

# Moving forward with nurse-led care coordination

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## Expert panel contributes to an ongoing body of work.

**RNs ARE ESSENTIAL** to establishing and maintaining a well-coordinated health system that focuses on consumer preferences, advances care quality, and maximizes the use of available resources. Care coordination represents one approach where nurses engage in the process.

In July 2017, building upon previous work, the American Nurses Association (ANA) solicited RN subject-matter experts from across the country to use a collaborative approach to re-examine and identify a progressive definition of nurse-led care coordination and define core competencies central to it. The resulting Care Coordination Panel met once a month for 6 months, engaging in honest, thought-provoking conversations.

### Revisiting the definition

In the quest to re-examine and identify a progressive nurse-led care coordination definition, the panel moved from the previously endorsed Agency for Healthcare Research and Quality (AHRQ) definition to that of the National Quality Forum (NQF). Although the AHRQ definition was considered a suitable description of care coordination, the decision to endorse NQF's definition was based on its health outcomes focus and inclusion of family needs and preferences.

NQF defines care coordination as a “function that helps ensure that the patient’s needs and preferences for health services and information sharing across people, functions, and sites that are met over time.”

The current healthcare landscape mimics these priorities, with increasing patient-centered care and reimbursement structures based on patient outcomes.

### Examining standards and reimbursement

The Care Coordination Panel also affirmed and proposed expanding the existing care coordination scope and standards of practice as defined in ANA’s *Nursing: Scope and Standards of Practice*, 3rd edition. Specifically, the panel highlighted the:

- significance of a needs assessment in the process
- need to use culturally and linguistically appropriate care when considering patient and family preferences
- importance of evaluation and closing the loop with participating organizations in the care coordination process.

Other significant considerations discussed included the need to continue the conversation about reimbursement for advanced practice RNs and whether care coordination should be limited to nurses with bachelor’s degrees and higher.

The panel’s work represented just one part in ANA’s three-pronged approach in conjunction with its 2017-2020 strategic plan to position nurses as integral partners in consumers’ health and healthcare journeys. The first approach was to expand nursing’s capacity to provide coordinated care through competency-based education and services.

Concurrently, ANA’s efforts to advance the design and use of and payment for care coordination measures resulted in the 2017 “Medicare payment for registered nurse services and care coordination” white paper. ANA previously examined “The value of nursing care coordination” in 2012, identified a “Framework for measuring nurses’ contributions to care coordination” in 2013, and created a “Policy agenda for nurse-led care coordination” in 2015.

Third, ANA leveraged the outcomes of care coordination managed by nurses through the provision of products and resources, including the 2017 book, *Care Coordination: A Blueprint for Action for RNs*, by Gerri Lamb, PhD, RN, FAAN, and Robin Newhouse, PhD, RN, FAAN. Discussions continue within ANA to determine the appropriate products to promote these changes and how to include more nurses with the confidence to lead care coordination. ★

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#### ANA resources

Lamb G, Newhouse R. *Care Coordination: A Blueprint for Action for RNs*. Silver Spring, MD: American Nurses Association; 2018.

Access white papers related to care coordination at [nursingworld.org/practice-policy/health-policy/care-coordination/](http://nursingworld.org/practice-policy/health-policy/care-coordination/).