This Position Statement was approved by ARNNL Council in 2013 and replaces *Advanced Practice — Clinical Nurse Specialist* (2007).
ARNNL believes that clinical nurse specialists (CNSs) significantly impact the overall quality of health care, and help ensure efficiency and effectiveness within the health care system. CNSs are particularly effective in the planning and delivery of care for clients with complex care needs, implementation of best practices, and providing clinical leadership to nurses. CNSs advance the profession by contributing to the development of nursing knowledge and evidence-based practice, and by promoting excellence in clinical practice (CNA, 2009).

The evidence supports the contribution that CNSs make in transforming the health care system (Bryant-Lukosius, et al., 2010, Kilpatrick, 2011, Lavis, 2011). Clinical nurse specialist roles are underutilized within the Newfoundland and Labrador health care system. ARNNL recommends that employers and government consider the important contribution CNSs can make to improving client outcomes and the health care system, and implement positions for CNSs where this contribution can be realized.

Definition

A clinical nurse specialist is a registered nurse (RN) with graduate preparation and expertise in a clinical specialty such as oncology, women’s health, gerontology, cardiology and mental health. CNSs are one of two advanced nursing practice roles recognized in Canada in accordance with the Canadian Nurses Association’s Advance Nursing Practice: A National Framework (2008). CNSs provide expert clinical care to a specialized client population with complex needs and expert clinical leadership to colleagues. The CNS works in primary, secondary and tertiary care, working collaboratively with interprofessional health care teams providing health promotion, illness prevention, curative, supportive (including palliative) and rehabilitative care. In addition, the CNS provides knowledge and expertise to nursing staff.

Education

A clinical nurse specialist is a registered nurse with a Master of Nursing or equivalent or Doctorate in Nursing. The CNSs practice reflects and demonstrates the characteristics and competencies of advanced nursing practice. It is grounded in the values, knowledge, theories and practice of nursing.

Advanced Practice Roles

The CNS role comprises five interrelated domains: practice, consultation, education, research and leadership. Within a particular CNS practice the emphasis on the various domains is dependent on the needs of the individual client, the population, the practice setting and the health care setting (CNA, 2009).
Practitioner: The CNS provides holistic, client-centred care within the clinical specialty by assessing clients, intervening in complex health care problems, and evaluating outcomes of care. Clients may be individuals, families, groups or communities.

Consultant: The CNS shares knowledge and expertise; and provides consultation to clients, RNs, licensed practical nurses, other health care professionals, health care organizations and policy makers. CNSs are particularly knowledgeable of change theory, program planning and employing strategies to manage unit-based or organization-wide changes that improve the efficiency and effectiveness of client care, thereby ensuring positive outcomes for the client and the health care system.

Leader: The CNS uses evidence, research and best practice guidelines to plan, implement and evaluate changes in clinical practice. The CNS provides clinical leadership by acting as a change agent, source of expert knowledge, facilitator, coordinator, role model, and advocate. The CNS promotes quality care and advances nursing practice through the development of policies, standards of care, and clinical programs and services. Leadership is a key component of the CNS role.

Educator: The CNS promotes a learning environment for clients, families, nurses, students and other health care professionals and evaluates learning. CNSs are experts in their clinical specialty and function as preceptors, mentors, teachers, client educators, planners and evaluators of clinical education. The CNS supports nurses in direct care by providing clinical teaching, promoting evidence-based practice, and providing resources that will meet learning needs.

Researcher: The CNS strengthens the link between research and clinical practice by facilitating others’ understanding and application of research (RNAO, 2004). CNSs are knowledgeable about the research process and lead and participate in identifying research topics and projects. CNSs may be the primary investigator or a member of a research team, stimulating research activities whose results can be applied in clinical practice and public policy.

ARNNL believes that the services provided by CNSs improve access to health care, and alleviate pressures on the health care system by providing clients with expert clinical care and early interventions. The CNS interventions reduce readmission of clients in acute care settings and ensure better client outcomes (Bryant-Lukosius, et al., 2010). Implementation and sustainability of new and current CNSs roles will serve to enhance the health care system.
References


