



IssueBrief

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Sharing the superpower: Mentors cultivate next-generation case managers through real-life stories and resources

Professional case managers, especially those with years of experience, know what needs to be done, and they do it: advocate for clients, coordinate care across settings, connect clients and families and resources, and so much more.

It's second nature—case management requires clinical knowledge and understanding of procedure, protocol and ethics. However, it also requires a host of capabilities and wisdom that comes through experience. This "local" or "embedded" knowledge allows case managers to work seamlessly across settings. It's the superpower that lets them connect the right client to the right resource at the right time.

That wisdom, that knowledge, is not found in books. It's found in the experience of seasoned case managers. Case managers are knowledge workers, and they need to share that knowledge, explains Patricia Benner, PhD, a professor emerita at the University of California School of Nursing. She is a noted nursing educator and author of *From Novice to Expert: Excellence and Power in Nursing Practice*.

And that's why mentoring is so vital. Without mentoring, so much of the knowledge that's required for the case manager's job would just not be available, she says. It's certainly not commonly found in job descriptions or procedure manuals.

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Commission mentorship tools



The Commission has curated an array of resources to develop a knowledgeable, skilled case management workforce—including resources specific to mentoring—at ccmcertification.org/develop-others/mentoring. Board-certified case managers are well positioned to extend their professional development by becoming a mentor. Look for individuals in your sphere of influence who show that spark for autonomy and have the qualities that would make a great case manager.

The toolkit includes:

- Tipsheet: How to Start a Lending Library
- Tipsheet: Getting Started with Mentoring
- Tipsheet: Sample Mentoring Agreement
- Workforce Development Assessment
- Pocket Prep Map
- CCM Glossary App
- CMBOK Toolkits
- CCMC Resource Grid

- CCMC Quick Guide
 - Definition and Philosophy of Case Management
 - Scope of Practice Overview
 - Knowledge Domains & Subdomains
 - Code of Professional Conduct for Case Managers

- Blogs
 - Thinking about certification?
 - What you need to know about eligibility
 - Get ready. Get set. Go for it.
 - Organize a successful study group

Among those holding the Certified Case Manager® (CCM®) credential, mentoring is common; 77% say they've been a mentor, and 74% have had a mentor.¹ As the population ages and health care grows increasingly more complex, the need for professional case managers representing an increasingly diverse population is outpacing the supply. That was the impetus behind the Commission's focus on workforce development and on mentoring across all disciplines in case management—nursing, social work and other health-related fields. "CCMs have a role to play to help develop the next generation of qualified, knowledgeable case managers through mentoring," says Vivian Campagna, the Commission's chief industry relations officer.

Mentoring is essential to the development of a knowledgeable, skilled case management workforce, Campagna says. "Most CCMs can point to at least one person who helped them along their professional development journey as either formal or informal mentors. Many CCMs have, in turn, developed others through mentorship." It's ingrained in the culture.

Articulating this valuable local—or embedded—knowledge challenges even the most experienced case manager. Not because it's esoteric, but because it's so pervasive that it's simply taken for granted, Benner says. "Once you've been doing this job for quite a while, all this embedded

knowledge is often filed in the category of God-ordained, or from the beginning of time, as true."

Mentoring a better case manager corps

The best mentors—and perhaps the best case managers—are open and engaged. "If you want to be the best case manager ever, you've got to have a presence and 'aliveness' and curiosity and attentiveness. You need to cultivate the ability to pass on your communication skills, your sensitivity and frontline knowledge," Benner says.

She scoffs at the notion this is somehow "soft" knowledge. "It's certainly the opposite of sentimentalism. It's a set of core interpersonal skills—staying attuned, staying attentive and staying curious."

Board-certified case managers embody those characteristics and, says Campagna, are well qualified to come alongside less experienced colleagues through mentorship, but they are also in a position to enhance their own knowledge. "Sometimes mentees can teach us, just the way we teach them. Keep an open mind and look to see if that's something that maybe could be done a little bit better, a little differently than how you've always done it."

Context matters

Mentoring others may require taking a step back and really examining what the role accomplishes in everyday practice within a particular setting. Case

¹ Health2 Resources and CCMC, Professional and Demographic Characteristics of CCMs, February 2019.

managers must figure out how to work within the framework of the organizations they are in, identify the constraints and learn how to resolve problems or work with them, emphasizes Campagna. That's the kind of local knowledge mentorship is designed to pass along. "That will enable us to do the best we can as advocates and case managers for our clients."

A mentor needs to be privy to the local knowledge about the specific setting, be it workers' compensation or a hospital, nonprofit or for-profit, military or civilian. Each has its own nuances and rhythms.

The goal, says Benner, is to create a high-reliability organization regardless of setting—one that consistently delivers high-quality case management. To do that, case management mentors should take nothing for granted that may become a future pitfall for a mentee. They should:²

- Track small failures;
- Resist oversimplification;
- Remain sensitive to operations;
- Maintain capabilities for resilience; and
- Take advantage of varied expertise by sharing resources for counsel and support with the mentee.

2 Based on based on the research from Weick, Karl E., and Kathleen M. Sutcliff. *Managing the Unexpected: Resilient Performance in an Age of Uncertainty (Edition 2)*. John Wiley & Sons, Inc., 2007.

What does this look like in practice? "You really can articulate the nature of the particular patient and family you're working with rather than just adopting procedures and falling back on generalized guidelines," Benner says. That's how you share knowledge and inspire both critical and creative thinking in future situations.

Good mentors can make this knowledge visible and public through storytelling. She and Campagna offer some insight into how.

Capture clinical reasoning

Storytelling captures the clinical reasoning process because of its narrative and time-oriented structure, Benner explains. Instead of thinking about the decision-making snapshots in time, "you really look at changes across time and what the needs are, identifying the greatest vulnerabilities or concerns in a particular, evolving, timeline."

Job shadowing allows a new case manager the opportunity to follow a seasoned case manager for a period of time to learn how the work is accomplished in that organization.³ Although it's essential to the mentoring and training processes, without interaction and storytelling, it's of limited value, Benner says. "Shadowing is only as great as both the mentee's ability to ask questions and the mentor's ability

3 "What makes a good case manager? Look beyond the resume." *Hospital Case Management*, March 1, 2018. <https://www.reliasmedia.com/articles/142161-what-makes-a-good-case-manager-look-beyond-the-r%C3%A9sum%C3%A9>

to have some running commentary, and to be aware of what is significant in interacting with patients."

Campagna has seen the power of narrative in training professional case managers. Stories offer the elements needed to convey deeper meanings: a challenging situation requires reasoning to address the unique problem, and the steps taken to arrive at a solution can be applied to other challenges. The Commission's Certification 360 workshop has leveraged the power of stories in working with new and early-career case managers. "It's those stories they tend to remember. It's those stories that can illustrate how, sometimes, situations do go south, and how you can make them better. With stories, we can illustrate what a good case management experience looks like."

How does a case manager capture teachable moments and wrap them into stories so they

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The case manager as client advocate

Benner shares the following first-hand account from a wounded service member's relationship with a case manager:

“She’s like a mother to me, she’s amazing... She’s done absolutely everything I’ve ever needed down here. She was the one that actually fixed that problem [with my pain medication] when I was so ill in the barracks... I called her when I got up that day, and she was like, “You need to come back in [to the hospital]. Let’s go to the emergency room.” And I was saying, “No, no, it’s not that big of a deal. Don’t worry about it!” And she said, “No, I’m going to come over there and get you right now.” I was up all night just throwing up, and I didn’t want to make a big thing out of it. But she’s done everything for me. She’s amazing. All my appointments, I would have been lost without her. She’s basically taken my hand and walked me to everywhere I needed to be in the hospital for my follow-up appointments. And she told me she would go with me to them if I wanted, and I was like, “No, I’m good.” Yeah, I would have been walking in circles pretty medicated in the hospital if it wasn’t for her.”

can be leveraged for mentees later? Benner recommends documenting examples of your successes and failures. “These are exemplars, because once you have a good example, it sheds light on a much broader domain of practice knowledge,” she says. “And I think if you start doing that, you will learn from your own practice things that you hadn’t really reflected on because you were *just doing* them in the practice setting.”

Put those stories on paper—or store them on a spreadsheet, in an app, or whatever means works best for you. “If you can’t make the time to jot it down, record it using your smart phone. Capture clinical situations that strike you as ‘Oh, this is a situation where I really learned something new,’ or ‘This is what case management is all about—this exemplifies that,’ or ‘Oh my God! This was a situation where all hell broke loose and it was an extreme breakdown.’”

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Even practice breakdowns and errors highlight the value of case management; capturing those stories makes it easier to identify solutions and new paths. Then those breakdown stories can become tools for knowledge development, she explains.

Benner has collected some particularly vivid and poignant stories. She references lessons learned from case management in the transport system of health care from the military to the Veteran’s Administration.⁴

“The case managers gave so many great examples. Many of the warriors couldn’t cope with public transportation and crowded buses because of their war experiences. So assessments of their living environment had to include transportation, social contacts and much more,” she says. It takes clinical and real-life imagination. (To read one story, from a wounded service member, see sidebar on left.)

Of course, not every piece of local knowledge is a story. Campagna encourages organizations to set up a simple spreadsheet identifying different approaches and resources they’ve used to successfully resolve particular problems, so people don’t have to reinvent the wheel. “Most people will find that a problem will present itself again and again.”

4 Kelley, P.W., Kenny, D. J., Gordon, D. R., & Benner, P. (2015). “The Evolution of Case Management for Service Members Injured in Iraq and Afghanistan.” *Qualitative Health Research*, 25(3), 426–439. <https://doi.org/10.1177/1049732314553228>

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CHIEF INDUSTRY RELATIONS OFFICER
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What kinds of stories do case managers need to collect and archive as tools to mentor others? Benner has identified seven story categories, each representing a salient—and sometimes sticky—point in a client's journey to optimal health. These categories can be used as the structure for collecting and cataloguing stories to help mentor others:

1. Meeting, knowing and tracking patients' past, present and future;
2. Simplifying the point of contact within and between institutions;
3. Knowing the patient and integrating and coordinating care;
4. The case manager as patient advocate;
5. Supporting and integrating the family into the health care team;

6. Advocating for adequate supportive living environments; and
7. The case manager as life and health coach.

Although every setting is unique, using categories as a reference framework makes it easier to build a story library for sharing best practices with the case management team and for mentoring new case managers.

Demonstrating value through story

The best stories take a complex problem and make the process to solve it transparent, powerful and memorable. Used effectively, these can advance the practice, Campagna says. It's not just new case managers who need to understand the value of case management. Stories can be used to educate administrators and organizations that "case managers are there to do more than just clinical reviews, or discharge planning or making transportation arrangements," she says. "We have very specialized knowledge, techniques and skills."

Sharing these stories delivers that message, says Benner. "The more frontline examples you can give, the fewer communication and credibility problems you will encounter."

Negotiating the relationship

Mentoring is about cultivating a relationship. Maybe the official

mentorship lasts a year or two, but the relationship can go on indefinitely. Both Campagna and Benner counsel keeping the lines of communication open. Strong mentor relationships enrich both parties and strengthen the skills of the mentor to the benefit of future mentees.

These relationships often lead to lifelong friendship, Campagna adds. But it's not all sunshine and roses. Mentor/mentee relationships can be challenging, and even the best will hit points of conflict.

Not all conflict is bad, says Benner. Consider it a promising sign when a mentee speaks up and says, "I don't agree with this."

The mentor needs to be able to respond appropriately. "You can learn from every mentee with whom you have worked," Benner says. Even if the mentee makes mistakes, keeping communication open is vital. "Anything the organization and individual case managers can do to make that communication easier, more direct and honest, the more effective I think the mentoring role will be."

And the more effective mentoring becomes, the stronger the next generation of case managers will be. Campagna, a veteran of mentorship herself, offers a gentle reminder for seasoned case managers. "We always need to keep ourselves open to learning new things. Just because you've been in case management for a long time doesn't mean you know everything." ■

About the Experts



Vivian Campagna, MSN, RN-BC, CCM
Chief Industry Relations Officer
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VIVIAN CAMPAGNA works with individuals and organizations interested in certification (CCM®/CDMS®), related products and services through the Commission's broader marketing and promotions efforts. She fosters strategic partnerships and alliances and provides insight and guidance related to industry trends and developments.

Campagna has been involved in case management for more than twenty years. She has held staff and administrative positions on both the independent and acute care side of the industry. She has published articles on case management topics and is a frequent presenter and educator. She was a founding member of the Long Island chapter of CMSA and served on the board and the conference committee of the NYC chapter of CMSA.

Campagna was a member of the inaugural class of certified case managers and worked with CCMC as a volunteer for more than 10 years. She is a former Commissioner and past chair for the Commission. Campagna earned her nursing diploma from St. Clare's Hospital and Health Center School of Nursing, her bachelor's degree from CW Post Center of Long Island University, and her master's degree in nursing from Seton Hall University. She is certified in case management by both the Commission for Case Manager Certification and the American Nurses Credentialing Corporation.



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PATRICIA BENNER is a professor emerita at the University of California School of Nursing. She is a noted nursing educator and author of *From Novice to Expert: Excellence and Power in Nursing Practice*, which has been translated into twelve languages. She has directed over 50 doctoral dissertations. She pioneered the use of interpretive phenomenology in nursing. She is the director of the Carnegie Foundation for the Advancement of Teaching National Nursing Education Study, *Educating Nurses: A Call for Radical Transformation*, which is the first such study in 40 years. Additionally, she collaborated with the Carnegie Preparation for the Professions studies of clergy, engineering, law, and medicine.

Benner is designated as a Living Legend of the American Academy of Nursing. She was elected an honorary fellow of the Royal College of Nursing and Danish Society for Nurses. Her work has influence beyond nursing in the areas of clinical practice and clinical ethics. She has received two honorary doctorates. She is the first author of *Expertise in Nursing Practice: Caring, Ethics and Clinical Judgment* (2010) with Christine Tanner and Catherine Chesla, and she has coauthored 12 other notable books including a second edition of *Clinical Wisdom and Interventions in Acute and Critical Care: A Thinking-In-Action Approach*.



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