CM

Case Management Practice Analysis Executive Summary







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Contents

Executive Summary	2
Methodology	3
Committee Responsibility	
Developing and Administering the Practice Analysis Survey	
Results	
Sample Size	
Demographic Data	
Examination Specifications	
CM Exam Content Outline (ECO)	
Secondary Classifications – Tasks	

Executive Summary

This report describes the methodology and procedures used to conduct a job analysis and develop the exam specifications for the American Board for Occupational Health Nurses, Inc. (ABOHN) Case Management (CM) certification examination.

The three major activities that comprise the job analysis process described in this report are as follows:

- 1. **Job Analysis Committee Meeting** A gathering of subject matter experts (SMEs) to discuss and develop a description of the scope of practice
- 2. **Job Analysis Survey** A large-scale survey of practitioners not involved with the SME panel to validate the task and knowledge statements developed by the committee
- 3. **Development of Examination Specifications** The development of an Examination Content Outline by the committee based on the results of the survey

Several practitioners were assembled by American Board for Occupational Health Nurses, Inc. (ABOHN) to serve as subject matter experts (SMEs). The individuals selected represent a wide variety of work-related characteristics such as years of experience, work setting, geographic location, and areas of specialty. This helps in developing a scope of practice that is reflective of the roles and responsibilities of the job role and is relatively free from bias. By analyzing the experiences and expertise of current practitioners, the results from the job analysis become the basis of a validated assessment that reflects the competencies required for competent job performance.

The job analysis process utilized in this study yields exam specifications that accurately reflect the scope of practice, allowing for the development of fair, accurate, and realistic assessments of candidates' readiness for certification. The resultant Examination Content Outline indicates a 100-item examination with content distribution requirements at the competency area (content domain) level as well as topic (content subdomain) level. The four competency areas are:

- 1. Core Principles
- 2. Disability Management
- 3. Fitness for Work

Methodology

Committee Responsibility

American Board for Occupational Health Nurses, Inc. (ABOHN) selected subject matter experts (SMEs) to represent a wide variety of work-related characteristics such as years of experience, work setting, geographic location, and areas of specialty to develop a scope of practice that is reflective of the roles and responsibilities of the job and is relatively free from bias. The 2023 ABOHN subject matter experts are:

Practice Analysis Advisory Committee (PAAC) Subject Matter Experts (SMEs)

Name	Geographic Location	Name	Geographic Location
Elizabeth Bennett	SE	Jennifer Hale	NC
Lori Burke	NE	Donna Luessen	NE
Phyllis Cichetti	All	Susan Jordan	SC/SW
May Fox	NC	Kay Morey	SE
Tammy Raizes	MW	Toni Leht	NC
Laura Stahl	SC/SW	Brenda Ferri	SE
Daniel Rivera	SC/SW	Bridget Zipp	SW
Cherie Holodnick	NE		

Prior to the job analysis committee meeting, five SMEs were interviewed to help provide background information on the job role, the history of the credential, and the anticipated future of the job role for the Certified Occupational Health Nurse (COHN), Certified Occupational Health Nurse – Specialist (COHN-S) and Case Management (CM) certification since they held multiple ABOHN certifications. These interviews were conducted between January 25 and January 31, 2023.

Name	Geographic Location
Deb George	SW
Emily Tuel	SC
Kerry Cassens	NC
Michelle Jones	SE
Nancy Stewart	SC/SW

PSI Services LLC (PSI) conducted a job analysis committee meeting on February 3-4, 2023, with SMEs to discuss the scope of practice and develop a list of tasks and knowledge areas that reflect the job role. PSI led the SMEs in refining task and knowledge statements and organizing them into a domain and subdomain structure. The outgoing exam content outline was used as a resource when developing the knowledge and tasks.

The job analysis committee developed knowledge statements across 3 content domains and 40 task statements related to the specified domains. The committee members were tasked with identifying linkages between the task and knowledge statements. This was done to provide evidence that the knowledge areas were indeed required to perform the tasks identified. This was also done to ensure that each task was covered by at least one relevant knowledge area and that each knowledge area had at least one relevant task identified (linkages by SMEs were done post-meeting).

Developing and Administering the Practice Analysis Survey

PSI developed, administered, and monitored a survey to validate the tasks and knowledge areas developed by the job analysis committee and to help determine content weighting. To this end, the survey collected respondents' ratings of the importance and frequency for each task and knowledge area. The importance and frequency scale were used to evaluate the appropriateness of the inclusion of each knowledge statement and task.

Importance

How important is this knowledge area to the job role? How important is this task to the job role?

- 0 Not Relevant
- 1 Minimally Important
- 2 Somewhat Important
- 3 Moderately Important
- 4 Very Important
- 5 Critically Important

Frequency

How frequently is this knowledge area used in the job role? How frequently is this task performed in the job role?

- 0 Not Relevant
- 1 Rarely
- 2 Seldom
- 3 Occasionally
- 4 Frequently
- 5 Very Frequently

Between February 17, 2023 and February 28, 2023, a pilot survey was conducted with the job analysis committee, the interviewees, and ABOHN staff members to ensure that the survey was operating correctly, and any modifications or corrections were made address the pilot survey reviewers' comments.

Results

Sample Size

The live survey was sent using online survey software to a list of 5,000 individuals that was obtained from ABOHN. The list consisted of Occupational Health Nurse Professionals including those who held the Certified Occupational Health Nurse (COHN), Certified Occupational Health Nurse - Specialist (COHN-S) and Case Management (CM) credentials. The number of individuals that responded to the survey (tasks and knowledge statements) was 132 (13.7%). The survey was opened on March 21, 2023, and closed on May 7, 2023.

Following the close of the survey, the data were analyzed to identify any respondents who did not complete the survey or provided responses lacking any variance (i.e., "straight-lining" or providing the same response to every task or knowledge). Responses from 31respondents were removed from the data set, yielding a usable number of 101 completed responses. Of those respondents who were removed, 31 were removed due to not completing the survey.

Demographic Data

The following figures and tables present a sampling of the background information collected from the 370 respondents. This data helped describe the sample.

1. Are you currently certified in occupational health nursing (Select all that apply)	n
COHN	25
COHN-S	47
СМ	40
Not currently certified	18

2. Select the one job title that most closely matches your primary job responsibility.	n
OHN Clinician	17
Case Manager	33
Manager/Leadership	29
Safety and Environmental	1
Risk Management	2
Health Promotion/Wellness	1
Professor/Adjunct Faculty/Instructor	0
Other (please specify)	9
3. Please indicate the number of years working as an occupational health nurse?	n
less than three years	2
3 -5 years	8
6-10 years	9
11-15 years	8
16- 20 years	15
21 plus years	49
4. Approximately how many years have you been certified in occupational health nursing?	n
less than three years	9
3 -5 years	12
6-10 years	9
11-15 years	9
16- 20 years	10
21 plus years	32
5. Which one best describes the type of industry for which you work?	n
Hospital/Medical Center	9
Manufacturing/Fabrication	12
Federal, State, or Local Government	9
Allied Products	9
Utility Services	10
College/University	32
Insurance	9
Self-employed/Consulting	12
Corporate	9
Chemical	9
Other	10

6. In which state (or province or territory) do you primarily practice?	n
Arizona	3
Arkansas	1
California	3
Colorado	1
Delaware	1
Florida	3
Georgia	4
Illinois	4
Indiana	1
Iowa	2
Louisiana	2
Maine	1
Maryland	1
Massachusetts	1
Michigan	3
Minnesota	3
Mississippi	1
Missouri	3
New Jersey	3
New York	3
North Carolina	3
Ohio	5
Oklahoma	2
Pennsylvania	1
South Carolina	6
Tennessee	3
Texas	12
Virginia	2
Washington	3
Wisconsin	2
US Territories	2

7. What is your basic level of education in nursing (1st degree earned in nursing)?	n
Diploma	34
Associate degree	34
Baccalaureate degree	44

8. What is the highest education level in nursing you have completed?	n
Diploma	7
Associate degree	19
Baccalaureate degree	38
Master's degree	23
DNP/PhD	3
Other (please specify)	1

9. What is the highest education level you have completed?	n
Diploma	6
Associate degree	16
Baccalaureate degree	31
Master's degree	29
Doctorate	5
Other (please specify)	2

10. What is the total number of workers your site provides occupational	n
health services for?	11
0	3
1-500	17
501-1,000	17
1,001-2,500	16
2,501-5,000	11
> 5,000	25

11. Which of the following best represents your practice setting?	n
Onsite	58
Hybrid	14
Remote/Virtual	20

Based on discussion with the SME panel, the demographic data were as expected, and judged to be representative of the profession.

Examination Specifications

The Job Analysis Committee met on May 19-20, 2023, to review the results of the survey, finalize the tasks and knowledge that would comprise the next Examination Content Outline, and finalize the content weighting for the examination.

The committee reviewed the demographic results and confirmed that the results matched expectations and impressions of the practitioner population, suggesting that the respondent sample is reflective of the target population.

The committee reviewed the task and knowledge area survey performance. Each lower scoring task and knowledge area were discussed by the committee to determine if the task or knowledge area should remain as part of the exam content outline. The committee did determine to remove or edit some tasks and knowledge areas based on performance and their expertise, any lower performing items were kept due to their importance to the role.

The committee then estimated the exam content area weights after reviewing the survey results. The draft content weighting was developed by calculating the criticality value (mean importance rating multiplied by the mean frequency rating) and then determining a percentage weight based on the relative weight of the criticality value for each content area. The SMEs then reviewed the draft content weighting verses the committee estimates, discussing any adjustments necessary to align the number of items per content area for adequate content coverage on the assessment.

CM Exam Content Outline (ECO)

1	Core Principles	40
Α	Plan of Care	25
1	Disability and Absence Management Programs	
2	Care Coordination and Plans	
3	Counselling and Education	
4	Care Communication	
5	Cultural Competence and Considerations	
6	Cost and Resource Considerations	
7	Disability Outcomes Benchmarking	
8	Federal, State, and Local Regulations and Laws	
В	Evaluation and Reporting	11
1	Medical Documentation and Reporting	
2	Regulatory Compliance	
3	Program Outcomes/Quality	
C	Business Considerations	4
1	Health, Safety, and Wellness Programs	
2	Business Cases and Return on Investment (ROI)	
2	Disability Management	32
Α	Occupational	22
1	Workers Compensation	
2	Accommodations and Modifications	
3	Treatment Modalities and Referrals	
4	Return to Work	
5	Legal and Regulatory Compliance	
6	Non-Occupational	
В	Accommodations and Modifications	10
1	Return to Work	
2	Legal and Regulatory Compliance Fitness for Work	
3		20
3	Worker Profile Occupational and Environmental Health and Medical History	28
A 1	Work Restrictions	14
1	Worker Accommodations and Modifications	
2	Job Placements	
3 4	Fitness for Duty Evaluation	
5	Job Role and Requirements	
В	Job Analysis	14
1	Essential Job Functions	14
2	Tests and Screening Requirements	
3	Safety and Control Measures	
4	Hazard and Risk Assessments	
5	Core Principles	
,	1	

Secondary Classifications – Tasks

- 1. Identify scope of services and nursing protocols consistent with Nurse Practice Act and Core Competencies as it applies to occupational health.
- 2. Comply with applicable standards for the organization's occupational health services (e.g., OSHA, ADAAA, Joint Commission)
- 3. Comply with recording and reporting requirements for laws and regulations.
- 4. Ensure confidentiality of personal health information and comply with established codes of ethics, legal or regulatory requirements.
- 5. Prepare and provide testimony or documentation for legal proceedings (e.g., workers' compensation, dismissal, EEOC)
- 6. Participate in administrative proceedings (e.g., grievances) related to occupational health.
- 7. Obtain and assess occupational/environmental health and medical history.
- 8. Conduct health evaluations (e.g., pre/post offer, post-incident, return to work, fit for duty) and assess to make recommendations or implement actions based on findings.
- 9. Educate and train workers about basic health and wellness (e.g., self-care, complementary/alternative medicine, stress management)
- 10. Identify health (physical and psychosocial) and wellness needs of workers and worker populations.
- 11. Recommend changes in essential job functions to accommodate workers' health status and history.
- 12. Advocate for the worker and employer to achieve optimal outcomes and business continuity for the worker and employer.
- 13. Evaluate workplace ergonomics and make recommendations.
- 14. Participate in the investigation of industrial hygiene and environmental health issues (e.g., noise, lead, fumes, vapours, indoor air quality, mold).
- 15. Incorporate knowledge of cultural beliefs, practices, and social determinants of health in implementing programs and services
- 16. Prepare for and respond to emerging health care issues and risks.
- 17. Identify, recognize, and respond to ethical issues in practice.
- 18. Select teaching methods and content based on the characteristics of learners (e.g., apply adult learning principles, cultural differences)..
- 19. Identify gaps in health services for workers and workplace population.
- 20. Identify work-related and non-work-related cases that are appropriate for case management.
- 21. Integrate legal, labour, and regulatory requirements in decision-making regarding job/work accommodations (ADA/ADAAA)
- 22. Adhere to and monitor for changes in federal, state, and local regulations that may impact case management practice.
- 23. Analyze data to identify trends or issues to make recommendations based on findings.

- 24. Collaborate with stakeholders to recommend preventive measures based on injury, illness, and incidents data.
- 25. Assist, educate, and advocate for workers to receive additional services (e.g., primary care, counselling, employee assistance programs, resources)
- 26. Evaluate community health related services/providers for referral services.
- 27. Develop and/or coordinate a network of resources for case management.
- 28. Implement, coordinate, and re-evaluate case management plans and outcomes for individuals.
- 29. Administer or manage integrated disability management strategies (i.e., STD, LTD, FMLA, workers' compensation, ADAAA).
- 30. Communicate essential job functions information to providers.
- 31. Evaluate health care delivery to workers provided by external and/or third-party providers.
- 32. Identify trends related to quality management/improvement program(s) for occupational health and safety (e.g., benchmarking, best practices).
- 33. Participate in clinical case reviews and quality improvement efforts.
- 34. Analyze workers' compensation data (e.g., quality, cost-containment, lost time).
- 35. Educate stakeholders at all levels about occupational health and safety programs to obtain their support.
- 36. Develop alliances with key leadership and stakeholders.
- 37. Coordinate and serve on interdisciplinary committees and teams.