

April 2005

Resolution Submitted by the Clinical Nurse Specialist Interest Group (CNSIG).

## **Title protection**

**WHEREAS** the Clinical Nurse Specialist (CNS) role has been in existence since the 1960's and forty years later, there still remains confusion amongst nurses, the public and health care administrators as to what the requirements for the role are, and what the scope of practice entails. This is mainly due to a lack of regulation over the use of the title CNS.

**WHEREAS** other professions require a graduate degree in their field in order to be considered a "specialist". For example, an individual with a diploma or baccalaureate degree in psychology and graduate degrees in other fields cannot practice as a psychologist. It is time that Ontario moved towards alleviating some of the confusion, and promoted specialists in nursing through a formal process of credentialing.

**WHEREAS** the United States has specific credentials for CNS'. It is time that Ontario moved towards alleviating some of the confusion, and promoted specialist in nursing through a formal process of credentialing.

**WHEREAS** the Canadian Nurses Association (2002) states that "the minimal educational preparation for ANP [advanced nursing practice] is a graduate degree in nursing". They also state, "a clinical nurse specialist (CNS) is a registered nurse who holds a master's or doctoral degree in nursing with expertise in a clinical nursing specialty". Often nurses without master's degrees or master's degrees in other disciplines practice as clinical nurse specialists. This contributes greatly to the confusion over the role of the clinical nurse specialist.

**THEREFORE BE IT RESOLVED** that RNAO lobby the College of Nurses of Ontario and the Ontario Government for:

1. Protected title of Clinical Nurse Specialist, including standardized education (graduate preparation in nursing and related specialty courses/certificates), an experience requirement and credentialing process.
2. A "grandfathering" process would need to occur for those who have considerable experience as a CNS, and who have a graduate degree in a related field other than nursing.
3. A standardized framework for CNS education at the graduate level.

### **Resolution #3**

#### **Background Information**

As Clinical Nurse Specialists (CNS'), we find there is a great deal of confusion over what the role requirements are, and what preparation is required to be in the role. One of the main reasons that we find for this is the lack of credentialing for the CNS. Currently the title is not protected in the province of Ontario. Title protection for the CNS should be included in provincial statutes. "A statute granting title protection should specify that those who use the CNS title must hold a graduate degree (masters or doctorate) in nursing from a program that prepares CNS'. Lack of title protection can result in misuse of the title by those without graduate preparation as a CNS" (NACNS, 2004). We also need to include specialty education and experience in the requirement for credentialing for CNS'.

We also feel that in order to ease the transition to graduate preparation in nursing as a mandatory requirement, that a "grandfathering" process would need to occur for those who have considerable experience as a CNS, and who have a graduate degree in a related field other than nursing.

We believe that through CNS credentialing, from such means as certification examination, portfolio or other mechanisms, we can achieve standards across CNS practice. As a profession, nurses have an obligation to help nursing evolve, to improve our practice, and recognize our own expertise. We are responsible for assisting to shape the regulations around our own practice.

Recommended Core Content for CNS Education (NACNS, 2004):

- Theoretical foundations for CNS practice.
- Phenomena of concern
- Design and development of innovative nursing interventions
- Clinical inquiry/critical thinking using advanced knowledge.
- Technology, products and devices
- Teaching and coaching
- Influencing change
- Systems thinking
- Leadership for multidisciplinary collaboration
- Consultation theory
- Measurement
- Outcome evaluation methods
- Evidence-based practice and research utilization
- Additional specialty education and practical experiences.

#### References

Canadian Nurses Association (2002). Advanced Nursing Practice: A National Framework. National Association of Clinical Nurse Specialists (2004). Statement on Clinical Nurse Specialist Practice and Education.