



The Clinical Nurse Specialist

Lois M. Welden, RN, MSN, CNS, CCRN

Stroke Program Coordinator, Deaconess Hospital, Evansville, IN

The Clinical Nurse Specialist (CNS) is one of the most exciting advanced practice and leadership roles within health care. Frequently, when one hears about an advanced practice nurse (APN) or advanced specialty practice, they automatically think nurse practitioner. Few people realize there are four roles of advanced practice nursing: nurse practitioner (NP), certified registered nurse anesthetist (CRNA), certified nurse midwife (CNM), and clinical nurse specialist. CNSs usually specialize in one area of practice such as clinical services (i.e. maternal, mental health, anesthesia), a specific disease-related practice (i.e. cancer, cardiac, lung), patient age population, or specific field of knowledge (i.e. forensic, informatics, infection control, genetics), (Fulton, 2010). The CNS works at 3 different levels: with patient, with nurses in practice and within organization/systems. CNSs are clinical experts, educators, researchers, case managers and manager/administrators. Clinical nurse specialists are movers and shakers, innovative and trained change agents, outcome and solution-driven, trained change agents as they think “outside the box” to solve challenges in health care.

Education of the CNS

The 2013 Indiana State Board of Nursing (ISBN) defines the CNS as an advanced practice nurse who has a current registered nurse license and has completed a master’s degree program offered by an accredited college or university designed to train CNSs. Besides formal instruction in sciences, legal, and ethical training relevant to practice as an APN (ISNA, 2013), a minimum of 500 hours of supervised clinical practice in a specialty role are required.

The CNS is an independent and interdependent advanced practice nurse and member of the health team with a broad scope of to include of prescription authority. That is the CNS, when managing the care of a selected group of patients can help those patients to manage their own care, prescribe necessary medications for their condition, and learn how to look for symptoms that may indicate they need to seek immediate medical help.

Donetta Cluver, RN, MSN, CNS shares her experiences as a Clinical Nurse Specialist:

Q: Why did you choose to pursue the CNS role?

Initially, the idea of research and evidence-based practice were the driving forces that led me toward the CNS role. In addition, the flexibility in the position made it an attractive career path. Over time, it occurred to me that the CNS, put simply, is a nurse who practices at an advanced level. My role as a CNS is to look at nursing and organizational processes, map out the current state, look for areas of variation in care, develop measures and interventions to address those variations, and then implement, evaluate, and put new processes in place to improve the quality of patient care. The patient is always at the center of my work, with a holistic focus on their health. Being a nurse is my passion, and functioning as a nurse –for the nurses –at an advanced level is why I chose to be a CNS.



Q: What practice opportunities do you see in the CNS role?

Given the flexibility of the CNS role, there are many practice opportunities including consultation, teaching, research and evidence-based practice, clinical intervention and direct care, and leadership. The CNS is available to all healthcare staff to assist in developing and implementing care plans for patients with complex needs. A CNS also educates staff about new interventions and developments throughout the organization and motivates staff to engage in change. The CNS utilizes advanced skill set to improve quality and patient outcomes by finding the best evidence to support current practice. The CNS used his/her expertise to improve patient care while role modeling this behavior to nursing staff. As a leader, the CNS focuses on reviewing and revising policies and procedures throughout the system. CNSs collect, analyze, and share data to the health care team from a collective and individual standpoint. The CNS is viewed as mentor and coach to the health team. Frequently physicians and other members of the health care team seek the CNSs in consultation. We know that collaborative partnerships produce best outcomes in a patient focused care environment.

Q: What impact on health outcomes/contributions do you see the CNS can bring to the health care team?

Outcomes are more important than ever during this time with healthcare performance transparency and value based purchasing. When I say I am a CNS, people should automatically think, “what outcomes are you influencing?” These outcomes should align with the organizational goals, and must improve patient experience of care, improve health of populations, and reduce healthcare costs. In a video produced by NACNS (2013), Kathleen Vollman states it well that “CNSs are part of the solution”. This is exactly how I think of my job! The CNS practice revolves around outcomes: patient-related outcomes, nurse-related outcomes, and organization-related outcomes. In this age of value-based care, health care organizations that incorporate the CNS as a leader in the organization will be more effective in delivering the highest quality, safest patient care.

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