


International Commission on Health Care Certification

Certified Life Care Planner (CLCP)
Role and Function Study






Purpose

1. To clarify the current role and functions of practicing life care planners and thereby provide a foundation for updating the content validation of the Certified Life Care Planner examination
2. To provide guidance for life care planning educators/trainers in curriculum development




Research Questions

1. Are there differences in the perceptions of roles and functions of life care planners between Certified Life Care Planners and Certified Nurse Life Care Planners?
2. Are there differences among physician/doctoral level life care planners and non-physician/non-doctoral level life care planners?
3. Are there differences among life care planners in their perceptions of roles and functions of life care planners based on their daily time spent involved in performing life care planning service delivery?
4. Are there differences among life care planners in their perceptions of roles and functions of life care planners based on their formally earned academic degree?




To Answer Questions:

1. Developed and validated a questionnaire that included demographic information such as gender, age, education, work setting, etc. of the people in the study
2. Developed and validated Job Task Inventory (JTI) of life care planning service delivery that included 197 job tasks




Methodology

- Established Survey Committee of Subject Matter Experts (SME)
 - ✓ CLCP Board Members
 - ✓ CLCP Practitioners
- Documented Individual Practice Tasks for Life Care Planning Service Delivery
- Categorized Tasks into Knowledge-Domain Categories
- Reviewed Prior Life Care Planning Role and Function Studies' Tasks




Methodology

- Developed Survey Instrument
 - ✓ Committee Members Reviewed Personal Practice and Prior Role and Function LCP Tasks
 - ✓ Committee Voted to Include/Exclude Tasks
 - ✓ Survey Instrument Developed based on Accepted Tasks




Methodology

- Field-Tested Survey (Pilot Study)
 - ✓ Certified Life Care Planners Board of Commissioners
 - ✓ Provided input regarding items that needed rewording or that should not be included in the study
- Restructured Survey Instrument Based on Recommendations
- Submitted to Field



Demographics

1. Gender
2. Age
3. Formal Education/Degree
4. Primary Clinical Fields of Practice
5. Licensed, Registered, and/or Certified
6. Current Practice Setting
7. Percentage of Time Allowed for Life Care Planning
8. Geographical Reach of Service
9. Service Populations
10. Office Staff/Subcontractors Utilization in LPC Development
11. Office Staff/Subcontractors Activities




Demographics

Demographics – Gender and Age

- Total Respondents = 208 (Usable & Unusable)
 - ✓ Female – 177 (85.10%)
 - ✓ Male - 31 (14.90%)
- Age in Years (Oldest vs. Youngest)
 - ✓ 56-65 (40.87%)
 - ✓ 46-55 (28.85%)
 - ✓ 26-35 (3.37%)


69.72%



Demographics

Demographics – Education/Degree


- Master’s Degree 50 (18.18%)
- Bachelor’s Degree Other 44 (16.00%)
- BSN 41 (14.91%)
- Other 38 (13.82%)
- Associate’s Degree RN 32 (11.64%)
- Diploma Nurse 20 (7.27%)
- Master’s Degree RN 19 (6.91%)



Demographics

Demographics – Education/Degree Continued


- Doctor of Philosophy Ph.D. 10 (3.64%)
- Medical Doctor M.D. 7 (2.55%)
- Juris Doctor (Nurse/OT) 5 (1.82%)
- Master’s of Social Work MSW 3 (1.09%)
- Bachelor’s Degree Rehab Couns.
Voc. Eval./Job Placement 2 (0.73%)
- Doctor of Physical Therapy D.PT. 2 (0.73%)
- Doctor of Education Ed.D. 1 (0.36%)



Demographics

Demographics – Fields of Practice


- Case Management 104 (29.71%)
- Nursing 76 (21.71%)
- Rehab Counseling 52 (14.86%)
- Other: 46 (13.14%)
- Occupational Therapy 25 (7.14%)
- Counseling 14 (4.00%)
- Medicine 14 (4.00%)
- Physical therapy 6 (1.71%)



Demographics

Demographics – Licences/Certifications:


- > CLCP 171 (27.58%)
- > RN 75 (12.10%)
- > CCM 66 (10.65%)
- > MSCC 52 (8.39%)
- > CRCC 51 (8.23%)
- > CNLCP 27 (4.35%)
- > OT 26 (4.19%)
- > CRRN 15 (2.42%)



Demographics

Demographics – Practice Settings


- > Owner/Independent Practice
Without Employees 97 (36.06%)
- > Owner/Independent Practice
With Employees 44 (16.36%)
- > Owner S, C, or LLC Corporation
41 (15.24%)
- > Private Rehab Co. Employee
22 (8.18%)
- > Hospital 10 (3.72%)



Demographics

Demographics – LCP Work Hours


- > 1-25% of Time 73 (35.10%)
- > 26-50% of Time 27 (12.98%)
- > 51-75% of Time 38 (18.27%)
- > 76-100% of Time 59 (28.37%)
- > None of My Time 11 (5.29%)



Demographics

Demographics – Population Served


- > Acquired Brain Injury 192 (28.22%)
- > Spinal Cord Injuries 180 (12.07%)
- > Orthopaedic Conditions 172 (11.54%)
- > Amputations 166 (11.13%)
- > Chronic Diseases 133 (8.92%)
- > Non-Catastrophic Injuries 127 (8.52%)
- > Burns 122 (8.18%)
- > Birth Injuries/Anoxia 113 (7.58%)
- > Organ Transplants 71 (4.76%)




Demographics

Demographics – Use Office Staff/Subcontractors

- > 106 Yes (50.96%)
- > 102 No (49.04%)



Empirical Research




Empirical Research

What it is:

Empirical Research is based on observed and measured phenomena and derives knowledge from actual experience rather than from theory or belief.

Empirical Research contains the following topic outline:

1. Introduction:	Lit Review
2. Methodology:	Research Design
3. Results: Findings -	Stats
4. Discussion:	Implications to the field




Statistics

➤ **Factor Analysis:** Describes the variability among observed variables and the lower number of latent variables, or unobserved variables. **Latent variables** are variables that are not directly observed but are rather inferred (through a mathematical model) from other variables that are observed (directly measured)

Explores variable area (Job Tasks Items) in order to identify the factors (Knowledge Domains) presumably underlying the variables

- Based on variances of subject ratings
- Job Task items with similar variances grouped together, forming the Knowledge Domain



Factor Analysis Results

A priori Assumptions — Based on theoretical deduction rather than empirical observation; Factor analysis applied to this study eliminated a priori assumptions

Factorial Analysis Identified 16 Categories, or What are Referred to as **Knowledge Domains**


- ✓ Survey Committee SMEs met via Webinar and categorized all 16 Knowledge Domains as applied to Life Care Planning
- ✓ Survey Committee SMEs identified subcategories within the 16 knowledge domains



Data Analysis Results

Knowledge Domains and Subcategories = 16

1. Care Plan Development
 - a) Initial Interview
 - b) Referral Source Contact
 - c) Cost Analysis
 - d) Report Writing
 - e) Standards of Practice
 - f) Forensics
 - g) Communication Skills
 - h) Fee Schedule
 - i) Practice Analysis



Subcategory Job Task Rational Sort


Knowledge Domains (Factors) = 16

1. Care Plan Development
 - b) Referral Source Contact
 15. Upon receipt of referral, communicate with referral source regarding specific case needs, projected time for LCP completion, and projected fee for completed life care plan
 16. Request specific medical records



Data Analysis Results

2. Needs Assessment
 - a) Service Recommendation
3. Vocational Consideration
 - a) Economist Consult
4. Litigation Support
5. Knowledge Applications
 - a) Evaluatee Interactions
 - b) Time Management
6. Marketing
 - a) Report Writing
 - b) Process Evaluation




Data Analysis Results

- 7. Information Sharing**
 - a) Invoicing
- 8. Data Collection**
 - a) Expense Projection
 - b) Resource Application
- 9. Report Preparation**
 - a) Marketing
- 10. Records Request**
- 11. Professional Development**



Data Analysis Results


- 12. Report Writing**
- 13. Financial Resources**
- 14. File Development**
 - a) Primary Data Collection
 - b) Secondary Data Collection
 - c) Tertiary Data Collection
- 15. Collaboration**
- 16. Records Review**
 - a) Objectivity



Data Analysis Results

Eigenvalues: Calculated and used in deciding how many factors to extract in the overall factor analysis. They are used to condense the variance in a correlation matrix. A scree plot is typically interpreted as follows: the number of factors appropriate for a particular analysis is the number of factors before the plotted line turns sharply right. Latent variables are accepted with an eigenvalue of ≥ 2.00


Factor	Total	% of Variance	Cumulative %
1	41.169	20.898	20.898
2	21.158	10.740	31.638
3	8.339	4.233	35.871
4	7.587	3.852	39.722
5	6.700	3.401	43.123
6	5.031	2.554	45.677
7	4.573	2.321	47.998
8	4.233	2.149	50.147
9	4.090	2.076	52.223



Data Analysis Results

Eigenvalues: Calculated and used in deciding how many factors to extract in the overall factor analysis. They are used to condense the variance in a correlation matrix. A scree plot is typically interpreted as follows: the number of factors appropriate for a particular analysis is the number of factors before the plotted line turns sharply right. Latent variables are accepted with an eigenvalue of ≥ 2.00

Eigenvalue Post Rotation Loadings			
Factor	Total	% of Variance	Cumulative %
10	4.070	2.066	54.289
11	3.775	1.916	56.205
12	3.660	1.858	58.063
13	3.507	1.780	59.843
14	3.387	1.719	61.562
15	3.243	1.646	63.208
16	3.135	1.159	64.800




Cronbach's Alpha Reliability Test

Cronbach's Alpha: Measures the internal consistency of a questionnaire – It suggests the level of understanding of the item by survey participants as a population

Case Processing Summary			
Cases		N	
		Valid	%
	Valid	212	100.0
	Excluded	0	.0
	Total	212	100.0

Reliability Statistics	
Cronbach's Alpha	N of Items
.987	197



Research Questions Results

- Are there differences in their perceptions of roles and functions of life care planners between Certified Life Care Planners (CLCP) and Certified Nurse Life Care Planners (CNLCP)?

H_0 : There is no difference between Certified Life Care Planners and Certified Nurse Life Care Planners

* Only participants who had only one of the two credentials were included in answering this question.

 - T-tests were used on the factor scores for each of the 16 factors to determine if the variances between the two groups are equal.
 - Levene's Test for equality of variances was used where the null hypothesis suggests that the variances of the two groups are equal. Results suggests that the variances of the two groups are equal and the null hypothesis is retained.
 - Review of the p-value of the 16 factor t-tests reveal that it is less than .05 between the two groups for Factor 3 and Factor 4, and the Null hypothesis is rejected.



Research Questions Results

1. Are there differences in their perceptions of roles and functions of life care planners between Certified Life Care Planners (CLCP) and Certified Nurse Life Care Planners (CNLCP)?

- Factor 3 – Vocational Consideration
 - 1) During Initial Interview/Home Visit gathers a work history from the evaluatee
 - 2) Either personally or through vocational rehabilitation consult referral, identifies the evaluatee's need for long-term vocational/educational services
 - 3) Either personally or through vocational consult referral, assesses the evaluatee's need for vocational services
 - 4) Either personally or through vocational rehabilitation consult referral, determines the evaluatee's ability to pursue gainful employment
 - 5) Either personally or through vocational rehabilitation consult referral, obtains information on past occupational/educational performance for purposes of vocational planning
 - 6) Either personally or through vocational rehabilitation consult referral, specifies cost for long-term vocational/educational services for the injured person
 - 7) Assess the need for short/long-term vocational/educational services
 - 8) Specifies cost for short/long-term vocational/educational services

Participant Discussion Follows




Research Questions Results

1. Are there differences in the perceptions of roles and functions of life care planners between Certified Life Care Planners (CLCP) and Certified Nurse Life Care Planners (CNLCP)?

- Factor 4 – Litigation Support
 - 1) Add the case to your list of cases for Federal Rules of Evidence purposes, marketing, etc.
 - 2) Assists with the development of information for settlement negotiations for legal representatives
 - 3) Consults with a plaintiff attorney to reasonably map out what long-term care services will be needed for the evaluatee
 - 4) Consults with a defense attorney to reasonably map out what long-term care services will be needed for the evaluatee
 - 5) Provides information located in the LCP to an official of the court
 - 6) Advises the evaluatee's attorney on the cross-examination of opposing counsel's expert witness 7) Recommends other expert witnesses to an evaluatee's attorney when appropriate
 - 8) Advises defense attorney on the cross-examination of plaintiff counsel's expert witness
 - 9) Review the plaintiff's plan and develop a rebuttal or comparison plan when consulting with defense attorneys

Participant Discussion Follows




Research Questions Results

2. Are there differences among physician/doctoral-level life care planners and non-physician/non-doctoral-level life care planners in their perceptions of roles and functions of life care planners?

H_0 : There is no difference between physician/doctoral-level Life Care Planners and non-physician/non-doctoral-level Life Care Planners

- T-tests were used on the factor scores for each of the 16 factors to determine if the variances between the two groups are equal.
- Levene's Test for equality of variances was used where the null hypothesis suggests that the variances of the two groups are equal. Results suggests that the variances of the two groups are equal and the null hypothesis is retained.
- Review of the p-value for the independent t-test of the 16 factors reveals that it is greater than .05 between the two groups for all 16 factors; thus, the Null hypothesis is retained.




Research Questions Results

3. Are there differences among life care planners in their perceptions of roles and functions of life care planners based on their daily time spent involved in performing life care planning service delivery?

H_0 : There is no difference among Life Care Planners in their perceptions of roles and functions of life care planners based on their daily time spent involved in performing life care planning service delivery

- Analysis of variance (ANOVA) was used to test the difference among life care planners in their perceptions of roles and functions for each of the 16 factors based on their time spent on life care planning service delivery since there are 5 group-choices to compare.
- H_a : There is no difference among the 5 group means of percentages of time life care planners spend when performing life care planning service delivery

Participant Discussion Follows




Research Questions Results

3. Are there differences among life care planners in their perceptions of roles and functions of life care planners based on their daily time spent involved in performing life care planning service delivery?

H_0 : There is no difference among Life Care Planners in their perceptions of roles and functions of life care planners based on their daily time spent involved in performing life care planning service delivery

- Review of the p-value for the ANOVAs of each of the 16 factors reveals that Factors 1, 2, 4, 7, and 13 are less than .05. The null hypothesis is rejected for these factors. There is enough evidence to show that there is at least one group that its mean is statistically significantly different from other groups
- Tukey's Post Hoc Test – Used to find which group(s) are different in their means




Research Questions Results

3. Are there differences among life care planners in their perceptions of roles and functions of life care planners based on their daily time spent involved in performing life care planning service delivery?

H_0 : There is no difference among Life Care Planners in their perceptions of roles and functions of life care planners based on their daily time spent involved in performing life care planning service delivery

- Tukey's Post-Hoc Test Results –
 - 1) **Group None** is statistically different from all the other groups on Factor 1 – Care plan Development.
 - 2) **Group None** is statistically different from those who chose 51-75% of time for Factor 2 – Needs Assessment
 - 3) **Group 1% - 25%** mean is statistically different from the mean of those who chose 76% - 100% on Factor 4 – Litigation Support, Factor 7 – Information Sharing, and Factor 13 – Financial Resources

Participant Discussion Follows



Research Questions Results


4. Are there differences among life care planners in their perceptions of roles and functions of life care planners based on their formally earned degree?

H_0 : There is no difference among Life Care Planners in their perceptions of roles and functions of life care planners based on their formally earned degree

Caveats:

- ✓ Those degrees with only one participant who had that respective degree were removed from the listing.
- ✓ Persons with multiple degrees had only the highest degree recognized.

• Analysis of variance (ANOVA) was used to test the difference among life care planners in their perceptions of roles and functions for each of the 16 factors based on their highest academic degree earned since there were 14 possible group listings of degrees.




Research Questions Results

4. Are there differences among life care planners in their perceptions of roles and functions of life care planners based on their formally earned degree?

H_0 : There is no difference among Life Care Planners in their perceptions of roles and functions of life care planners based on their formally earned degree

- H_a : There is no difference among the 14 group means of the participants' highest earned degree in their perceptions of roles and functions
- Review of the p-value for the ANOVAs of each of the 16 factors reveals that Factors 2, 4, 5, and 10 are less than .05. The null hypothesis is rejected for these factors. There is enough evidence to show that there is at least one group that its mean is statistically significantly different from other groups at the 95% level.



Research Questions Results

4. Are there differences among life care planners in their perceptions of roles and functions of life care planners based on their formally earned degree?

H_0 : There is no difference among Life Care Planners in their perceptions of roles and functions of life care planners based on their formally earned degree

- Additional Review of the p-value for the ANOVAs of each of the 16 factors reveals that Factors 3, 15, and 16 are less than 0.1. The null hypothesis is rejected for these factors as well. There is enough evidence to show that there is at least one group that its mean is statistically significantly different from other groups at the 90% level.
- Tukey's Pot Hoc Test – Used to find which group(s) are different in their means




Research Questions Results

4. Are there differences among life care planners in their perceptions of roles and functions of life care planners based on their formally earned degree?

H_0 : There is no difference among Life Care Planners in their perceptions of roles and functions of life care planners based on their formally earned degree

- Tukey's Post-Hoc Test Results –
 - Group 4 – Bachelor's Degree, Rehabilitation Counseling/Vocational Evaluation** is statistically different from all the other groups on Factor 2– Needs Assessment and Factor 4 – Litigation Support. The mean of Group 4 is higher than all of the other groups' mean for factor loading on both factors
 - Group 5-Bachelor's Degree – Other** is significantly different from Group 7 – Master's Degree Rehab Psych, and Group 13 – Medical Doctor. The mean of the factor loading for group 5 is higher than the mean of the factor loading for Groups 7 and 13 on Factor 4
 - Group 7, Master's Degree Rehab Psych** mean is significantly different from Groups 3 – Bachelor's Degree RN (BSN) and Group 6 – Master's Degree RN for Factor 5 – Knowledge Applications. The mean for Group 7 is higher than Groups 3 and 6.




Research Questions Results

4. Are there differences among life care planners in their perceptions of roles and functions of life care planners based on their formally earned degree?

H_0 : There is no difference among Life Care Planners in their perceptions of roles and functions of life care planners based on their formally earned degree

- Tukey's Post-Hoc Test Results –
 - Group 5-Bachelor's Degree—Other** is significantly different from Group 7 – Master's Degree Rehab Psych on Factor 10 – Records Request. The mean for Group 5 is higher than that of Group 7.
 - Group 6 – Master's Degree RN** is significantly different from Groups 1– Diploma Nurse RN, 2-Associate's Nurse RN, 3-Bachelor's Degree Nurse RN (BSN), 5-Bachelor's Degree Other, and 7-Master's Degree Rehab Psych for Factor 16 – Records Review. The mean of the factor loading for group 6 is lower than factor loading mean that the rest of the other groups.

Participant Discussion Follows



Factor Loadings and Job Task Inventory (JTI)

Accessing Factor Loading and Job Task Inventory

- www.ichcc.org
- Horizontal Menu Bar – Scroll over “Resources”
- Click on “Research and Publications
- Click on “ICHCC 2018 R & F Study Factor Loadings of the Job Task Inventory (JTI)”
