	0.70	2	95.3
NT045	I. Patient Care Problems: E. Musculoskeletal: Bone disease (e.g., osteopenia, osteogenesis imperfecta)	41	1.56	0.10	0.63	2	95.3
NT048	I. Patient Care Problems: E. Musculoskeletal: Infections (e.g., cellulitis)	41	2.07	0.11	0.69	2	95.3
NT013	I. Patient Care Problems: B. Cardiovascular: Congenital heart defects	42	2.43	0.10	0.67	2	95.5
NT019	I. Patient Care Problems: B. Cardiovascular: Patent Ductus Arteriosus (PDA)	42	2.62	0.09	0.58	2	95.5

Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT029	I. Patient Care Problems: C. Pulmonary: Exacerbation of chronic lung disease	42	2.38	0.11	0.73	2	95.5
NT043	I. Patient Care Problems: D. Endocrine: Syndrome of inappropriate secretion of antidiuretic hormone (SIADH)	42	1.57	0.10	0.67	2	95.5
NT005	I. Patient Care Problems: A. Factors Influencing Health Status (risk assessment, prevention and wellness): Screening (e.g., hearing, CCHD, metabolic, car seat challenge, ROP)	44	2.45	0.09	0.63	2	95.7
NT384	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Facilitates resolution of ethical conflicts: Identifies ethical implications of complex care situations, Considers the impact of scientific advances, cost, clinical effectiveness, patient and family values and preferences, and other external influences., Applies ethical principles to resolving concerns across the three spheres of influence	23	2.39	0.14	0.66	1	95.8
NT317	IV. Core Competencies: A. Direct Care Competency: Assesses the impact of environmental/system factors on care.	24	2.46	0.10	0.51	1	96.0
NT322	IV. Core Competencies: A. Direct Care Competency: Develops evidence-based clinical interventions and systems to achieve defined patient and system outcomes.	24	2.67	0.10	0.48	1	96.0
NT323	IV. Core Competencies: A. Direct Care Competency: Uses advanced communication skills within therapeutic relationships to improve patient outcomes.	24	2.54	0.12	0.59	1	96.0
NT330	IV. Core Competencies: A. Direct Care Competency: Assists staff in the development of innovative, cost effective programs or protocols of care	24	2.54	0.13	0.66	1	96.0
NT331	IV. Core Competencies: A. Direct Care Competency: Evaluates nursing practice that considers Safety, Timeliness, Effectiveness, Efficiency, Efficacy and Patient-centered care.	24	2.58	0.12	0.58	1	96.0

Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT332	IV. Core Competencies: A. Direct Care Competency: Determines when evidence based guidelines, policies, procedures and plans of care need to be tailored to the individual.	24	2.58	0.12	0.58	1	96.0
NT333	IV. Core Competencies: A. Direct Care Competency: Differentiates between outcomes that require care process modification at the individual patient level and those that require modification at the system level.	24	2.42	0.13	0.65	1	96.0
NT334	IV. Core Competencies: A. Direct Care Competency: Leads development of evidence-based plans for meeting individual, family, community, and population needs.	24	2.46	0.12	0.59	1	96.0
NT336	IV. Core Competencies: B. Consultation Competency: Provides consultation to staff nurses, medical staff and interdisciplinary colleagues	24	2.58	0.10	0.50	1	96.0
NT337	IV. Core Competencies: B. Consultation Competency: Initiates consultation to obtain resources as necessary to facilitate progress toward achieving identified outcomes.	24	2.42	0.13	0.65	1	96.0
NT338	IV. Core Competencies: B. Consultation Competency: Communicates consultation findings to appropriate parties consistent with professional and institutional standards.	24	2.50	0.12	0.59	1	96.0
NT339	IV. Core Competencies: B. Consultation Competency: Analyzes data from consultations to implement practice improvements.	24	2.42	0.13	0.65	1	96.0
NT340	IV. Core Competencies: C. Systems Leadership Competency: Facilitates the provision of clinically competent care by staff/team through education, role modeling, teambuilding, and quality monitoring.	24	2.67	0.10	0.48	1	96.0

Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT341	IV. Core Competencies: C. Systems Leadership Competency: Performs system level assessments to identify variables that influence nursing practice and outcomes, including but not limited to: Population variables, Environment, System of health care delivery, Regulatory requirements, Internal and external political influences/stability, Health care financing, Recurring practices that enhance or compromise patient or system outcomes.	24	2.38	0.15	0.71	1	96.0
NT342	IV. Core Competencies: C. Systems Leadership Competency: Determines nursing practice and system interventions that will promote patient, family and community safety.	24	2.54	0.10	0.51	1	96.0
NT343	IV. Core Competencies: C. Systems Leadership Competency: Uses effective strategies for changing clinician and team behavior to encourage adoption of evidence-based practices and innovations in care delivery.	24	2.67	0.10	0.48	1	96.0
NT344	IV. Core Competencies: C. Systems Leadership Competency: Provides leadership in maintaining a supportive and healthy work environment.	24	2.54	0.10	0.51	1	96.0
NT345	IV. Core Competencies: C. Systems Leadership Competency: Provides leadership in promoting interdisciplinary collaboration to implement outcome-focused patient care programs meeting the clinical needs of patients, families, populations and communities.	24	2.50	0.10	0.51	1	96.0
NT346	IV. Core Competencies: C. Systems Leadership Competency: Develops age-specific clinical standards, policies and procedures.	24	2.63	0.10	0.49	1	96.0

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT347	IV. Core Competencies: C. Systems Leadership Competency: Uses leadership, team building, negotiation, and conflict resolution skills to build partnerships within and across systems, including communities.	24	2.58	0.12	0.58	1	96.0
NT349	IV. Core Competencies: C. Systems Leadership Competency: Considers fiscal and budgetary implications in decision making regarding practice and system modifications: Evaluates use of products and services for appropriateness and cost/benefit in meeting care needs, Conducts cost/benefit analysis of new clinical technologies, Evaluates impact of introduction or withdrawal of products, services, and technologies	24	2.46	0.13	0.66	1	96.0
NT350	IV. Core Competencies: C. Systems Leadership Competency: Leads system change to improve health outcomes through evidence based practice: Specifies expected clinical and system level outcomes., Designs programs to improve clinical and system level processes and outcomes., Facilitates the adoption of practice change	24	2.63	0.12	0.58	1	96.0
NT352	IV. Core Competencies: C. Systems Leadership Competency: Disseminates outcomes of system-level change internally and externally	24	2.54	0.12	0.59	1	96.0
NT353	IV. Core Competencies: D. Collaboration Competency: Assesses the quality and effectiveness of interdisciplinary, intra-agency, and inter-agency communication and collaboration.	24	2.50	0.13	0.66	1	96.0
NT354	IV. Core Competencies: D. Collaboration Competency: Establishes collaborative relationships within and across departments that promote patient safety, culturally competent care, and clinical excellence	24	2.67	0.10	0.48	1	96.0

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT355	IV. Core Competencies: D. Collaboration Competency: Provides leadership for establishing, improving, and sustaining collaborative relationships to meet clinical needs.	24	2.67	0.10	0.48	1	96.0
NT356	IV. Core Competencies: D. Collaboration Competency: Practices collegially with medical staff and other members of the healthcare team so that all providers' unique contributions to health outcomes will be enhanced.	24	2.71	0.09	0.46	1	96.0
NT361	IV. Core Competencies: E. Coaching Competency: participates in pre-professional, graduate and continuing education of nurses and other health care providers: Completes a needs assessment as appropriate to guide interventions with staff; Promotes professional development of staff nurses and continuing education activities; Implements staff development and continuing education activities; Mentors nurses to translate research into practice.	24	2.46	0.13	0.66	1	96.0
NT362	IV. Core Competencies: E. Coaching Competency: Contributes to the advancement of the profession as a whole by disseminating outcomes of CNS practice through presentations and publications.	24	2.50	0.15	0.72	1	96.0
NT363	IV. Core Competencies: E. Coaching Competency: Mentors staff nurses, graduate students and others to acquire new knowledge and skills and develop their careers.	24	2.58	0.12	0.58	1	96.0
NT364	IV. Core Competencies: E. Coaching Competency: Mentors health professionals in applying the principles of evidence-based care.	24	2.63	0.10	0.49	1	96.0
NT365	IV. Core Competencies: E. Coaching Competency: Uses coaching and advanced communication skills to facilitate the development of effective clinical teams.	24	2.58	0.12	0.58	1	96.0

Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT366	IV. Core Competencies: E. Coaching Competency: Provides leadership in conflict management and negotiation to address problems in the healthcare system.	24	2.29	0.15	0.75	1	96.0
NT367	IV. Core Competencies: F. Research Competency: I. Interpretation, Translation and Use of Evidence: Analyzes research findings and other evidence for their potential application to clinical practice	24	2.75	0.09	0.44	1	96.0
NT368	IV. Core Competencies: F. Research Competency: I. Interpretation, Translation and Use of Evidence: Integrates evidence into the health, illness, and wellness management of patients, families, communities and groups.	24	2.79	0.08	0.41	1	96.0
NT369	IV. Core Competencies: F. Research Competency: I. Interpretation, Translation and Use of Evidence: Applies principles of evidence-based practice and quality improvement to all patient care.	24	2.88	0.07	0.34	1	96.0
NT370	IV. Core Competencies: F. Research Competency: I. Interpretation, Translation and Use of Evidence: Assesses system barriers and facilitators to adoption of evidence-based practices.	24	2.63	0.10	0.49	1	96.0
NT371	IV. Core Competencies: F. Research Competency: I. Interpretation, Translation and Use of Evidence: Designs programs for effective implementation of research findings and other evidence in clinical practice	24	2.46	0.13	0.66	1	96.0
NT372	IV. Core Competencies: F. Research Competency: I. Interpretation, Translation and Use of Evidence: Cultivates a climate of clinical inquiry across spheres of influence: Evaluates the need for improvement or redesign of care delivery processes to improve safety, efficiency, reliability, and quality., Disseminates expert knowledge.	24	2.58	0.12	0.58	1	96.0

Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT373	IV. Core Competencies: F. Research Competency: II. Evaluation of Clinical Practice: Fosters an interdisciplinary approach to quality improvement, evidence-based practice, research, and translation of research into practice	24	2.58	0.12	0.58	1	96.0
NT374	IV. Core Competencies: F. Research Competency: II. Evaluation of Clinical Practice: Participates in establishing quality improvement agenda for unit, department, program, system, or population	24	2.79	0.08	0.41	1	96.0
NT375	IV. Core Competencies: F. Research Competency: II. Evaluation of Clinical Practice: Provides leadership in planning data collection and quality monitoring	24	2.67	0.12	0.56	1	96.0
NT376	IV. Core Competencies: F. Research Competency: II. Evaluation of Clinical Practice: Uses quality monitoring data to assess the quality and effectiveness of clinical programs in meeting outcomes.	24	2.75	0.11	0.53	1	96.0
NT377	IV. Core Competencies: F. Research Competency: II. Evaluation of Clinical Practice: Develops quality improvement initiatives based on assessments.	24	2.75	0.11	0.53	1	96.0
NT378	IV. Core Competencies: F. Research Competency: II. Evaluation of Clinical Practice: Provides leadership in the design, implementation and evaluation of process improvement initiatives.	24	2.71	0.11	0.55	1	96.0
NT380	IV. Core Competencies: F. Research Competency: III. Conduct of Research: Participates in conduct and implementation of research which includes one or more of the following: Identification of questions for clinical inquiry, Conduct of literature reviews, Study design and implementation, Data collection,	24	2.29	0.14	0.69	1	96.0
NT381	IV. Core Competencies: F. Research Competency: III. Conduct of Research: Dissemination of findings	24	2.25	0.14	0.68	1	96.0

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT382	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Engages in a formal self-evaluation process, seeking feedback regarding own practice, from patients, peers, professional colleagues and others	24	2.54	0.10	0.51	1	96.0
NT383	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Fosters professional accountability in self or others.	24	2.63	0.10	0.49	1	96.0
NT385	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Promotes a practice climate conducive to providing ethical care.	24	2.50	0.10	0.51	1	96.0
NT126	II. Skills and Procedures: A. Cardiovascular: Interpret non-invasive hemodynamic values	37	2.24	0.11	0.68	1	97.4
NT106	I. Patient Care Problems: K. Multisystem: Iatrogenic drug exposed newborn	38	2.39	0.13	0.79	1	97.4
NT124	II. Skills and Procedures: A. Cardiovascular: Interpret ECG rhythms	38	1.58	0.11	0.68	1	97.4
NT125	II. Skills and Procedures: A. Cardiovascular: Interpret hemodynamic values	38	2.24	0.10	0.63	1	97.4
NT089	I. Patient Care Problems: I. Renal/Genitourinary: Infections	39	2.28	0.13	0.79	1	97.5
NT099	I. Patient Care Problems: K. Multisystem: Distributive shock	39	1.85	0.12	0.74	1	97.5
NT100	I. Patient Care Problems: K. Multisystem: End of life issues	39	2.36	0.11	0.67	1	97.5
NT103	I. Patient Care Problems: K. Multisystem: Genetics (e.g., metabolic screening, recurrence risk, life planning)	39	2.21	0.10	0.61	1	97.5
NT107	I. Patient Care Problems: K. Multisystem: Inborn errors of metabolism	39	2.03	0.12	0.74	1	97.5
NT109	I. Patient Care Problems: K. Multisystem: Low birth weight/prematurity (including late pre-term populations)	39	2.82	0.07	0.45	1	97.5
NT113	I. Patient Care Problems: K. Multisystem: Palliative care issues	39	2.28	0.11	0.69	1	97.5

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Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT119	I. Patient Care Problems: L. Psychosocial, Behavioral and Cognitive Health Issues: Developmental care (e.g., skin to skin care)	39	2.79	0.07	0.41	1	97.5
NT071	I. Patient Care Problems: G. Neurology: Seizure disorders	40	2.08	0.12	0.76	1	97.6
NT080	I. Patient Care Problems: H. Gastrointestinal: GI motility disorders	40	2.08	0.12	0.73	1	97.6
NT054	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Coagulopathies (including thrombocytopenia)	41	2.02	0.11	0.69	1	97.6
NT061	I. Patient Care Problems: G. Neurology: Congenital neurological abnormalities	41	2.15	0.11	0.69	1	97.6
NT062	I. Patient Care Problems: G. Neurology: Encephalopathy	41	2.15	0.12	0.76	1	97.6
NT066	I. Patient Care Problems: G. Neurology: Increased intracranial pressure	41	1.85	0.13	0.82	1	97.6
NT046	I. Patient Care Problems: E. Musculoskeletal: Congenital anomalies	42	2.31	0.10	0.64	1	97.7
NT047	I. Patient Care Problems: E. Musculoskeletal: Functional issues (e.g., immobility, birth injuries)	42	1.86	0.11	0.68	1	97.7
NT023	I. Patient Care Problems: C. Pulmonary: Air-leak syndromes (e.g., pneumothorax, pulmonary interstitial emphysema [PIE], pneumopericardium, pneumomediastinum)	43	2.51	0.09	0.59	1	97.7
NT024	I. Patient Care Problems: C. Pulmonary: Airway obstruction	43	2.07	0.12	0.77	1	97.7
NT025	I. Patient Care Problems: C. Pulmonary: Apnea of prematurity	43	2.72	0.08	0.50	1	97.7
NT027	I. Patient Care Problems: C. Pulmonary: Bronchopulmonary dysplasia	43	2.65	0.07	0.48	1	97.7
NT028	I. Patient Care Problems: C. Pulmonary: Congenital anomalies	43	2.56	0.09	0.59	1	97.7
NT030	I. Patient Care Problems: C. Pulmonary: Persistent pulmonary hypertension of the newborn (PPHN)	43	2.49	0.10	0.67	1	97.7

Clinical Nurse Specialist – Wellness Through Acute Care Job Analysis

Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT031	I. Patient Care Problems: C. Pulmonary: Pulmonary arterial hypertension	43	1.70	0.13	0.83	1	97.7
NT032	I. Patient Care Problems: C. Pulmonary: Pulmonary hemorrhage	43	1.86	0.12	0.80	1	97.7
NT033	I. Patient Care Problems: C. Pulmonary: Pulmonary infections	43	2.12	0.12	0.76	1	97.7
NT038	I. Patient Care Problems: C. Pulmonary: Transient tachypnea of the newborn	43	2.30	0.11	0.74	1	97.7
NT042	I. Patient Care Problems: D. Endocrine: Infant of diabetic mother	43	2.53	0.10	0.63	1	97.7
NT006	I. Patient Care Problems: A. Factors Influencing Health Status (risk assessment, prevention and wellness): Wellness promotion (e.g., normal variants, immunizations)	45	2.09	0.10	0.70	1	97.8
NT001	I. Patient Care Problems: A. Factors Influencing Health Status (risk assessment, prevention and wellness): Discharge planning	45	2.31	0.10	0.67	0	100.0
NT002	I. Patient Care Problems: A. Factors Influencing Health Status (risk assessment, prevention and wellness): Feeding (e.g., breast, cue-based, techniques)	46	2.54	0.10	0.66	0	100.0
NT004	I. Patient Care Problems: A. Factors Influencing Health Status (risk assessment, prevention and wellness): Safety (e.g., safe sleep)	46	2.61	0.09	0.58	0	100.0
NT007	I. Patient Care Problems: A. Factors Influencing Health Status (risk assessment, prevention and wellness): Developmental care	46	2.67	0.08	0.56	0	100.0
NT022	I. Patient Care Problems: C. Pulmonary: Acute respiratory failure	44	2.66	0.09	0.57	0	100.0
NT026	I. Patient Care Problems: C. Pulmonary: Aspirations (e.g., meconium aspiration)	43	2.49	0.09	0.59	0	100.0
NT035	I. Patient Care Problems: C. Pulmonary: Respiratory distress syndrome (e.g., surfactant deficiency)	44	2.84	0.06	0.43	0	100.0
NT040	I. Patient Care Problems: D. Endocrine: Hyperglycemia	43	2.02	0.11	0.74	0	100.0
NT041	I. Patient Care Problems: D. Endocrine: Hypoglycemia	44	2.55	0.10	0.66	0	100.0

Clinical Nurse Specialist – Wellness Through Acute Care Job Analysis

Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT057	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Hyperbilirubinemia	42	2.62	0.10	0.62	0	100.0
NT064	I. Patient Care Problems: G. Neurology: Hydrocephalus	42	2.12	0.12	0.77	0	100.0
NT065	I. Patient Care Problems: G. Neurology: Hypoxic ischemic encephalopathy	41	2.49	0.10	0.64	0	100.0
NT067	I. Patient Care Problems: G. Neurology: Intracranial hemorrhage/intraventricular hemorrhage	42	2.45	0.11	0.71	0	100.0
NT077	I. Patient Care Problems: H. Gastrointestinal: Bowel infarction/obstruction/perforation	41	2.44	0.11	0.71	0	100.0
NT078	I. Patient Care Problems: H. Gastrointestinal: Gastro-esophageal reflux	41	2.29	0.12	0.75	0	100.0
NT079	I. Patient Care Problems: H. Gastrointestinal: GI abnormalities	41	2.20	0.11	0.68	0	100.0
NT084	I. Patient Care Problems: H. Gastrointestinal: Feeding intolerance	41	2.56	0.10	0.63	0	100.0
NT085	I. Patient Care Problems: H. Gastrointestinal: Necrotizing enterocolitis	41	2.49	0.11	0.68	0	100.0
NT098	I. Patient Care Problems: K. Multisystem: Acid-base imbalances	40	2.58	0.09	0.55	0	100.0
NT102	I. Patient Care Problems: K. Multisystem: Fluids, electrolytes and nutrition	40	2.68	0.09	0.57	0	100.0
NT104	I. Patient Care Problems: K. Multisystem: Hospital acquired conditions (e.g., CLABSI, CAUTI, VAP/VAE)	40	2.55	0.09	0.60	0	100.0
NT105	I. Patient Care Problems: K. Multisystem: Hypovolemic shock	40	2.18	0.13	0.81	0	100.0
NT108	I. Patient Care Problems: K. Multisystem: Infectious diseases (e.g., congenital viral, bacterial, hospital acquired infections)	40	2.30	0.11	0.72	0	100.0
NT110	I. Patient Care Problems: K. Multisystem: Maternal drug exposed newborn	40	2.48	0.11	0.72	0	100.0

Rule 1. Percent Performed Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT111	I. Patient Care Problems: K. Multisystem: Maternal-fetal complications (e.g., HELLP, preeclampsia)	39	2.38	0.11	0.67	0	100.0
NT112	I. Patient Care Problems: K. Multisystem: Pain	40	2.63	0.09	0.54	0	100.0
NT115	I. Patient Care Problems: K. Multisystem: Systemic inflammatory response syndrome (SIRS)/sepsis/severe sepsis/septic shock/MODS	40	1.90	0.13	0.84	0	100.0
NT116	I. Patient Care Problems: K. Multisystem: Thermoregulation	40	2.75	0.07	0.44	0	100.0
NT117	I. Patient Care Problems: K. Multisystem: Transition to extrauterine life	40	2.68	0.10	0.62	0	100.0
NT122	II. Skills and Procedures: A. Cardiovascular: Direct cardiopulmonary resuscitation	39	2.23	0.12	0.74	0	100.0

Appendix C. Tasks Ratings in Mean Significance Order

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT159	II. Skills and Procedures: G. Renal/Genitourinary: Manage patients with flush renal stent	5	1.00	0.00	0.00	32	13.5
NT169	II. Skills and Procedures: J. Multisystem: Perform RetCam	3	1.00	0.00	0.00	34	8.1
NT150	II. Skills and Procedures: E. Neurology: Manage patients with epidural catheters	14	1.14	0.14	0.53	24	36.8
NT160	II. Skills and Procedures: H. Musculoskeletal: Apply orthotic devices	22	1.18	0.13	0.59	15	59.5
NT161	II. Skills and Procedures: H. Musculoskeletal: Manage patients with casting/splinting	22	1.18	0.13	0.59	15	59.5
NT172	II. Skills and Procedures: K. Behavioral: Manage assaultive behavior	21	1.19	0.13	0.60	16	56.8
NT136	II. Skills and Procedures: A. Cardiovascular: Manage patients with transcutaneous (external) pacemakers	10	1.20	0.20	0.63	29	25.6
NT050	I. Patient Care Problems: F. Hematology/Immunology/Oncology: AIDS and HIV	39	1.23	0.07	0.43	3	92.9
NT059	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Organ and tissue transplantation and associated problems	17	1.24	0.11	0.44	25	40.5
NT074	I. Patient Care Problems: G. Neurology: Stroke	28	1.25	0.10	0.52	14	66.7
NT138	II. Skills and Procedures: B. Pulmonary: Assist with bronchial alveolar lavage	15	1.27	0.18	0.70	23	39.5
NT158	II. Skills and Procedures: G. Renal/Genitourinary: Manage patients receiving renal replacement therapies	7	1.29	0.29	0.76	30	18.9
NT139	II. Skills and Procedures: B. Pulmonary: Assist with bronchoscopy	13	1.31	0.21	0.75	25	34.2
NT055	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Hematologic and solid tumors	30	1.33	0.10	0.55	11	73.2
NT132	II. Skills and Procedures: A. Cardiovascular: Manage patients with epicardial pacemakers	14	1.36	0.17	0.63	25	35.9

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT049	I. Patient Care Problems: E. Musculoskeletal: Traumatic fractures	36	1.36	0.10	0.59	7	83.7
NT072	I. Patient Care Problems: G. Neurology: Space-occupying lesions	35	1.37	0.11	0.65	7	83.3
NT091	I. Patient Care Problems: I. Renal/Genitourinary: Renal calculi	26	1.38	0.11	0.57	14	65.0
NT127	II. Skills and Procedures: A. Cardiovascular: Manage patients with transesophageal pacemakers	15	1.40	0.16	0.63	24	38.5
NT135	II. Skills and Procedures: A. Cardiovascular: Manage patients with temporary transvenous pacemakers	10	1.40	0.22	0.70	29	25.6
NT073	I. Patient Care Problems: G. Neurology: Spinal cord injury	23	1.43	0.14	0.66	19	54.8
NT010	I. Patient Care Problems: B. Cardiovascular: Cardiac tamponade	36	1.44	0.12	0.69	8	81.8
NT133	II. Skills and Procedures: A. Cardiovascular: Manage patients with implantable cardioverter defibrillators (ICD)	9	1.44	0.24	0.73	30	23.1
NT134	II. Skills and Procedures: A. Cardiovascular: Manage patients with permanent transvenous pacemakers	9	1.44	0.24	0.73	30	23.1
NT238	III. NEO Competencies: E. Coaching and Teaching Competency: Assists families in navigating the healthcare system to obtain the appropriate resources for their needs and problems	9	1.44	0.29	0.88	18	33.3
NT018	I. Patient Care Problems: B. Cardiovascular: Hypertensive crisis	29	1.45	0.13	0.69	15	65.9
NT171	II. Skills and Procedures: K. Behavioral: De-escalation techniques (e.g., crisis prevention)	22	1.45	0.18	0.86	15	59.5
NT240	III. NEO Competencies: E. Coaching and Teaching Competency: Develops an education plan based the family assessment	13	1.46	0.24	0.88	14	48.1
NT008	I. Patient Care Problems: B. Cardiovascular: Acute inflammatory disease (e.g., myocarditis, endocarditis, pericarditis)	34	1.47	0.12	0.71	10	77.3
NT044	I. Patient Care Problems: D. Endocrine: Thyroid disorders	40	1.48	0.09	0.60	4	90.9

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Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT036	I. Patient Care Problems: C. Pulmonary: Thoracic and pulmonary trauma and injuries	25	1.48	0.15	0.77	19	56.8
NT052	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Autoimmune diseases	37	1.49	0.11	0.65	4	90.2
NT020	I. Patient Care Problems: B. Cardiovascular: Peripheral vascular insufficiency (e.g., acute, arterial occlusion)	28	1.50	0.12	0.64	16	63.6
NT151	II. Skills and Procedures: E. Neurology: Manage patients with intraventricular ICP monitoring devices	12	1.50	0.26	0.90	26	31.6
NT012	I. Patient Care Problems: B. Cardiovascular: Cardiomyopathies (e.g., hypertrophic, dilated, restrictive, idiopathic)	34	1.53	0.11	0.61	9	79.1
NT087	I. Patient Care Problems: I. Renal/Genitourinary: Chronic kidney disease	32	1.53	0.13	0.72	8	80.0
NT083	I. Patient Care Problems: H. Gastrointestinal: Hepatitis	33	1.55	0.13	0.75	8	80.5
NT045	I. Patient Care Problems: E. Musculoskeletal: Bone disease (e.g., osteopenia, osteogenesis imperfecta)	41	1.56	0.10	0.63	2	95.3
NT043	I. Patient Care Problems: D. Endocrine: Syndrome of inappropriate secretion of antidiuretic hormone (SIADH)	42	1.57	0.10	0.67	2	95.5
NT075	I. Patient Care Problems: G. Neurology: Vascular malformation	35	1.57	0.12	0.70	7	83.3
NT039	I. Patient Care Problems: D. Endocrine: Adrenal disorders	40	1.58	0.10	0.64	4	90.9
NT058	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Immune deficiency disorders	38	1.58	0.11	0.68	3	92.7
NT093	I. Patient Care Problems: J. Integumentary: Dermatologic disorders	38	1.58	0.12	0.72	2	95.0
NT124	II. Skills and Procedures: A. Cardiovascular: Interpret ECG rhythms	38	1.58	0.11	0.68	1	97.4
NT069	I. Patient Care Problems: G. Neurology: Neuromuscular disorders	39	1.59	0.12	0.75	2	95.1

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Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT090	I. Patient Care Problems: I. Renal/Genitourinary: Renal and genitourinary surgeries	32	1.59	0.09	0.50	8	80.0
NT076	I. Patient Care Problems: H. Gastrointestinal: GI hemorrhage	37	1.59	0.14	0.83	2	94.9
NT121	II. Skills and Procedures: A. Cardiovascular: Determine lead selection for ECGs	35	1.60	0.14	0.81	4	89.7
NT157	II. Skills and Procedures: G. Renal/Genitourinary: Manage patients receiving peritoneal dialysis	10	1.60	0.31	0.97	27	27.0
NT016	I. Patient Care Problems: B. Cardiovascular: Heart failure	38	1.61	0.11	0.68	6	86.4
NT015	I. Patient Care Problems: B. Cardiovascular: Dysrhythmias	41	1.61	0.10	0.67	3	93.2
NT131	II. Skills and Procedures: A. Cardiovascular: Manage patients with elective cardioversion	27	1.63	0.14	0.74	12	69.2
NT154	II. Skills and Procedures: F. Gastrointestinal: Insert postpyloric feeding tubes	19	1.63	0.22	0.96	18	51.4
NT082	I. Patient Care Problems: H. Gastrointestinal: Hepatic failure	37	1.65	0.12	0.72	4	90.2
NT094	I. Patient Care Problems: J. Integumentary: Infectious skin disorders	37	1.65	0.12	0.72	3	92.5
NT037	I. Patient Care Problems: C. Pulmonary: Thoracic surgery (e.g., pneumonectomy, lobectomy, tracheal surgery)	32	1.66	0.12	0.70	12	72.7
NT014	I. Patient Care Problems: B. Cardiovascular: Decompensated heart failure	35	1.66	0.11	0.64	9	79.5
NT017	I. Patient Care Problems: B. Cardiovascular: Hypertension	39	1.67	0.11	0.66	5	88.6
NT241	III. NEO Competencies: E. Coaching and Teaching Competency: Assesses neonate's/infant's family to determine the family members' education needs regarding the neonate's/infant's disease processes	15	1.67	0.25	0.98	12	55.6
NT242	III. NEO Competencies: E. Coaching and Teaching Competency: Recognizes the family's learning needs throughout the continuum	12	1.67	0.28	0.98	15	44.4

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Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT120	I. Patient Care Problems: L. Psychosocial, Behavioral and Cognitive Health Issues: Maltreatment (abuse/neglect/medical nonadherence)	38	1.68	0.10	0.62	2	95.0
NT031	I. Patient Care Problems: C. Pulmonary: Pulmonary arterial hypertension	43	1.70	0.13	0.83	1	97.7
NT114	I. Patient Care Problems: K. Multisystem: Sensory impairment (e.g., hearing loss)	38	1.71	0.13	0.80	2	95.0
NT068	I. Patient Care Problems: G. Neurology: Neurologic infectious diseases	40	1.73	0.12	0.75	2	95.2
NT011	I. Patient Care Problems: B. Cardiovascular: Cardiogenic shock	38	1.74	0.13	0.79	6	86.4
NT034	I. Patient Care Problems: C. Pulmonary: Reactive airway disease	39	1.74	0.14	0.85	5	88.6
NT009	I. Patient Care Problems: B. Cardiovascular: Cardiac surgery	33	1.76	0.12	0.71	11	75.0
NT088	I. Patient Care Problems: I. Renal/Genitourinary: Congenital renal/genitourinary abnormalities	38	1.76	0.12	0.71	2	95.0
NT095	I. Patient Care Problems: J. Integumentary: Pressure ulcers	34	1.76	0.13	0.74	6	85.0
NT056	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Hemorrhagic disease of the newborn	39	1.77	0.11	0.71	3	92.9
NT060	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Polycythemia	40	1.80	0.11	0.72	2	95.2
NT129	II. Skills and Procedures: A. Cardiovascular: Manage patients with cardiac assist devices (e.g., RVAD, BVAD, LVAD, ECMO)	15	1.80	0.22	0.86	24	38.5
NT086	I. Patient Care Problems: I. Renal/Genitourinary: Acute kidney injury	36	1.81	0.13	0.79	4	90.0
NT101	I. Patient Care Problems: K. Multisystem: Failure to Thrive	38	1.82	0.13	0.80	2	95.0
NT165	II. Skills and Procedures: J. Multisystem: Interpret diagnostic imaging	22	1.82	0.21	1.01	15	59.5
NT152	II. Skills and Procedures: E. Neurology: Manage patients with ventricular reservoirs/shunts	17	1.82	0.25	1.01	21	44.7

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT021	I. Patient Care Problems: B. Cardiovascular: Pulmonary edema	41	1.83	0.11	0.70	2	95.3
NT099	I. Patient Care Problems: K. Multisystem: Distributive shock	39	1.85	0.12	0.74	1	97.5
NT066	I. Patient Care Problems: G. Neurology: Increased intracranial pressure	41	1.85	0.13	0.82	1	97.6
NT047	I. Patient Care Problems: E. Musculoskeletal: Functional issues (e.g., immobility, birth injuries)	42	1.86	0.11	0.68	1	97.7
NT156	II. Skills and Procedures: G. Renal/Genitourinary: Maintain dialysis catheters	7	1.86	0.40	1.07	30	18.9
NT032	I. Patient Care Problems: C. Pulmonary: Pulmonary hemorrhage	43	1.86	0.12	0.80	1	97.7
NT244	III. NEO Competencies: E. Coaching and Teaching Competency: Provides educational resources to the neonate's/infant's family or provides a referral to obtain information if resources are unavailable	9	1.89	0.35	1.05	18	33.3
NT115	I. Patient Care Problems: K. Multisystem: Systemic inflammatory response syndrome (SIRS)/sepsis/severe sepsis/septic shock/MODS	40	1.90	0.13	0.84	0	100.0
NT147	II. Skills and Procedures: D. Hematology/Immunology/Oncology: Manage patients with exchange transfusions	20	1.90	0.23	1.02	18	52.6
NT358	IV. Core Competencies: E. Coaching Competency: Coaches patients and families to help them navigate the healthcare system.	21	1.90	0.17	0.77	4	84.0
NT239	III. NEO Competencies: E. Coaching and Teaching Competency: Assesses the educational needs of the neonate's/infant's family members based on their knowledge of health issues, developmental level, health literacy level, learning needs, readiness to learn, and culture and beliefs	11	1.91	0.31	1.04	16	40.7

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Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT149	II. Skills and Procedures: E. Neurology: Manage patients with cerebral oxygenation monitoring devices	17	1.94	0.25	1.03	21	44.7
NT329	IV. Core Competencies: A. Direct Care Competency: Provides direct care to selected patients based on the needs of the patient and the CNS's specialty knowledge and skills	22	1.95	0.18	0.84	3	88.0
NT164	II. Skills and Procedures: I. Integumentary: Provide wound care	23	1.96	0.21	1.02	14	62.2
NT063	I. Patient Care Problems: G. Neurology: Head and brain trauma/injury	39	2.00	0.13	0.79	3	92.9
NT130	II. Skills and Procedures: A. Cardiovascular: Manage patients with central venous pressure catheters	24	2.00	0.19	0.93	15	61.5
NT283	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Identifies the family's methods of communication and decision making	12	2.00	0.30	1.04	14	46.2
NT285	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Assesses interactions of family members, including variations in social, cultural, and spiritual beliefs that may affect decision making	12	2.00	0.30	1.04	14	46.2
NT290	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Applies knowledge of and utilization of available resources to assist with crisis management	12	2.00	0.30	1.04	14	46.2
NT040	I. Patient Care Problems: D. Endocrine: Hyperglycemia	43	2.02	0.11	0.74	0	100.0
NT054	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Coagulopathies (including thrombocytopenia)	41	2.02	0.11	0.69	1	97.6
NT053	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Blood group incompatibilities	40	2.03	0.11	0.70	2	95.2
NT107	I. Patient Care Problems: K. Multisystem: Inborn errors of metabolism	39	2.03	0.12	0.74	1	97.5

Clinical Nurse Specialist – Wellness Through Acute Care Job Analysis

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT360	IV. Core Competencies: E. Coaching Competency: Provides education to individuals, families, groups and communities to promote knowledge, understanding and optimal functioning across the wellness-illness continuum.	22	2.05	0.17	0.79	3	88.0
NT003	I. Patient Care Problems: A. Factors Influencing Health Status (risk assessment, prevention and wellness): Monitoring anthropometric measurements	39	2.05	0.12	0.72	7	84.8
NT097	I. Patient Care Problems: J. Integumentary: Wounds (surgical and non-surgical)	38	2.05	0.12	0.77	2	95.0
NT162	II. Skills and Procedures: I. Integumentary: Consult for patients with ostomy devices	15	2.07	0.27	1.03	22	40.5
NT235	III. NEO Competencies: D. Collaboration Competency: Engages and participates constructively with agencies	15	2.07	0.27	1.03	13	53.6
NT024	I. Patient Care Problems: C. Pulmonary: Airway obstruction	43	2.07	0.12	0.77	1	97.7
NT328	IV. Core Competencies: A. Direct Care Competency: Prescribe: treatments	14	2.07	0.20	0.73	10	58.3
NT048	I. Patient Care Problems: E. Musculoskeletal: Infections (e.g., cellulitis)	41	2.07	0.11	0.69	2	95.3
NT071	I. Patient Care Problems: G. Neurology: Seizure disorders	40	2.08	0.12	0.76	1	97.6
NT080	I. Patient Care Problems: H. Gastrointestinal: GI motility disorders	40	2.08	0.12	0.73	1	97.6
NT312	IV. Core Competencies: A. Direct Care Competency: Conducts comprehensive, holistic wellness and illness assessments using known or innovative evidence-based techniques, tools, and direct and indirect methods.	23	2.09	0.17	0.79	2	92.0
NT006	I. Patient Care Problems: A. Factors Influencing Health Status (risk assessment, prevention and wellness): Wellness promotion (e.g., normal variants, immunizations)	45	2.09	0.10	0.70	1	97.8

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT387	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Facilitates patient and family understanding of the risks, benefits, and outcomes of proposed healthcare regimen to promote informed decision making.	21	2.10	0.17	0.77	4	84.0
NT033	I. Patient Care Problems: C. Pulmonary: Pulmonary infections	43	2.12	0.12	0.76	1	97.7
NT064	I. Patient Care Problems: G. Neurology: Hydrocephalus	42	2.12	0.12	0.77	0	100.0
NT070	I. Patient Care Problems: G. Neurology: Periventricular leukomalacia	40	2.13	0.12	0.76	2	95.2
NT201	III. NEO Competencies: B. Consultation Competency: Applies data collected from consultations to plan or revise care for the individual patient or family	16	2.13	0.26	1.02	16	50.0
NT148	II. Skills and Procedures: E. Neurology: Assist with lumbar puncture	23	2.13	0.21	1.01	15	60.5
NT390	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Advocates for the CNS/APRN role and for positive legislative response to issues affecting nursing practice.	21	2.14	0.17	0.79	3	87.5
NT061	I. Patient Care Problems: G. Neurology: Congenital neurological abnormalities	41	2.15	0.11	0.69	1	97.6
NT062	I. Patient Care Problems: G. Neurology: Encephalopathy	41	2.15	0.12	0.76	1	97.6
NT327	IV. Core Competencies: A. Direct Care Competency: Prescribe: equipment	13	2.15	0.15	0.55	12	52.0
NT313	IV. Core Competencies: A. Direct Care Competency: Obtains data about context and etiologies (including both non-disease and disease-related factors) necessary to formulate differential diagnoses and plans of care, and to identify and evaluate of outcomes.	23	2.17	0.15	0.72	2	92.0

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT388	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Advocates for equitable patient care by: Participating in organizational, local, state, national, or international level of policy-making activities for issues related to their expertise, Evaluating the impact of legislative and regulatory policies as they apply to nursing practice and patient or population outcomes	23	2.17	0.16	0.78	2	92.0
NT105	I. Patient Care Problems: K. Multisystem: Hypovolemic shock	40	2.18	0.13	0.81	0	100.0
NT389	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Promotes the role and scope of practice of the CNS to legislators, regulators, other health care providers, and the public: Communicates information that promotes nursing, the role of the CNS and outcomes of nursing and CNS practice through the use of the media, advanced technologies, and community networks.	22	2.18	0.17	0.80	3	88.0
NT092	I. Patient Care Problems: J. Integumentary: Congenital abnormalities	38	2.18	0.12	0.77	2	95.0
NT079	I. Patient Care Problems: H. Gastrointestinal: GI abnormalities	41	2.20	0.11	0.68	0	100.0
NT051	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Anemia	40	2.20	0.10	0.65	2	95.2
NT197	III. NEO Competencies: B. Consultation Competency: Assesses the needs, preferences, and strengths of the neonate/infant and family and recommends a healthcare plan in order to optimize health outcomes	15	2.20	0.26	1.01	17	46.9
NT202	III. NEO Competencies: C: Systems Leadership Competency: Operates primarily at the unit level	20	2.20	0.22	1.01	11	64.5
NT326	IV. Core Competencies: A. Direct Care Competency: Prescribe: diagnostic measures	10	2.20	0.29	0.92	15	40.0

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Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT103	I. Patient Care Problems: K. Multisystem: Genetics (e.g., metabolic screening, recurrence risk, life planning)	39	2.21	0.10	0.61	1	97.5
NT200	III. NEO Competencies: B. Consultation Competency: Communicates consultation findings to the family and members of the healthcare team and completes the necessary documentation	18	2.22	0.24	1.00	13	58.1
NT122	II. Skills and Procedures: A. Cardiovascular: Direct cardiopulmonary resuscitation	39	2.23	0.12	0.74	0	100.0
NT170	II. Skills and Procedures: J. Multisystem: Prescribe specialty formula/supplements	13	2.23	0.28	1.01	24	35.1
NT289	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Facilitates the incorporation of strategies for evidence-based practice specific to the neonatal population into crisis management	13	2.23	0.28	1.01	12	52.0
NT125	II. Skills and Procedures: A. Cardiovascular: Interpret hemodynamic values	38	2.24	0.10	0.63	1	97.4
NT126	II. Skills and Procedures: A. Cardiovascular: Interpret non-invasive hemodynamic values	37	2.24	0.11	0.68	1	97.4
NT236	III. NEO Competencies: D. Collaboration Competency: Participates in collaborative efforts to improve intra-agency and inter-agency communication	16	2.25	0.25	1.00	12	57.1
NT381	IV. Core Competencies: F. Research Competency: III. Conduct of Research: Dissemination of findings	24	2.25	0.14	0.68	1	96.0
NT174	III. NEO Competencies: A. Direct Care Competency: Conducts a comprehensive history and assessment of the neonate/infant and family, using known or innovative evidence-based techniques, tools, and direct and indirect methods	19	2.26	0.23	0.99	14	57.6

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT315	IV. Core Competencies: A. Direct Care Competency: Assesses the effects of interactions among the individual, family, community, and social systems on health and illness.	22	2.27	0.15	0.70	3	88.0
NT089	I. Patient Care Problems: I. Renal/Genitourinary: Infections	39	2.28	0.13	0.79	1	97.5
NT113	I. Patient Care Problems: K. Multisystem: Palliative care issues	39	2.28	0.11	0.69	1	97.5
NT167	II. Skills and Procedures: J. Multisystem: Order diagnostic imaging	14	2.29	0.27	0.99	23	37.8
NT276	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Facilitates the discussion with families of neonates/infants regarding a proposed healthcare regimen for their child, to assist parents to make informed decisions, ensuring that families have full access to and understanding of all information related to the current situation of their child	14	2.29	0.27	0.99	12	53.8
NT366	IV. Core Competencies: E. Coaching Competency: Provides leadership in conflict management and negotiation to address problems in the healthcare system.	24	2.29	0.15	0.75	1	96.0
NT380	IV. Core Competencies: F. Research Competency: III. Conduct of Research: Participates in conduct and implementation of research which includes one or more of the following: Identification of questions for clinical inquiry, Conduct of literature reviews, Study design and implementation, Data collection,	24	2.29	0.14	0.69	1	96.0
NT078	I. Patient Care Problems: H. Gastrointestinal: Gastro-esophageal reflux	41	2.29	0.12	0.75	0	100.0
NT081	I. Patient Care Problems: H. Gastrointestinal: GI surgeries	37	2.30	0.13	0.78	4	90.2
NT108	I. Patient Care Problems: K. Multisystem: Infectious diseases (e.g., congenital viral, bacterial, hospital acquired infections)	40	2.30	0.11	0.72	0	100.0

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT038	I. Patient Care Problems: C. Pulmonary: Transient tachypnea of the newborn	43	2.30	0.11	0.74	1	97.7
NT163	II. Skills and Procedures: I. Integumentary: Consult for patients with/at risk for pressure areas	23	2.30	0.20	0.97	14	62.2
NT386	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Facilitates interdisciplinary teams to address ethical concerns, risks or considerations, benefits and outcomes of patient care.	23	2.30	0.15	0.70	2	92.0
NT046	I. Patient Care Problems: E. Musculoskeletal: Congenital anomalies	42	2.31	0.10	0.64	1	97.7
NT001	I. Patient Care Problems: A. Factors Influencing Health Status (risk assessment, prevention and wellness): Discharge planning	45	2.31	0.10	0.67	0	100.0
NT128	II. Skills and Procedures: A. Cardiovascular: Manage patients with arterial pressure catheters	35	2.31	0.13	0.80	4	89.7
NT348	IV. Core Competencies: C. Systems Leadership Competency: Coordinates the care of patients with use of system and community resources to assure successful health/illness/wellness transitions, enhance delivery of care, and achieve optimal patient outcomes.	22	2.32	0.15	0.72	3	88.0
NT175	III. NEO Competencies: A. Direct Care Competency: Develops a comprehensive database (both disease and non-disease factors) that includes pertinent history, diagnostic tests, and physical assessment	18	2.33	0.23	0.97	15	54.5
NT188	III. NEO Competencies: A. Direct Care Competency: Provides direct care to selected neonates/infants and families based on the needs of the patient and the CNS's specialty knowledge and skills	15	2.33	0.25	0.98	18	45.5
NT212	III. NEO Competencies: C. Systems Leadership Competency: Provides evidence-based information on work-related self-care to staff	18	2.33	0.23	0.97	13	58.1

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT216	III. NEO Competencies: C: Systems Leadership Competency: Identifies general transition resources needed by neonates/infants and families upon discharge	15	2.33	0.25	0.98	15	50.0
NT284	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Identifies gaps in communication between family members and healthcare professionals	15	2.33	0.25	0.98	11	57.7
NT295	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Identifies ethical and legal issues related to worth and dignity that can affect patient care and professional practice	12	2.33	0.28	0.98	14	46.2
NT298	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Identifies patient and family support systems	12	2.33	0.28	0.98	14	46.2
NT357	IV. Core Competencies: D. Collaboration Competency: Facilitates intra-agency and inter-agency communication.	23	2.35	0.15	0.71	2	92.0
NT100	I. Patient Care Problems: K. Multisystem: End of life issues	39	2.36	0.11	0.67	1	97.5
NT319	IV. Core Competencies: A. Direct Care Competency: Prioritizes differential diagnoses to reflect those conditions most relevant to signs, symptoms and patterns amenable to CNS interventions.	22	2.36	0.14	0.66	3	88.0
NT145	II. Skills and Procedures: B. Pulmonary: Perform arterial punctures	19	2.37	0.22	0.96	19	50.0

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT341	IV. Core Competencies: C. Systems Leadership Competency: Performs system level assessments to identify variables that influence nursing practice and outcomes, including but not limited to: Population variables, Environment, System of health care delivery, Regulatory requirements, Internal and external political influences/stability, Health care financing, Recurring practices that enhance or compromise patient or system outcomes.	24	2.38	0.15	0.71	1	96.0
NT029	I. Patient Care Problems: C. Pulmonary: Exacerbation of chronic lung disease	42	2.38	0.11	0.73	2	95.5
NT111	I. Patient Care Problems: K. Multisystem: Maternal-fetal complications (e.g., HELLP, preeclampsia)	39	2.38	0.11	0.67	0	100.0
NT384	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Facilitates resolution of ethical conflicts: Identifies ethical implications of complex care situations, Considers the impact of scientific advances, cost, clinical effectiveness, patient and family values and preferences, and other external influences., Applies ethical principles to resolving concerns across the three spheres of influence	23	2.39	0.14	0.66	1	95.8
NT106	I. Patient Care Problems: K. Multisystem: Iatrogenic drug exposed newborn	38	2.39	0.13	0.79	1	97.4
NT310	III. NEO Competencies: I. Culturally Sensitive Care Competency: Provides care on the basis of the family's belief system and learns the culture of the healthcare environment	10	2.40	0.31	0.97	16	38.5

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT281	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Evaluates and recommends strategies for using interventions and resources to improve communication that will provide optimal outcomes related to the health and needs of the neonate/infant and family	17	2.41	0.23	0.94	9	65.4
NT325	IV. Core Competencies: A. Direct Care Competency: Prescribe: non-pharmacologic interventions	17	2.41	0.17	0.71	8	68.0
NT166	II. Skills and Procedures: J. Multisystem: Interpret laboratory results	24	2.42	0.19	0.93	13	64.9
NT333	IV. Core Competencies: A. Direct Care Competency: Differentiates between outcomes that require care process modification at the individual patient level and those that require modification at the system level.	24	2.42	0.13	0.65	1	96.0
NT337	IV. Core Competencies: B. Consultation Competency: Initiates consultation to obtain resources as necessary to facilitate progress toward achieving identified outcomes.	24	2.42	0.13	0.65	1	96.0
NT339	IV. Core Competencies: B. Consultation Competency: Analyzes data from consultations to implement practice improvements.	24	2.42	0.13	0.65	1	96.0
NT013	I. Patient Care Problems: B. Cardiovascular: Congenital heart defects	42	2.43	0.10	0.67	2	95.5
NT300	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Develops and preserves a therapeutic relationship and connection with the neonate's/infant's family and other professionals in order to facilitate optimal care and patient outcomes	14	2.43	0.25	0.94	12	53.8

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT359	IV. Core Competencies: E. Coaching Competency: Designs health information and patient education appropriate to the patient's developmental level, health literacy level, learning needs, readiness to learn, and cultural values and beliefs.	23	2.43	0.11	0.51	2	92.0
NT077	I. Patient Care Problems: H. Gastrointestinal: Bowel infarction/obstruction/perforation	41	2.44	0.11	0.71	0	100.0
NT067	I. Patient Care Problems: G. Neurology: Intracranial hemorrhage/intraventricular hemorrhage	42	2.45	0.11	0.71	0	100.0
NT005	I. Patient Care Problems: A. Factors Influencing Health Status (risk assessment, prevention and wellness): Screening (e.g., hearing, CCHD, metabolic, car seat challenge, ROP)	44	2.45	0.09	0.63	2	95.7
NT286	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Verbalizes awareness of legal issues affecting neonate/infant care and professional practice regarding ethical decision making	11	2.45	0.28	0.93	15	42.3
NT287	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Recognizes ethical conflicts and dilemmas and distinguishes ethical decisions to be made	11	2.45	0.28	0.93	15	42.3
NT297	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Identifies and communicates family functions and interactions that can affect social, cultural, and spiritual variations	11	2.45	0.28	0.93	15	42.3
NT299	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Interprets the role of the CNS to the patient, family, healthcare team, and community	11	2.45	0.28	0.93	15	42.3

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT320	IV. Core Competencies: A. Direct Care Competency: Selects interventions that may include, but are not limited to: Application of advanced nursing therapies, Initiation of interdisciplinary team meetings, consultations and other communications to benefit patient care, Management of patient medications, clinical procedures and other interventions, Psychosocial support including patient counseling and spiritual interventions	22	2.45	0.14	0.67	3	88.0
NT317	IV. Core Competencies: A. Direct Care Competency: Assesses the impact of environmental/system factors on care.	24	2.46	0.10	0.51	1	96.0
NT334	IV. Core Competencies: A. Direct Care Competency: Leads development of evidence-based plans for meeting individual, family, community, and population needs.	24	2.46	0.12	0.59	1	96.0
NT349	IV. Core Competencies: C. Systems Leadership Competency: Considers fiscal and budgetary implications in decision making regarding practice and system modifications: Evaluates use of products and services for appropriateness and cost/benefit in meeting care needs, Conducts cost/benefit analysis of new clinical technologies, Evaluates impact of introduction or withdrawal of products, services, and technologies	24	2.46	0.13	0.66	1	96.0
NT361	IV. Core Competencies: E. Coaching Competency: participates in pre-professional, graduate and continuing education of nurses and other health care providers: Completes a needs assessment as appropriate to guide interventions with staff; Promotes professional development of staff nurses and continuing education activities; Implements staff development and continuing education activities; Mentors nurses to translate research into practice.	24	2.46	0.13	0.66	1	96.0

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Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT371	IV. Core Competencies: F. Research Competency: I. Interpretation, Translation and Use of Evidence: Designs programs for effective implementation of research findings and other evidence in clinical practice	24	2.46	0.13	0.66	1	96.0
NT110	I. Patient Care Problems: K. Multisystem: Maternal drug exposed newborn	40	2.48	0.11	0.72	0	100.0
NT321	IV. Core Competencies: A. Direct Care Competency: Designs strategies, including advanced nursing therapies, to meet the multifaceted needs of complex patients and groups of patients.	23	2.48	0.12	0.59	2	92.0
NT065	I. Patient Care Problems: G. Neurology: Hypoxic ischemic encephalopathy	41	2.49	0.10	0.64	0	100.0
NT085	I. Patient Care Problems: H. Gastrointestinal: Necrotizing enterocolitis	41	2.49	0.11	0.68	0	100.0
NT026	I. Patient Care Problems: C. Pulmonary: Aspirations (e.g., meconium aspiration)	43	2.49	0.09	0.59	0	100.0
NT030	I. Patient Care Problems: C. Pulmonary: Persistent pulmonary hypertension of the newborn (PPHN)	43	2.49	0.10	0.67	1	97.7
NT155	II. Skills and Procedures: F. Gastrointestinal: Manage patients with G tube	16	2.50	0.22	0.89	21	43.2
NT187	III. NEO Competencies: A. Direct Care Competency: Prescribes nursing therapeutics, pharmacologic and nonpharmacologic interventions, diagnostic measures, equipment, procedures, and treatments to meet the needs of neonates/infants, families, and groups, in accordance with professional preparation, institutional privileges, and state and federal laws and practice acts	12	2.50	0.26	0.90	21	36.4
NT237	III. NEO Competencies: E. Coaching and Teaching Competency: Coaches and advocates for neonates/infants and families based on their culture, religious beliefs, and health issues	16	2.50	0.22	0.89	11	59.3

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT273	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Analyzes the medical advances, cost, clinical effectiveness, impact on the patient and family, and the family's values	12	2.50	0.26	0.90	14	46.2
NT275	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Facilitates interdisciplinary teams to address ethical concerns, risk, benefits, and outcomes at the unit level	12	2.50	0.26	0.90	14	46.2
NT296	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Distinguishes differences in abnormal and normal behaviors related to dignity of life and death and demonstrates awareness of palliative care options	12	2.50	0.26	0.90	14	46.2
NT311	III. NEO Competencies: I. Culturally Sensitive Care Competency: Develops culturally sensitive practices that address cultural, ethnic, spiritual, and intergenerational or age differences among families and healthcare providers	12	2.50	0.26	0.90	14	46.2
NT316	IV. Core Competencies: A. Direct Care Competency: Identifies potential risks to patient safety, autonomy and quality of care based on assessments across the patient, nurse and system spheres of influence.	22	2.50	0.11	0.51	3	88.0
NT324	IV. Core Competencies: A. Direct Care Competency: Prescribe: pharmacologic interventions	8	2.50	0.27	0.76	17	32.0
NT338	IV. Core Competencies: B. Consultation Competency: Communicates consultation findings to appropriate parties consistent with professional and institutional standards.	24	2.50	0.12	0.59	1	96.0

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT345	IV. Core Competencies: C. Systems Leadership Competency: Provides leadership in promoting interdisciplinary collaboration to implement outcome-focused patient care programs meeting the clinical needs of patients, families, populations and communities.	24	2.50	0.10	0.51	1	96.0
NT353	IV. Core Competencies: D. Collaboration Competency: Assesses the quality and effectiveness of interdisciplinary, intra-agency, and inter-agency communication and collaboration.	24	2.50	0.13	0.66	1	96.0
NT362	IV. Core Competencies: E. Coaching Competency: Contributes to the advancement of the profession as a whole by disseminating outcomes of CNS practice through presentations and publications.	24	2.50	0.15	0.72	1	96.0
NT385	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Promotes a practice climate conducive to providing ethical care.	24	2.50	0.10	0.51	1	96.0
NT023	I. Patient Care Problems: C. Pulmonary: Air-leak syndromes (e.g., pneumothorax, pulmonary interstitial emphysema [PIE], pneumopericardium, pneumomediastinum)	43	2.51	0.09	0.59	1	97.7
NT318	IV. Core Competencies: A. Direct Care Competency: Synthesizes assessment data, advanced knowledge, and experience, using critical thinking and clinical judgment to formulate differential diagnoses for clinical problems amenable to CNS intervention.	23	2.52	0.14	0.67	2	92.0
NT042	I. Patient Care Problems: D. Endocrine: Infant of diabetic mother	43	2.53	0.10	0.63	1	97.7
NT323	IV. Core Competencies: A. Direct Care Competency: Uses advanced communication skills within therapeutic relationships to improve patient outcomes.	24	2.54	0.12	0.59	1	96.0

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT330	IV. Core Competencies: A. Direct Care Competency: Assists staff in the development of innovative, cost effective programs or protocols of care	24	2.54	0.13	0.66	1	96.0
NT342	IV. Core Competencies: C. Systems Leadership Competency: Determines nursing practice and system interventions that will promote patient, family and community safety.	24	2.54	0.10	0.51	1	96.0
NT344	IV. Core Competencies: C. Systems Leadership Competency: Provides leadership in maintaining a supportive and healthy work environment.	24	2.54	0.10	0.51	1	96.0
NT352	IV. Core Competencies: C. Systems Leadership Competency: Disseminates outcomes of system-level change internally and externally	24	2.54	0.12	0.59	1	96.0
NT382	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Engages in a formal self-evaluation process, seeking feedback regarding own practice, from patients, peers, professional colleagues and others	24	2.54	0.10	0.51	1	96.0
NT002	I. Patient Care Problems: A. Factors Influencing Health Status (risk assessment, prevention and wellness): Feeding (e.g., breast, cue-based, techniques)	46	2.54	0.10	0.66	0	100.0
NT041	I. Patient Care Problems: D. Endocrine: Hypoglycemia	44	2.55	0.10	0.66	0	100.0
NT314	IV. Core Competencies: A. Direct Care Competency: Employs evidence-based clinical practice guidelines to guide screening and diagnosis.	22	2.55	0.11	0.51	3	88.0
NT104	I. Patient Care Problems: K. Multisystem: Hospital acquired conditions (e.g., CLABSI, CAUTI, VAP/VAE)	40	2.55	0.09	0.60	0	100.0
NT118	I. Patient Care Problems: L. Psychosocial, Behavioral and Cognitive Health Issues: Behavioral state (e.g., NPASS, Brazelton, stress in extremely low birth weight infants)	38	2.55	0.09	0.55	2	95.0

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT217	III. NEO Competencies: C. Systems Leadership Competency: Evaluates use of products and services for appropriateness and cost/benefit in meeting care needs	18	2.56	0.20	0.86	12	60.0
NT028	I. Patient Care Problems: C. Pulmonary: Congenital anomalies	43	2.56	0.09	0.59	1	97.7
NT084	I. Patient Care Problems: H. Gastrointestinal: Feeding intolerance	41	2.56	0.10	0.63	0	100.0
NT098	I. Patient Care Problems: K. Multisystem: Acid-base imbalances	40	2.58	0.09	0.55	0	100.0
NT247	III. NEO Competencies: E. Coaching and Teaching Competency: Develops poster presentation or dashboard for unit to share outcomes of CNS practice, with guidance of CNS mentor, as needed	19	2.58	0.19	0.84	8	70.4
NT331	IV. Core Competencies: A. Direct Care Competency: Evaluates nursing practice that considers Safety, Timeliness, Effectiveness, Efficiency, Efficacy and Patient-centered care.	24	2.58	0.12	0.58	1	96.0
NT332	IV. Core Competencies: A. Direct Care Competency: Determines when evidence based guidelines, policies, procedures and plans of care need to be tailored to the individual.	24	2.58	0.12	0.58	1	96.0
NT336	IV. Core Competencies: B. Consultation Competency: Provides consultation to staff nurses, medical staff and interdisciplinary colleagues	24	2.58	0.10	0.50	1	96.0
NT347	IV. Core Competencies: C. Systems Leadership Competency: Uses leadership, team building, negotiation, and conflict resolution skills to build partnerships within and across systems, including communities.	24	2.58	0.12	0.58	1	96.0
NT363	IV. Core Competencies: E. Coaching Competency: Mentors staff nurses, graduate students and others to acquire new knowledge and skills and develop their careers.	24	2.58	0.12	0.58	1	96.0

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT365	IV. Core Competencies: E. Coaching Competency: Uses coaching and advanced communication skills to facilitate the development of effective clinical teams.	24	2.58	0.12	0.58	1	96.0
NT372	IV. Core Competencies: F. Research Competency: I. Interpretation, Translation and Use of Evidence: Cultivates a climate of clinical inquiry across spheres of influence: Evaluates the need for improvement or redesign of care delivery processes to improve safety, efficiency, reliability, and quality., Disseminates expert knowledge.	24	2.58	0.12	0.58	1	96.0
NT373	IV. Core Competencies: F. Research Competency: II. Evaluation of Clinical Practice: Fosters an interdisciplinary approach to quality improvement, evidence-based practice, research, and translation of research into practice	24	2.58	0.12	0.58	1	96.0
NT123	II. Skills and Procedures: A. Cardiovascular: Insert peripherally inserted central catheters (PICC)	34	2.59	0.10	0.61	4	89.5
NT207	III. NEO Competencies: C: Systems Leadership Competency: Designs and implements safety systems within the home unit	20	2.60	0.18	0.82	11	64.5
NT004	I. Patient Care Problems: A. Factors Influencing Health Status (risk assessment, prevention and wellness): Safety (e.g., safe sleep)	46	2.61	0.09	0.58	0	100.0
NT351	IV. Core Competencies: C. Systems Leadership Competency: Evaluates impact of CNS and other nursing practice on systems of care using nurse-sensitive outcomes	23	2.61	0.12	0.58	2	92.0
NT379	IV. Core Competencies: F. Research Competency: II. Evaluation of Clinical Practice: Provides leadership in the system-wide implementation of quality improvements and innovations.	23	2.61	0.12	0.58	2	92.0
NT019	I. Patient Care Problems: B. Cardiovascular: Patent Ductus Arteriosus (PDA)	42	2.62	0.09	0.58	2	95.5

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT057	I. Patient Care Problems: F. Hematology/Immunology/Oncology: Hyperbilirubinemia	42	2.62	0.10	0.62	0	100.0
NT112	I. Patient Care Problems: K. Multisystem: Pain	40	2.63	0.09	0.54	0	100.0
NT255	III. NEO Competencies: E. Coaching and Teaching Competency: Engages in conflict-resolution activities, supported by more experienced leaders	16	2.63	0.20	0.81	11	59.3
NT271	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Identifies ethical dilemmas unique to neonatal care at the unit level	16	2.63	0.20	0.81	10	61.5
NT288	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Applies ethical principles across the spheres of influence	16	2.63	0.20	0.81	10	61.5
NT346	IV. Core Competencies: C. Systems Leadership Competency: Develops age-specific clinical standards, policies and procedures.	24	2.63	0.10	0.49	1	96.0
NT350	IV. Core Competencies: C. Systems Leadership Competency: Leads system change to improve health outcomes through evidence based practice: Specifies expected clinical and system level outcomes., Designs programs to improve clinical and system level processes and outcomes., Facilitates the adoption of practice change	24	2.63	0.12	0.58	1	96.0
NT364	IV. Core Competencies: E. Coaching Competency: Mentors health professionals in applying the principles of evidence-based care.	24	2.63	0.10	0.49	1	96.0
NT370	IV. Core Competencies: F. Research Competency: I. Interpretation, Translation and Use of Evidence: Assesses system barriers and facilitators to adoption of evidence-based practices.	24	2.63	0.10	0.49	1	96.0

Clinical Nurse Specialist – Wellness Through Acute Care Job Analysis

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT383	IV. Core Competencies: G. Ethical decision-making, moral agency and advocacy: Fosters professional accountability in self or others.	24	2.63	0.10	0.49	1	96.0
NT027	I. Patient Care Problems: C. Pulmonary: Bronchopulmonary dysplasia	43	2.65	0.07	0.48	1	97.7
NT153	II. Skills and Procedures: E. Neurology: Manage patients with whole body/head therapeutic hypothermia	23	2.65	0.16	0.78	14	62.2
NT335	IV. Core Competencies: A. Direct Care Competency: Provides leadership for collaborative, evidence-based revision of diagnoses and plans of care, to improve patient outcomes	23	2.65	0.10	0.49	2	92.0
NT022	I. Patient Care Problems: C. Pulmonary: Acute respiratory failure	44	2.66	0.09	0.57	0	100.0
NT140	II. Skills and Procedures: B. Pulmonary: Manage a patient receiving surfactant therapy	30	2.67	0.14	0.76	8	78.9
NT168	II. Skills and Procedures: J. Multisystem: Order laboratory tests	12	2.67	0.22	0.78	25	32.4
NT248	III. NEO Competencies: E. Coaching and Teaching Competency: Shares poster presentation or dashboard at the institution's nursing professional development or quality forums	18	2.67	0.18	0.77	9	66.7
NT322	IV. Core Competencies: A. Direct Care Competency: Develops evidence-based clinical interventions and systems to achieve defined patient and system outcomes.	24	2.67	0.10	0.48	1	96.0
NT340	IV. Core Competencies: C. Systems Leadership Competency: Facilitates the provision of clinically competent care by staff/team through education, role modeling, teambuilding, and quality monitoring.	24	2.67	0.10	0.48	1	96.0
NT343	IV. Core Competencies: C. Systems Leadership Competency: Uses effective strategies for changing clinician and team behavior to encourage adoption of evidence-based practices and innovations in care delivery.	24	2.67	0.10	0.48	1	96.0

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT354	IV. Core Competencies: D. Collaboration Competency: Establishes collaborative relationships within and across departments that promote patient safety, culturally competent care, and clinical excellence	24	2.67	0.10	0.48	1	96.0
NT355	IV. Core Competencies: D. Collaboration Competency: Provides leadership for establishing, improving, and sustaining collaborative relationships to meet clinical needs.	24	2.67	0.10	0.48	1	96.0
NT375	IV. Core Competencies: F. Research Competency: II. Evaluation of Clinical Practice: Provides leadership in planning data collection and quality monitoring	24	2.67	0.12	0.56	1	96.0
NT007	I. Patient Care Problems: A. Factors Influencing Health Status (risk assessment, prevention and wellness): Developmental care	46	2.67	0.08	0.56	0	100.0
NT102	I. Patient Care Problems: K. Multisystem: Fluids, electrolytes and nutrition	40	2.68	0.09	0.57	0	100.0
NT117	I. Patient Care Problems: K. Multisystem: Transition to extrauterine life	40	2.68	0.10	0.62	0	100.0
NT176	III. NEO Competencies: A. Direct Care Competency: Distinguishes between normal, variations of normal and abnormal findings, including developmental, physiologic, and behavioral states	19	2.68	0.17	0.75	14	57.6
NT272	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Identifies the need to involve the institutional ethics team in finding resolutions to the dilemmas using ethical principles	13	2.69	0.21	0.75	13	50.0
NT195	III. NEO Competencies: A. Direct Care Competency: Tailors the plan of care as indicated	20	2.70	0.16	0.73	13	60.6

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT356	IV. Core Competencies: D. Collaboration Competency: Practices collegially with medical staff and other members of the healthcare team so that all providers' unique contributions to health outcomes will be enhanced.	24	2.71	0.09	0.46	1	96.0
NT378	IV. Core Competencies: F. Research Competency: II. Evaluation of Clinical Practice: Provides leadership in the design, implementation and evaluation of process improvement initiatives.	24	2.71	0.11	0.55	1	96.0
NT280	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Verbalizes effective communication strategies to include appropriate methods, behaviors, and positive interventions	14	2.71	0.19	0.73	12	53.8
NT282	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Seeks applicable input from nursing, medical staff, interdisciplinary teams, and support systems necessary for communicating the healthcare status of the neonate/infant and patient's family	14	2.71	0.19	0.73	12	53.8
NT025	I. Patient Care Problems: C. Pulmonary: Apnea of prematurity	43	2.72	0.08	0.50	1	97.7
NT137	II. Skills and Procedures: A. Cardiovascular: Remove peripherally inserted central catheters (PICC)	29	2.72	0.13	0.70	10	74.4
NT221	III. NEO Competencies: C: Systems Leadership Competency: Collaborates to develop data sources for these metrics	22	2.73	0.15	0.70	9	71.0
NT245	III. NEO Competencies: E. Coaching and Teaching Competency: Implements education needs assessment with unit-based staff	15	2.73	0.18	0.70	12	55.6
NT096	I. Patient Care Problems: J. Integumentary: Skin integrity protection for extremely low birth-weight infants.	38	2.74	0.07	0.45	2	95.0
NT116	I. Patient Care Problems: K. Multisystem: Thermoregulation	40	2.75	0.07	0.44	0	100.0

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT173	II. Skills and Procedures: K. Behavioral: Manage patients with neonatal abstinence syndrome	24	2.75	0.14	0.68	13	64.9
NT367	IV. Core Competencies: F. Research Competency: I. Interpretation, Translation and Use of Evidence: Analyzes research findings and other evidence for their potential application to clinical practice	24	2.75	0.09	0.44	1	96.0
NT376	IV. Core Competencies: F. Research Competency: II. Evaluation of Clinical Practice: Uses quality monitoring data to assess the quality and effectiveness of clinical programs in meeting outcomes.	24	2.75	0.11	0.53	1	96.0
NT377	IV. Core Competencies: F. Research Competency: II. Evaluation of Clinical Practice: Develops quality improvement initiatives based on assessments.	24	2.75	0.11	0.53	1	96.0
NT177	III. NEO Competencies: A. Direct Care Competency: Assesses the effects of interactions among the neonate/infant, family, and the community on the patient/family dyad	17	2.76	0.16	0.66	16	51.5
NT231	III. NEO Competencies: D. Collaboration Competency: Communicates the components of the CNS role to colleagues to increase understanding of the role's impact on quality initiatives	17	2.76	0.16	0.66	11	60.7
NT277	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Participates in unit policy-making committees regarding the equitable treatment of neonates/infants and their families	17	2.76	0.16	0.66	9	65.4
NT278	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Evaluates hospital policies for their impact on neonatal nursing care practice and neonatal/infant care	18	2.78	0.15	0.65	8	69.2

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT182	III. NEO Competencies: A. Direct Care Competency: Develops interventions to promote patient safety, strengthen the patient/family dyad, and improve the quality of care	19	2.79	0.14	0.63	14	57.6
NT193	III. NEO Competencies: A. Direct Care Competency: Develops and implements audits at the unit level	19	2.79	0.14	0.63	14	57.6
NT218	III. NEO Competencies: C: Systems Leadership Competency: Communicates the above findings to staff members in collaboration with unit management	19	2.79	0.14	0.63	12	61.3
NT368	IV. Core Competencies: F. Research Competency: I. Interpretation, Translation and Use of Evidence: Integrates evidence into the health, illness, and wellness management of patients, families, communities and groups.	24	2.79	0.08	0.41	1	96.0
NT374	IV. Core Competencies: F. Research Competency: II. Evaluation of Clinical Practice: Participates in establishing quality improvement agenda for unit, department, program, system, or population	24	2.79	0.08	0.41	1	96.0
NT119	I. Patient Care Problems: L. Psychosocial, Behavioral and Cognitive Health Issues: Developmental care (e.g., skin to skin care)	39	2.79	0.07	0.41	1	97.5
NT180	III. NEO Competencies: A. Direct Care Competency: Develops a plan of care and interventions according to established protocol and current standards of care	20	2.80	0.14	0.62	13	60.6
NT183	III. NEO Competencies: A. Direct Care Competency: Provides developmentally appropriate care	20	2.80	0.14	0.62	13	60.6
NT186	III. NEO Competencies: A. Direct Care Competency: Uses therapeutic communication skills with special attention to the capacities and needs of the neonate/infant and family	20	2.80	0.14	0.62	13	60.6

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT225	III. NEO Competencies: C: Systems Leadership Competency: Disseminates outcomes of system-level change to unit-based teams and staff	20	2.80	0.14	0.62	11	64.5
NT305	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Balances the needs of the neonate/infant and family preferences while making choices and decisions related to professional accountability	10	2.80	0.20	0.63	16	38.5
NT307	III. NEO Competencies: I. Culturally Sensitive Care Competency: Performs a self-assessment of cultural values and the impact of those values on the care of the neonate/infant and family	10	2.80	0.20	0.63	16	38.5
NT309	III. NEO Competencies: I. Culturally Sensitive Care Competency: Recognizes cultural diversity and seeks input for adapting care on the basis of the family's culture	10	2.80	0.20	0.63	16	38.5
NT141	II. Skills and Procedures: B. Pulmonary: Manage patients receiving mechanical ventilation	31	2.81	0.11	0.60	7	81.6
NT109	I. Patient Care Problems: K. Multisystem: Low birth weight/prematurity (including late pre-term populations)	39	2.82	0.07	0.45	1	97.5
NT181	III. NEO Competencies: A. Direct Care Competency: Develops a plan of care based on scientific evidence and practice guidelines	23	2.83	0.12	0.58	10	69.7
NT208	III. NEO Competencies: C: Systems Leadership Competency: Includes staff in the development of safety programs	23	2.83	0.12	0.58	8	74.2
NT211	III. NEO Competencies: C: Systems Leadership Competency: Provides unit leadership members with evidence regarding the impact of personnel practices on safe patient care and workforce maintenance	23	2.83	0.12	0.58	8	74.2

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT243	III. NEO Competencies: E. Coaching and Teaching Competency: Intervenes when the neonate's/infant's needs are complicated and the family's needs for education exceed those that can be met by the standard teaching content	12	2.83	0.17	0.58	14	46.2
NT144	II. Skills and Procedures: B. Pulmonary: Manage patients with chest tubes	25	2.84	0.11	0.55	13	65.8
NT035	I. Patient Care Problems: C. Pulmonary: Respiratory distress syndrome (e.g., surfactant deficiency)	44	2.84	0.06	0.43	0	100.0
NT142	II. Skills and Procedures: B. Pulmonary: Manage patients receiving nitric oxide	26	2.85	0.11	0.54	12	68.4
NT199	III. NEO Competencies: B. Consultation Competency: Identifies gaps in care requiring additional resources to achieve identified outcomes	13	2.85	0.15	0.55	19	40.6
NT308	III. NEO Competencies: I. Culturally Sensitive Care Competency: Recognizes at the unit level the cultural dynamics of individuals from varying cultures and their effect on the care of the neonate/infant and family	13	2.85	0.15	0.55	13	50.0
NT146	II. Skills and Procedures: C. Endocrine: Glycemic management	28	2.86	0.10	0.52	10	73.7
NT198	III. NEO Competencies: B. Consultation Competency: Seeks applicable nursing, medical staff, and interdisciplinary input regarding the healthcare plan	14	2.86	0.14	0.53	18	43.8
NT266	III. NEO Competencies: F. Research and Quality Competency: Identifies clinical questions suitable for clinical inquiry	14	2.86	0.14	0.53	12	53.8
NT269	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Seeks feedback from other CNSs, advanced practice registered nurses (APRNs), and other healthcare providers within the unit	14	2.86	0.14	0.53	12	53.8

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT264	III. NEO Competencies: F. Research and Quality Competency: Develops and implements audits at the unit level	15	2.87	0.13	0.52	11	57.7
NT293	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Develops a plan to assist in establishing a family-centered care environment	15	2.87	0.13	0.52	11	57.7
NT303	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Maintains balance between personal and professional life, using appropriate conduct in social media	15	2.87	0.13	0.52	11	57.7
NT143	II. Skills and Procedures: B. Pulmonary: Manage patients receiving non-invasive support	32	2.88	0.09	0.49	6	84.2
NT185	III. NEO Competencies: A. Direct Care Competency: Applies end-of-life and palliative care principles to the delivery of care	16	2.88	0.13	0.50	17	48.5
NT250	III. NEO Competencies: E. Coaching and Teaching Competency: Provides career guidance to staff RNs in their career development via clinical advancement and/or graduate education	16	2.88	0.13	0.50	11	59.3
NT252	III. NEO Competencies: E. Coaching and Teaching Competency: Mentors novice members of the neonatal interdisciplinary team on the implementation of evidence-based care	16	2.88	0.13	0.50	11	59.3
NT291	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Conducts ongoing assessment of the neonatal intensive care unit (NICU) environment, evaluating specifically its family-centeredness and its impact on the care of the patient	16	2.88	0.13	0.50	10	61.5

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT369	IV. Core Competencies: F. Research Competency: I. Interpretation, Translation and Use of Evidence: Applies principles of evidence-based practice and quality improvement to all patient care.	24	2.88	0.07	0.34	1	96.0
NT228	III. NEO Competencies: D. Collaboration Competency: Conducts literature searches for clarification of information	17	2.88	0.12	0.49	11	60.7
NT233	III. NEO Competencies: D. Collaboration Competency: Participates in collaborative efforts to identify cost-saving strategies that optimize patient outcomes	17	2.88	0.12	0.49	11	60.7
NT246	III. NEO Competencies: E. Coaching and Teaching Competency: Develops and provides education for staff	17	2.88	0.12	0.49	10	63.0
NT253	III. NEO Competencies: E. Coaching and Teaching Competency: Identifies communication strengths and weaknesses by using self-reflection and the observation of others	17	2.88	0.12	0.49	10	63.0
NT254	III. NEO Competencies: E. Coaching and Teaching Competency: Models appropriate communication techniques in all interactions	17	2.88	0.12	0.49	10	63.0
NT267	III. NEO Competencies: F. Research and Quality Competency: Conducts literature review for topics pertinent to clinical practice	17	2.88	0.12	0.49	9	65.4
NT279	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Promotes the role of the CNS to unit leadership, healthcare providers, and families within the neonatal unit	17	2.88	0.12	0.49	9	65.4
NT224	III. NEO Competencies: C: Systems Leadership Competency: Disseminates baseline outcomes data to unit-based teams and staff	18	2.89	0.11	0.47	13	58.1
NT249	III. NEO Competencies: E. Coaching and Teaching Competency: Mentors staff RNs and other neonatal providers to acquire new knowledge and skills in their bedside care	18	2.89	0.11	0.47	9	66.7

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT270	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Models professional accountability to others	18	2.89	0.11	0.47	8	69.2
NT292	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Determines nursing practice and interventions that will promote a family-centered care environment	18	2.89	0.11	0.47	8	69.2
NT265	III. NEO Competencies: F. Research and Quality Competency: Advocates across interdisciplinary teams to promote evidence-based practice, research, and translation of research into best practices	19	2.89	0.11	0.46	7	73.1
NT206	III. NEO Competencies: C: Systems Leadership Competency: Evaluates unit-level culture and practices for safety implications	20	2.90	0.10	0.45	11	64.5
NT214	III. NEO Competencies: C: Systems Leadership Competency: Leads unit-level groups to develop standards, policies, and procedures related to care of the neonate/infant and family	20	2.90	0.10	0.45	11	64.5
NT220	III. NEO Competencies: C: Systems Leadership Competency: Collaborates to establish appropriate metrics for these outcomes	20	2.90	0.10	0.45	11	64.5
NT223	III. NEO Competencies: C: Systems Leadership Competency: Identifies evidence-based practices that have a positive impact on nurse-sensitive outcomes of interest	20	2.90	0.10	0.45	11	64.5
NT229	III. NEO Competencies: D. Collaboration Competency: Applies an interdisciplinary approach to the care of neonates/infants and families	22	2.91	0.09	0.43	6	78.6
NT178	III. NEO Competencies: A. Direct Care Competency: Identifies potential risks to patient safety, the patient/family dyad, and quality of care	19	3.00	0.00	0.00	14	57.6

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT179	III. NEO Competencies: A. Direct Care Competency: Identifies evidence-based clinical practice guidelines to guide screening, diagnosis, and management of the neonate/infant	24	3.00	0.00	0.00	9	72.7
NT184	III. NEO Competencies: A. Direct Care Competency: Applies principles of pain management to care	20	3.00	0.00	0.00	13	60.6
NT189	III. NEO Competencies: A. Direct Care Competency: Recognizes opportunities for staff development of programs and process changes to improve cost-effectiveness	22	3.00	0.00	0.00	11	66.7
NT190	III. NEO Competencies: A. Direct Care Competency: Recognizes nursing practice/performance improvement opportunities with consideration of safety, timeliness, effectiveness, efficacy, and patient-centered care at the unit level	23	3.00	0.00	0.00	10	69.7
NT191	III. NEO Competencies: A. Direct Care Competency: Aligns nursing practice with evidence-based information to achieve nurse-sensitive outcomes for the unit population	27	3.00	0.00	0.00	6	81.8
NT192	III. NEO Competencies: A. Direct Care Competency: Participates in unit-based planning for data collection and quality monitoring	24	3.00	0.00	0.00	9	72.7
NT194	III. NEO Competencies: A. Direct Care Competency: Recognizes when evidence-based guidelines, policies, or procedures fail to meet the needs of the individual neonate/infant and family	22	3.00	0.00	0.00	11	66.7
NT196	III. NEO Competencies: A. Direct Care Competency: Communicates to the healthcare team the rationale for any deviations from the established guidelines, policies, or procedures	21	3.00	0.00	0.00	12	63.6
NT203	III. NEO Competencies: C: Systems Leadership Competency: Identifies population variables at the unit level.	14	3.00	0.00	0.00	17	45.2

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT204	III. NEO Competencies: C: Systems Leadership Competency: Identifies unit environment variables that influence nursing practice	16	3.00	0.00	0.00	15	51.6
NT205	III. NEO Competencies: C: Systems Leadership Competency: Develops constructive relationships across disciplines and departments	24	3.00	0.00	0.00	7	77.4
NT209	III. NEO Competencies: C: Systems Leadership Competency: Identifies the need for evidence-based practice changes	25	3.00	0.00	0.00	6	80.6
NT210	III. NEO Competencies: C: Systems Leadership Competency: Provides summaries of the evidence basis for proposed practice change	23	3.00	0.00	0.00	8	74.2
NT213	III. NEO Competencies: C: Systems Leadership Competency: Provides clinical expertise to collaborative, consensus-based work teams to develop clinical programs related to patient and family care	21	3.00	0.00	0.00	10	67.7
NT215	III. NEO Competencies: C: Systems Leadership Competency: Builds partnerships with unit-based staff and leadership	20	3.00	0.00	0.00	10	66.7
NT219	III. NEO Competencies: C: Systems Leadership Competency: Identifies nurse-sensitive outcomes related to the neonate/infant and family	18	3.00	0.00	0.00	13	58.1
NT222	III. NEO Competencies: C: Systems Leadership Competency: Collects baseline data for these outcomes	16	3.00	0.00	0.00	15	51.6
NT226	III. NEO Competencies: D. Collaboration Competency: Participates on an interdisciplinary team	22	3.00	0.00	0.00	6	78.6
NT227	III. NEO Competencies: D. Collaboration Competency: Engages participation from other team members (patients, families, physicians, and coworkers)	19	3.00	0.00	0.00	9	67.9

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT230	III. NEO Competencies: D. Collaboration Competency: Uses appropriate terminology, format, and technology to communicate effectively with team members and discipline experts in problem solving and decision making	20	3.00	0.00	0.00	8	71.4
NT232	III. NEO Competencies: D. Collaboration Competency: Participates in interdisciplinary projects	23	3.00	0.00	0.00	5	82.1
NT234	III. NEO Competencies: D. Collaboration Competency: Promotes awareness of evidence-based initiatives and healthcare policies that improve the care and discharge of neonates/infants and families	21	3.00	0.00	0.00	7	75.0
NT251	III. NEO Competencies: E. Coaching and Teaching Competency: Identifies and implements evidence-based care on projects with the neonatal interdisciplinary team	19	3.00	0.00	0.00	8	70.4
NT256	III. NEO Competencies: F. Research and Quality Competency: Recognizes opportunities for improving clinical practice at the unit level	15	3.00	0.00	0.00	11	57.7
NT257	III. NEO Competencies: F. Research and Quality Competency: Identifies research and best practice findings to improve clinical practice at the unit level	17	3.00	0.00	0.00	9	65.4
NT258	III. NEO Competencies: F. Research and Quality Competency: Prioritizes evidence-based practice changes to address safety and quality concerns at the unit level	18	3.00	0.00	0.00	8	69.2
NT259	III. NEO Competencies: F. Research and Quality Competency: Identifies barriers to the implementation of evidence-based practice at the unit level	17	3.00	0.00	0.00	9	65.4
NT260	III. NEO Competencies: F. Research and Quality Competency: Develops and conducts evidence-based project at the unit level	19	3.00	0.00	0.00	7	73.1

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT261	III. NEO Competencies: F. Research and Quality Competency: Recognizes performance improvement opportunities at the unit level	18	3.00	0.00	0.00	8	69.2
NT262	III. NEO Competencies: F. Research and Quality Competency: Aligns nursing practice with evidence-based information to achieve nurse-sensitive outcomes for the unit population	17	3.00	0.00	0.00	9	65.4
NT263	III. NEO Competencies: F. Research and Quality Competency: Participates in unit-based planning for data collection and quality monitoring	19	3.00	0.00	0.00	7	73.1
NT268	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Performs self-assessment to identify own personal values and beliefs that influence the provision of care as an expert clinician	13	3.00	0.00	0.00	13	50.0
NT274	III. NEO Competencies: G. Ethical Decision-Making, Moral Agency, and Advocacy Competency: Encourages discussion of ethical issues, dilemmas, and principles at the unit level	13	3.00	0.00	0.00	13	50.0
NT294	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Promotes policies that further family-centered care	16	3.00	0.00	0.00	10	61.5
NT301	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Advocates for the neonate/infant and family in the NICU	15	3.00	0.00	0.00	11	57.7
NT302	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Models behaviors that maintain professional boundaries (e.g., in social media, social life) and assists families in acknowledging and respecting professional boundaries	15	3.00	0.00	0.00	11	57.7
NT304	III. NEO Competencies: H. Patient Relationship and Family Care Competency: Fosters professional accountability to self and others	18	3.00	0.00	0.00	8	69.2

Rule 2. Mean Significance Order – Neonatal							
Task #	Task	N	Mean	SEM	SD	# Zeros	% Performing
NT306	III. NEO Competencies: I. Culturally Sensitive Care Competency: Takes leadership in demonstrating and embracing the value of diversity in caring for neonates/infants and their families as well as working with other healthcare professionals at the unit level	14	3.00	0.00	0.00	12	53.8

Appendix D. Test Plan

ACCNS-N TEST PLAN NEONATAL CNS (WELLNESS THROUGH ACUTE CARE) OVERVIEW

PAGE 1 OF 12

The ACCNS-N certification program is based on competencies from nationally recognized organizations such as the National Association of Clinical Nurse Specialists and the American Association of Colleges of Nursing, as well as a study of practice, also known as a job analysis, that is conducted at least every five years. This study of practice validates the knowledge, skills and abilities required for safe and effective advanced practice as an entry-level neonatal CNS. All competencies are listed on pages 5-12 of the test plan.

The test plan, which provides an outline of exam content, is developed by an expert CNS panel based on the results of the study of practice. The organizing framework for all AACN Certification Corporation exams is the AACN Synergy Model for Patient Care™.

Following are the major content dimensions of the neonatal CNS, wellness through acute care, (ACCNS-N) exam, which are part of the test plan:

- ▶ **Patient Care Problems** validated by the study of practice as those regularly encountered by the entry-level CNS. Refer to pages 2-3 for the list of patient care problems.
- ▶ **Skills and Procedures** validated by the study of practice as those pertinent to the entry-level CNS. In addition to classifying exam items according to the specified patient care problems and related validated competencies, items may require an understanding of skills and procedures pertinent to neonatal CNS practice. Refer to page 4 for the list of skills and procedures.
- ▶ **Validated Competencies** include Clinical Judgment, Advocacy/Moral Agency, Caring Practices, Response to Diversity, Facilitation of Learning, Collaboration, Systems Thinking and Clinical Inquiry. Refer to pages 5-12 for a complete listing of the ACCNS-N Validated Competencies.

Integrated Concepts

To meet criteria for regulatory sufficiency, APRN certification exams must test national practice standards and core competencies for the role and patient population(s) being certified. The ACCNS-N exam incorporates the following standards and competencies:

- National CNS Competency Task Force. *Clinical Nurse Specialist Core Competencies*. 2010.
- Advanced Practice Work Group. Bell L, ed. *Scope and Standards for Acute and Critical Care Clinical Nurse Specialist Practice*. Aliso Viejo, CA: American Association of Critical-Care Nurses; 2014.
- American Nursing Association. *Neonatal Nursing: Scope and Standards of Practice*. Silver Springs, MD: American Nurses Association; 2013.
- National Association of Neonatal Nurses Task Force. (2016). *Education Standards, Curriculum Guidelines, and Competencies for the Neonatal Clinical Nurse Specialist*. Chicago, IL: National Association of Neonatal Nurses.

ACCNS-N TEST PLAN

NEONATAL CNS (WELLNESS THROUGH ACUTE CARE)

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Applies to exams taken on and after January 15, 2018.

I. CLINICAL JUDGMENT (65%)

Validated Competencies are detailed on pages 5-12 of this test plan.

A. Cardiovascular (7%)

1. Cardiac surgery
2. Congenital heart defects
3. Dysrhythmias
4. Heart failure
5. Patent ductus arteriosus (PDA)

B. Pulmonary (11%)

1. Acute respiratory failure
2. Air-leak syndromes (e.g., pneumothorax, pulmonary interstitial emphysema, pneumopericardium, pneumomediastinum)
3. Airway obstruction
4. Apnea of prematurity
5. Aspirations (e.g., meconium aspiration)
6. Bronchopulmonary dysplasia
7. Congenital anomalies
8. Exacerbation of chronic lung disease
9. Persistent pulmonary hypertension of the newborn (PPHN)
10. Pulmonary hemorrhage
11. Pulmonary infections
12. Respiratory distress syndrome (e.g., surfactant deficiency)
13. Transient tachypnea of the newborn

C. Endocrine (3%)

1. Hyperglycemia
2. Hypoglycemia
3. Infant of diabetic mother

D. Hematology/Immunology/Oncology (3%)

1. Anemia
2. Blood group incompatibilities
3. Coagulopathies (including thrombocytopenia)
4. Hyperbilirubinemia
5. Polycythemia

E. Gastrointestinal (5%)

1. Bowel infarction/obstruction/perforation
2. Gastroesophageal reflux
3. GI abnormalities
4. GI motility disorders
5. GI surgeries
6. Hepatic failure
7. Feeding intolerance
8. Necrotizing enterocolitis

F. Renal/Genitourinary (4%)

1. Congenital renal/genitourinary abnormalities
2. Infections

G. Integumentary (3%)

1. Congenital abnormalities
2. Dermatologic disorders
3. Infectious skin disorders
4. Pressure ulcers (pressure injuries)
5. Skin integrity protection for extremely low birth weight infants
6. Wounds (surgical and non-surgical)

H. Musculoskeletal (3%)

1. Bone disease (e.g., osteopenia, osteogenesis imperfecta)
2. Congenital anomalies
3. Functional issues (e.g., immobility, birth injuries)
4. Infections (e.g., cellulitis)

I. Neurology (6%)

1. Congenital neurological abnormalities
2. Encephalopathy
3. Head and brain trauma/injury
4. Hydrocephalus
5. Hypoxic ischemic encephalopathy
6. Increased intracranial pressure

ACCNS-N TEST PLAN

NEONATAL CNS (WELLNESS THROUGH ACUTE CARE)

PAGE 3 OF 12

I. Neurology (cont.)

7. Intracranial hemorrhage/intraventricular hemorrhage
8. Neurologic infectious diseases
9. Periventricular leukomalacia
10. Seizure disorders

J. Psychosocial/Behavioral/Cognitive Health (3%)

1. Behavioral state (e.g., neonatal pain, agitation and sedation scale, neonatal behavioral assessment, stress in extremely low birth weight infants)
2. Developmental care (e.g., skin to skin care)
3. Maltreatment (e.g., abuse, neglect, medical nonadherence)

K. Factors Influencing Health Status (6%) (risk assessment, prevention and wellness)

1. Developmental care (developmental milestones)
2. Discharge planning
3. Feeding (e.g., breast, cue-based, techniques)
4. Monitoring anthropometric measurements
5. Safety (i.e., sleep)
6. Screening (i.e., hearing, critical congenital heart disease, metabolic, car seat challenge, retinopathy of prematurity)
7. Wellness promotion (e.g., normal variants, immunizations)

L. Multisystem (11%)

1. Acid-base imbalances
2. End-of-life issues
3. Fluids, electrolytes and nutrition
4. Genetics (e.g., metabolic screening, recurrence risk, life planning)

5. Hospital-acquired conditions (e.g., CAUTI, CLABSI, VAP/VAE)
6. Hypovolemic shock
7. Iatrogenic drug exposed newborn
8. Inborn errors of metabolism
9. Infectious diseases (e.g., congenital, viral, bacterial, hospital-acquired infections)
10. Low birth weight/prematurity (including late preterm populations)
11. Maternal drug-exposed newborn
12. Maternal-fetal complications (e.g., HELLP, preeclampsia)
13. Pain
14. Palliative care issues
15. Sensory impairment (e.g., hearing loss)
16. Sepsis/septic shock and MODS
17. Thermoregulation
18. Transition to extrauterine life

II. PROFESSIONAL CARING AND ETHICAL PRACTICE (35%)

Validated Competencies are detailed on pages 5-12 of this test plan.

A. Advocacy/Moral Agency (4%)

B. Caring Practices (6%)

C. Response to Diversity (3%)

D. Facilitation of Learning (5%)

E. Collaboration (5%)

F. Systems Thinking (6%)

G. Clinical Inquiry (6%)

Order of content does not necessarily reflect importance.

ACCNS-N TEST PLAN

NEONATAL CNS (WELLNESS THROUGH ACUTE CARE)

SKILLS AND PROCEDURES

PAGE 4 OF 12

In addition to classifying exam items according to the specified patient care problems and identifying related competencies on the following pages, items may require an understanding of skills and procedures pertinent to the neonatal CNS. The study of practice sought to determine whether selected skills and procedures are performed and important to the neonatal CNS. If applicable to assessment of knowledge of the patient care problem, the following skills and procedures may be incorporated within items..This list is not intended to be all inclusive. Common nursing skills and procedures also may be included in the exam content.

Cardiovascular

- Direct cardiopulmonary resuscitation
- Insert peripherally inserted central catheters (PICC)
- Interpret ECG rhythms
- Interpret hemodynamic values
- Interpret non-invasive hemodynamic values
- Manage patient with arterial pressure catheters
- Remove peripherally inserted central catheters (PICC)

Pulmonary

- Manage patient receiving surfactant therapy
- Manage patient receiving mechanical ventilation
- Manage patient receiving nitric oxide
- Manage patient receiving noninvasive support
- Manage patient with chest tubes
- Perform arterial punctures

Endocrine

- Glycemic management

Hematology/Immunology/Oncology

- Manage patient with exchange transfusions

Integumentary

- Consult for patient with/at risk for pressure areas
- Provide wound care

Neurology

- Assist with lumbar puncture
- Manage patient with whole body/head therapeutic hypothermia

Behavioral

- Use de-escalation techniques (e.g., crisis prevention)
- Manage patients with neonatal abstinence syndrome

Multisystem

- Interpret diagnostic imaging
- Interpret laboratory results
- Order diagnostic imaging

ACCNS-N TEST PLAN

NEONATAL CNS (WELLNESS THROUGH ACUTE CARE)

VALIDATED COMPETENCIES

PAGE 5 OF 12

In addition to classifying exam items according to the previous specifications, each item is written to reflect one of the following competencies validated through the study of practice. The following competencies are eligible for assessing knowledge of content.

CLINICAL JUDGMENT

Core CNS Competencies

- Conducts comprehensive, holistic, wellness and illness assessments using known or innovative evidence-based techniques and tools, and direct and indirect methods
- Obtains data about context and etiologies (including both non-disease and disease-related factors) necessary to formulate differential diagnoses and plans of care, and to identify and evaluate outcomes
- Assesses the effects of interactions among the individual, family, community and social systems on health and illness
- Synthesizes assessment data, advanced knowledge and experience using critical thinking and clinical judgment to formulate differential diagnoses for clinical problems amenable to CNS intervention
- Prioritizes differential diagnoses to reflect those conditions most relevant to signs, symptoms and patterns amenable to CNS interventions
- Selects interventions that may include, but are not limited to:
 - Application of advanced nursing therapies
 - Initiation of interdisciplinary team meetings
 - Consultations and other communications to benefit patient care
 - Management of patient medications
 - Clinical procedures and other interventions
 - Psychosocial support, including patient counseling and spiritual interventions
- Designs strategies, including advanced nursing therapies, to meet the multifaceted needs of complex patients and groups of patients
- Develops evidence-based clinical interventions and systems to achieve defined patient and system outcomes
- Prescribe pharmacologic interventions
- Prescribe non-pharmacologic interventions

- Prescribe diagnostic measures
- Prescribe equipment
- Prescribe treatments
- Provides direct care to selected patients based on the needs of the patient and the CNS's specialty knowledge and skills
- Assists staff in the development of innovative, cost-effective programs or protocols of care
- Determines when evidence-based guidelines, policies, procedures and plans of care need to be tailored to the individual
- Assesses the impact of environmental/system factors on care

Neonatal CNS Competencies

- Conducts a comprehensive history and assessment of the neonate/infant and family, using known or innovative evidence-based techniques, tools, and direct and indirect methods
- Develops a comprehensive database (both disease and non-disease factors) that includes pertinent history, diagnostic tests and physical assessment
- Distinguishes between normal, variations of normal and abnormal findings, including developmental, physiologic and behavioral states
- Assesses the effects of interactions among the neonate/infant, family and the community on the patient/family dyad
- Identifies potential risks to patient safety, the patient/family dyad and quality of care
- Identifies evidence-based clinical practice guidelines to guide screening, diagnosis and management of the neonate/infant
- Develops a plan of care and interventions according to established protocol and current standards of care
- Develops a plan of care based on scientific evidence and practice guidelines
- Develops interventions to promote patient safety, strengthen the patient/family dyad and improve the quality of care
- Provides developmentally appropriate care

ACCNS-N TEST PLAN
NEONATAL CNS (WELLNESS THROUGH ACUTE CARE)
VALIDATED COMPETENCIES

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- Applies principles of pain management to care
- Applies end-of-life and palliative care principles to the delivery of care
- Uses therapeutic communication skills with special attention to the capacities and needs of the neonate/infant and family
- Prescribes nursing therapeutics, pharmacologic and non-pharmacologic interventions, diagnostic measures, equipment, procedures and treatments to meet the needs of neonates/infants, families and groups, in accordance with professional preparation, institutional privileges, state and federal laws and practice acts
- Provides direct care to selected neonates/infants and families based on the needs of the patient and the CNS's specialty knowledge and skills
- Recognizes opportunities for staff development of programs and process changes to improve cost-effectiveness
- Recognizes nursing practice/performance improvement opportunities with consideration of safety, timeliness, effectiveness, efficacy and patient-centered care at the unit level
- Aligns nursing practice with evidence-based information to achieve nurse-sensitive outcomes for the unit population
- Participates in unit-based planning for data collection and quality monitoring
- Develops and implements audits at the unit level
- Recognizes when evidence-based guidelines, policies or procedures fail to meet the needs of the individual neonate/infant and family
- Assesses the needs, preferences and strengths of the neonate/infant and family and recommends a healthcare plan in order to optimize health outcomes
- Tailors the plan of care as indicated
- Communicates to the healthcare team the rationale for any deviations from the established guidelines, policies or procedures
- Applies data collected from consultations to plan or revise care for the individual patient or family

ADVOCACY AND MORAL AGENCY

Core CNS Competencies

- Facilitates resolution of ethical conflicts:
 - Identifies ethical implications of complex care situations
 - Considers the impact of scientific advances, cost, clinical effectiveness, patient and family values and preferences, and other external influences
 - Applies ethical principles to resolving concerns across the three spheres of influence
- Promotes a practice climate conducive to providing ethical care
- Facilitates interdisciplinary teams to address ethical concerns, risks or considerations, benefits and outcomes of patient care
- Facilitates patient and family understanding of the risks, benefits and outcomes of proposed healthcare regimen to promote informed decision making
- Advocates for equitable patient care by:
 - Participating in organizational, local, state, national or international level of policy-making activities for issues related to their expertise
 - Evaluating the impact of legislative and regulatory policies as they apply to nursing practice and patient or population outcomes
- Promotes the role and scope of practice of the CNS to legislators, regulators, other healthcare providers and the public by communicating information that promotes nursing, the role of the CNS and outcomes of nursing and CNS practice through the use of the media, advanced technologies and community networks
- Advocates for the CNS/APRN role and for positive legislative response to issues affecting nursing practice

Neonatal CNS Competencies

- Performs self-assessment to identify own personal values and beliefs that influence the provision of care as an expert clinician
- Seeks feedback from other CNSs, advanced practice registered nurses (APRNs) and other healthcare providers within the unit

ACCNS-N TEST PLAN
NEONATAL CNS (WELLNESS THROUGH ACUTE CARE)
VALIDATED COMPETENCIES

PAGE 7 OF 12

- Models professional accountability to others
- Identifies ethical dilemmas unique to neonatal care at the unit level
- Identifies the need to involve the institutional ethics team in finding resolutions to the dilemmas using ethical principles
- Analyzes the medical advances, cost and clinical effectiveness impact on the patient and family, and the family's values
- Encourages discussion of ethical issues, dilemmas and principles at the unit level
- Facilitates interdisciplinary teams to address ethical concerns, risk, benefits and outcomes at the unit level
- Facilitates the discussion with families of neonates/infants regarding a proposed healthcare regimen for their child, to assist parents to make informed decisions, ensuring that families have full access to and understanding of all information related to the current situation of their child
- Participates in unit policy-making committees regarding the equitable treatment of neonates/infants and their families
- Evaluates hospital policies for their impact on neonatal nursing care practice and neonatal/infant care
- Promotes the role of the CNS to unit leadership, healthcare providers and families within the neonatal unit
- Coaches patients and families to help them navigate the healthcare system
- Balances patient and family preferences, threats to patient safety and risk/benefit analysis of interventions, such as fall prevention, pain management and treatment choices
- Fosters professional accountability in self or others

Neonatal CNS Competencies

- Verbalizes effective communication strategies to include appropriate methods, behaviors and positive interventions
- Evaluates and recommends strategies for using interventions and resources to improve communication that will provide optimal outcomes related to the health and needs of the neonate/infant and family
- Seeks applicable input from nursing, medical staff, interdisciplinary teams and support systems necessary for communicating the healthcare status of the neonate/infant and patient's family
- Identifies the family's methods of communication and decision making
- Identifies gaps in communication between family members and healthcare professionals
- Assesses interactions of family members, including variations in social, cultural and spiritual beliefs that may affect decision making
- Verbalizes awareness of legal issues affecting neonate/infant care and professional practice regarding ethical decision making
- Recognizes ethical conflicts and dilemmas and distinguishes ethical decisions to be made
- Applies ethical principles across the spheres of influence
- Facilitates the incorporation of strategies for evidence-based practice specific to the neonatal population into crisis management
- Applies knowledge of and utilization of available resources to assist with crisis management
- Conducts ongoing assessment of the neonatal intensive care unit (NICU) environment, evaluating specifically its family-centeredness and its impact on the care of the patient
- Determines nursing practice and interventions that will promote a family-centered care environment

CARING PRACTICES

Core CNS Competencies

- Evaluates nursing practice that considers safety, timeliness, effectiveness, efficiency, efficacy and patient-centered care
- Differentiates between outcomes that require care process modification at the individual patient level and those that require modification at the system level
- Leads development of evidence-based plans for meeting individual, family, community and population needs
- Determines nursing practice and system interventions that will promote patient, family and community safety

ACCNS-N TEST PLAN

NEONATAL CNS (WELLNESS THROUGH ACUTE CARE)

VALIDATED COMPETENCIES

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- Develops a plan to assist in establishing a family-centered care environment
- Promotes policies that further family-centered care
- Identifies ethical and legal issues related to worth and dignity that can affect patient care and professional practice
- Distinguishes differences in abnormal and normal behaviors related to dignity of life and death and demonstrates awareness of palliative care options
- Identifies and communicates family functions and interactions that can affect social, cultural and spiritual variations
- Identifies patient and family support systems
- Interprets the role of the CNS to the patient, family, healthcare team, and community
- Develops and preserves a therapeutic relationship and connection with the neonate's/infant's family and other professionals in order to facilitate optimal care and patient outcomes
- Advocates for the neonate/infant and family in the NICU
- Models behaviors that maintain professional boundaries (e.g., in social media, social life) and assists families in acknowledging and respecting professional boundaries
- Maintains balance between personal and professional life, using appropriate conduct in social media
- Fosters professional accountability to self and others
- Balances the needs of the neonate/infant and family preferences while making choices and decisions related to professional accountability
- Communicates consultation findings to the family and members of the healthcare team and completes the necessary documentation

RESPONSE TO DIVERSITY

Core CNS Competencies

- Develops age-specific clinical standards, policies and procedures
- Establishes collaborative relationships within and across departments that promote patient safety, culturally competent care and clinical excellence

- Designs health information and patient education appropriate to the patient's developmental level, health literacy level, learning needs, readiness to learn and cultural values and beliefs

Pediatric CNS Competencies

- Takes leadership in demonstrating and embracing the value of diversity in caring for neonates/infants and their families as well as working with other healthcare professionals at the unit-level
- Performs a self-assessment of cultural values and the impact of those values on the care of the neonate/infant and family
- Recognizes at the unit-level the cultural dynamics of individuals from varying cultures and their effect on the care of the neonate/infant and family
- Recognizes cultural diversity and seeks input for adapting care on the basis of the family's culture
- Provides care on the basis of the family's belief system and learns the culture of the healthcare environment
- Develops culturally sensitive practices that address cultural, ethnic, spiritual and intergenerational or age differences among families and healthcare providers

FACILITATION OF LEARNING

Core CNS Competencies

- Facilitates the provision of clinically competent care by staff/team through education, role modeling, teambuilding and quality monitoring
- Provides education to individuals, families, groups and communities to promote knowledge, understanding and optimal functioning across the wellness-illness continuum
- Participates in preprofessional, graduate and continuing education of nurses and other healthcare providers:
 - Completes a needs assessment, as appropriate, to guide interventions with staff
 - Promotes professional development of staff nurses and continuing education activities
 - Implements staff development and continuing education activities
 - Mentors nurses to translate research into practice

ACCNS-N TEST PLAN

NEONATAL CNS (WELLNESS THROUGH ACUTE CARE)

VALIDATED COMPETENCIES

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- Contributes to the advancement of the profession as a whole by disseminating outcomes of CNS practice through presentations and publications
- Mentors staff nurses, graduate students and others to acquire new knowledge and skills, and develop their careers

Neonatal CNS Competencies

- Coaches and advocates for neonates/infants and families based on their culture, religious beliefs, and health issues
- Assists families in navigating the healthcare system to obtain the appropriate resources for their needs and problems
- Assesses the educational needs of the neonate's/ infant's family members based on their knowledge of health issues, developmental level, health literacy level, learning needs, readiness to learn, culture and beliefs
- Develops an education plan based the family assessment
- Assesses neonate's/infant's family to determine the family members' education needs regarding the neonate's/infant's disease processes
- Recognizes the family's learning needs throughout the continuum
- Intervenes when the neonate's/infant's needs are complicated and the family's needs for education exceed those that can be met by the standard teaching content
- Provides educational resources to the neonate's/ infant's family or provides a referral to obtain information if resources are unavailable
- Implements education needs assessment with unit-based staff
- Develops and provides education for staff
- Develops poster presentation or dashboard for unit to share outcomes of CNS practice, with guidance of CNS mentor, as needed
- Shares poster presentation or dashboard at the institution's nursing professional development or quality forums
- Mentors staff RNs and other neonatal providers to acquire new knowledge and skills in their bedside care

- Provides career guidance to staff RNs in their career development via clinical advancement and/or graduate education
- Identifies and implements evidence-based care on projects with the neonatal interdisciplinary team
- Mentors novice members of the neonatal interdisciplinary team on the implementation of evidence-based care
- Identifies communication strengths and weaknesses by using self-reflection and the observation of others
- Models appropriate communication techniques in all interactions
- Engages in conflict-resolution activities, supported by more experienced leaders

COLLABORATION

Core CNS Competencies

- Uses advanced communication skills within therapeutic relationships to improve patient outcomes
- Provides leadership for collaborative, evidence-based revision of diagnoses and plans of care to improve patient outcomes
- Provides consultation to staff nurses, medical staff and interdisciplinary colleagues
- Initiates consultation to obtain resources, as necessary, to facilitate progress toward achieving identified outcomes
- Communicates consultation findings to appropriate parties consistent with professional and institutional standards
- Provides leadership in promoting interdisciplinary collaboration to implement outcome-focused patient care programs meeting the clinical needs of patients, families, populations and communities
- Uses leadership, team building, negotiation and conflict resolution skills to build partnerships within and across systems, including communities
- Assesses the quality and effectiveness of interdisciplinary, intra-agency and inter-agency communication and collaboration

ACCNS-N TEST PLAN
NEONATAL CNS (WELLNESS THROUGH ACUTE CARE)
VALIDATED COMPETENCIES

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- Provides leadership for establishing, improving and sustaining collaborative relationships to meet clinical needs
- Practices collegially with medical staff and other members of the healthcare team so that all providers' unique contributions to health outcomes will be enhanced
- Uses coaching and advanced communication skills to facilitate the development of effective clinical teams
- Provides leadership in conflict management and negotiation to address problems in the healthcare system
- Engages in a formal self-evaluation process, seeking feedback regarding own practice from patients, peers, professional colleagues and others

Neonatal CNS Competencies

- Participates on an interdisciplinary team
- Engages participation from other team members (patients, families, physicians and coworkers)
- Conducts literature searches for clarification of information
- Applies an interdisciplinary approach to the care of neonates/infants and families
- Uses appropriate terminology, format and technology to communicate effectively with team members and discipline experts in problem-solving and decision making
- Communicates the components of the CNS role to colleagues to increase understanding of the role's impact on quality initiatives
- Participates in interdisciplinary projects
- Participates in collaborative efforts to identify cost-saving strategies that optimize patient outcomes
- Promotes awareness of evidence-based initiatives and healthcare policies that improve the care and discharge of neonates/infants and families
- Engages and participates constructively with agencies
- Participates in collaborative efforts to improve intra-agency and inter-agency communication
- Seeks applicable nursing, medical staff and interdisciplinary input regarding the healthcare plan

SYSTEMS THINKING

Core CNS Competencies

- Performs system-level assessments to identify variables that influence nursing practice and outcomes, including but not limited to, population variables, environment, system of healthcare delivery, regulatory requirements, internal and external political influences/stability, healthcare financing and recurring practices that enhance or compromise patient or system outcomes
- Provides leadership in maintaining a supportive and healthy work environment
- Coordinates the care of patients with use of system and community resources to ensure successful health/illness/wellness transitions, enhance delivery of care and achieve optimal patient outcomes
- Considers fiscal and budgetary implications in decision making regarding practice and system modifications:
 - Evaluates use of products and services for appropriateness and cost/benefit in meeting care needs
 - Conducts cost/benefit analysis of new clinical technologies
 - Evaluates impact of introduction or withdrawal of products, services and technologies
- Leads system change to improve health outcomes through evidence-based practice:
 - Specifies expected clinical and system-level outcomes
 - Designs programs to improve clinical and system-level processes and outcomes
 - Facilitates the adoption of practice change
- Evaluates impact of CNS and other nursing practice on systems of care using nurse-sensitive outcomes
- Disseminates outcomes of system-level change internally and externally
- Facilitates intra-agency and inter-agency communication
- Assesses system barriers and facilitators to adoption of evidence-based practices

ACCNS-N TEST PLAN

NEONATAL CNS (WELLNESS THROUGH ACUTE CARE)

VALIDATED COMPETENCIES

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Neonatal CNS Competencies

- Operates primarily at the unit level
- Identifies population variables at the unit-level
- Identifies unit environment variables that influence nursing practice
- Develops constructive relationships across disciplines and departments
- Evaluates unit-level culture and practices for safety implications
- Designs and implements safety systems within the home unit
- Includes staff in the development of safety programs
- Identifies the need for evidence-based practice changes
- Provides summaries of the evidence basis for proposed practice change
- Provides unit leadership members with evidence regarding the impact of personnel practices on safe patient care and workforce maintenance
- Provides evidence-based information on work-related self-care to staff
- Provides clinical expertise to collaborative, consensus-based work teams to develop clinical programs related to patient and family care
- Leads unit-level groups to develop standards, policies and procedures related to care of the neonate/infant and family
- Builds partnerships with unit-based staff and leadership
- Identifies general transition resources needed by neonates/infants and families upon discharge
- Evaluates use of products and services for appropriateness and cost/benefit in meeting care needs
- Identifies gaps in care requiring additional resources to achieve identified outcomes
- Communicates the above findings to staff members in collaboration with unit management
- Identifies nurse-sensitive outcomes related to the neonate/infant and family

- Collaborates to establish appropriate metrics for these outcomes
- Collaborates to develop data sources for these metrics
- Collects baseline data for these outcomes
- Identifies evidence-based practices that have a positive impact on nurse-sensitive outcomes of interest
- Disseminates baseline outcomes data to unit-based teams and staff
- Disseminates outcomes of system-level change to unit-based teams and staff

CLINICAL INQUIRY

Core CNS Competencies

- Employs evidence-based clinical practice guidelines to guide screening and diagnosis
- Analyzes data from consultations to implement practice improvements
- Uses effective strategies for changing clinician and team behavior to encourage adoption of evidence-based practices and innovations in care delivery
- Mentors health professionals in applying the principles of evidence-based care
- Analyzes research findings and other evidence for their potential application to clinical practice
- Integrates evidence into the health, illness and wellness management of patients, families, communities and groups
- Applies principles of evidence-based practice and quality improvement to all patient care
- Designs programs for effective implementation of research findings and other evidence in clinical practice
- Cultivates a climate of clinical inquiry across spheres of influence by evaluating the need for improvement or redesign of care delivery processes to improve safety, efficiency, reliability and quality, and disseminates expert knowledge

ACCNS-N TEST PLAN
NEONATAL CNS (WELLNESS THROUGH ACUTE CARE)
VALIDATED COMPETENCIES

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- Fosters an interdisciplinary approach to quality improvement, evidence-based practice, research and translation of research into practice
- Participates in establishing quality improvement agenda for unit, department, program, system or population
- Provides leadership in planning data collection and quality monitoring
- Uses quality monitoring data to assess the quality and effectiveness of clinical programs in meeting outcomes
- Develops quality improvement initiatives based on assessments
- Provides leadership in the design, implementation and evaluation of process improvement initiatives
- Provides leadership in the system-wide implementation of quality improvements and innovations
- Participates in conduct and implementation of research which includes one or more of the following:
 - Identification of questions for clinical inquiry
 - Conduct literature reviews, study design and implementation
 - Data collection
- Dissemination of findings

Neonatal CNS Competencies

- Recognizes opportunities for improving clinical practice at the unit-level
- Identifies research and best practice findings to improve clinical practice at the unit level
- Prioritizes evidence-based practice changes to address safety and quality concerns at the unit level
- Identifies barriers to the implementation of evidence-based practice at the unit level
- Develops and conducts evidence-based project at the unit level
- Recognizes performance improvement opportunities at the unit level
- Aligns nursing practice with evidence-based information to achieve nurse-sensitive outcomes for the unit population
- Participates in unit-based planning for data collection and quality monitoring
- Develops and implements audits at the unit level
- Advocates across interdisciplinary teams to promote evidence-based practice, research and translation of research into best practices
- Identifies clinical questions suitable for clinical inquiry
- Conducts literature review for topics pertinent to clinical practice