

Clinical Nurse Specialists: Guide for Applicants

Revised March 2019



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Introduction

RCH nursing has a vision to standardise the leadership and management of nursing teams. In 2015 we completed the orientation and development guides for Nurse Unit Managers (NUM) and Associate Nurse Unit Managers (ANUM).

The development of the CNS guide in 2016 was the next step in achieving our vision, clarifying the role of the Clinical Nurse Specialist (CNS) as the pinnacle in point of care nursing practice. This guide provides NUM and applicants with clear organisational expectations of the CNS role. In RCH we plan to shine a light on CNS within teams and organisationally. This will occur organisationally in Tuesday@2 ceremonies in May and October of each year. CNS will be publically acknowledged for their success in obtaining the title and presented with a RCH CNS pin.

This guide was initially developed by the Clinical Nurse Specialist Working Group in 2016

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If you have any questions regarding this guide please contact the relevant Director of Clinical Operations

Version 4: March 2019

Application Process

Prior to applying for a CNS role the applicant must consider the following:

- A nurse practising in a specialised field, does not automatically meet the classification of a CNS.
- A nurse practising 'new' or highly technical clinical skills does not automatically meet the classification of CNS.
- A nurse who is able to perform some tasks better than other nurses or all tasks competently does not automatically meet the classification of CNS.
- The terms 'team', 'unit', 'ward', 'department' and 'program' are synonymous.
- Leave without pay does not count towards qualifying length of experience.
- Length of service at RCH does not determine eligibility for CNS.
- Must have a Postgraduate qualification in specific nursing field, twelve months' experience working in clinical area of specific post graduate qualification OR a minimum 4 years' post basic registration experience including 3 years' experience within relevant area of specialty
- Meets criteria in Appendix 9 relating to clinical skill, professional behavior and professional development

It is also essential the applicant is familiar with the RCH CNS position description (Appendix 1).

How to apply:

Eligible Applicants will submit the following to their NUM via mercury and include the following:

- 1. Application form completed via Mercury, including CV and letter of application.
- 2. Completion of the CNS Evidence of Attainment of Standards Tool (Appendix 3).

Interview Process:

- The application will be reviewed by the NUM and if eligible an interview will be organized within 1 week of the closing date.
- The interview panel will consist of the NUM, ANUM or Clinical Nurse Educator/Clinical Support Nurse and one other person, who at RCH is often another NUM

Interview Format:

- The interview will consist of questions relevant to criterion around clinical skills, professional behaviours and professional development as set out in the EBA and provided in Appendix 4 of this document
- The applicant will provide a short presentation detailing a quality initiative appropriate to the unit.

Post interview:

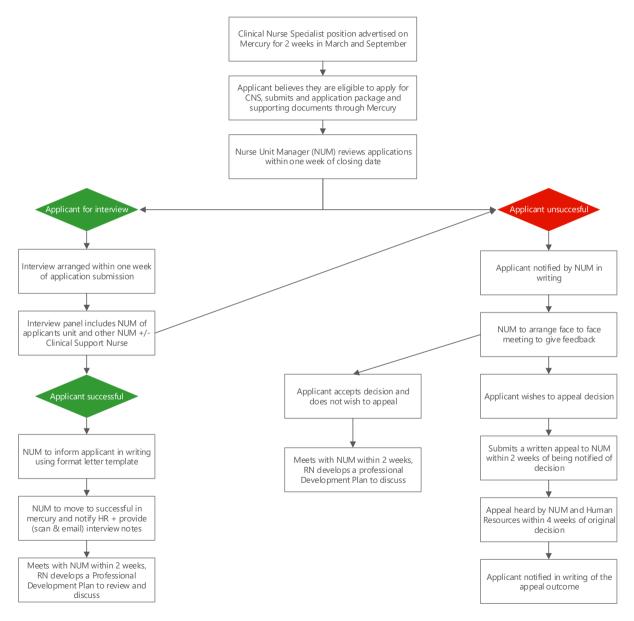
If Successful, the applicant will:

- NUM will move successful candidates to successful box in Mercury within 1 week of interview
- Be notified in writing within 7 days by the NUM
- Meet with their NUM for feedback and professional development planning for the coming year.
- HR will complete a bulk variation to be effective from the next pay period
- Receive a letter of congratulations from the NUM, please copy to HR. An example letter is included in Appendix 3. A word version for personalisation is accessible on the NUM Drive, CNS applications folder
- Be presented with a "CNS" pin at a Nursing Forum

If Unsuccessful, the applicant will:

- Be notified in writing within 7 days
- Meet with their NUM for feedback within 2 weeks
- Be provided with an explanation, based on selection criteria.
- Discuss their application, including setting further objectives, with completion time frames, in preparation for future application.
- If the applicant wishes to appeal the decision, a written submission must be made by the applicant to the NUM within two weeks.
- The appeal will be heard by an independent review panel consisting of a NUM who was not involved in the original decsion, Director of Clinical Operations, a Clinical Nurse Specialist and a Human Resources representative within 4 weeks of original decision. The applicant may seek assistance from the ANMF
- Applicant will be notified in writing of appeal decision.

Flow chart for CNS application process



Appendix 1: RN Position Description

| Position Title | Registered Nurse | • | |
|---------------------|---|-------------------|------------------------------|
| Unit / Branch | | | |
| Classification | Registered Nurse, Year 2 (YP3) – Year 10 (YP11) | Employment Status | Part Time/Full Time, Ongoing |
| Position reports to | Nurse Unit Manager | | |
| Location | The Royal Children's Hospital, Flemington Road, Parkville | | |
| Position Contact | Nurse Unit Manager | | |

The Royal Children's Hospital

The Royal Children's Hospital (RCH) provides secondary and tertiary care to children and young people across the northern and western suburbs; specialist paediatric healthcare to the children of Victoria, Tasmania, southern NSW and parts of South Australia; and is the designated statewide provider of services including paediatric trauma, rehabilitation and forensic medicine. As a quarternary centre for complex cardiac surgery and organ transplantation, the RCH cares for the sickest children from around Australia.

The hospital employs 5,000 staff and has an annual budget of \$620million. It moved to a new, multi-award winning building at 50 Flemington Rd, Parkville.

The Royal Children's Hospital is committed to the safety and wellbeing of all children and young people. Click here for further information on our Commitment to Child Safety: <u>http://www.rch.org.au/quality/child-safety/</u>

The RCH values and pursues innovation, and in April 2016 became the first Australian hospital to implement the world-leading 'Epic' electronic medical record (EMR). The EMR includes an online portal to give families and young people the ability to manage and change appointments, quickly receive test results and renew scripts, and review outpatient notes. The EMR is a major investment in the digital transformation of healthcare: The real-time capture and analysis of data to drive improvements in care, and ultimately achieve better health outcomes for young patients.

Further information on RCH is available at <u>www.rch.org.au</u>

ROLE PURPOSE

A RCH Registered Nurse is responsible for ensuring that clinical practice and delivery of care is consistent with RCH and Nursing and Midwifery Board of Australia standards. You will be responsible for providing comprehensive, safe, evidence-based practice across a range of contexts, to facilitate optimal health outcomes; performing self- assessment of scope of practice and competence related to assigned responsibilities as discussed with the care delivery team; retaining responsibility for individual actions and accountability for care provided.

KEY ACCOUNTABILITIES

Professional Practice

- Fulfil duty of care by practicing within scope of practice in accordance with Australian Nursing & Midwifery Council guidelines
- Integrate nursing health care knowledge and skills to provide safe and effective care
- Utilise patient IT systems to document and record nursing activity

Critical Thinking and Analysis

- Demonstrate analytical skills in assessing and evaluating health information
- Use best available evidence, standards and guidelines to evaluate nursing performance
- Participate in professional development to enhance nursing practice

Provision and Coordination of Care

- Participate in quality improvement activities
- Conduct comprehensive and systematic nursing assessments to improve the quality of nursing care
- Use a range of assessment techniques to collect relevant and accurate data

QUALIFICATIONS AND EXPERIENCE

- Current registration as a Registered Nurse with the Nursing and Midwifery Board of Australia (NMBA) administered though the Australian Health Practitioner Regulation Agency (APHRA)
- Recent experience in an acute, medical, surgical, and/or speciality area of nursing
- Paediatric experience desirable
- Evidence of on-going professional development as reflected in Professional Practice Portfolio

KEY SELECTION CRITERIA

- Well-developed interpersonal and communication skills both written and verbal
- Demonstrated ability to work within a multidisciplinary team and autonomously as required
- Effective time management and organisational skills
- Ability to work well under pressure and be flexible to changing priorities and environment

IMPORTANT INFORMATION

All employees are required to adhere to the Royal Children's Hospital Values:

- Unity We work as a team and in partnership with our communities
- Respect We respect the rights of all and treat people the way we would like them to treat us
- Integrity We believe that how we work is as important as the work we do
- Excellence We are committed to achieving our goals and improving outcomes

RCH COMPACT

All new and existing employees commit to the RCH Compact to contribute to a strong and respectful culture.

- We do better work caring for children and families when we also care for each other
- I actively promote and celebrate our diverse team
- I bring a positive attitude to work I share, I laugh, I enjoy other's company
- I take responsibility for my behaviour and its impact on others
- I am curious and seek out ways to constantly learn and improve
- I celebrate the good stuff, the small stuff, the big stuff it all matters
- I speak up when things aren't right
- I value the many different roles it takes to deliver great patient care
- I actively listen to others, because I want to make the best decision

Potential employees will be required to undertake a National Criminal Record Check and a Working With Children Check.

QUALITY, SAFETY AND IMPROVEMENT

RCH Employees are required to:

- Act in accordance and comply with all relevant Safety and Quality policies and procedures
- Participate in and contribute to quality improvement programs and commit to RCH Values
- Comply with the Requirements of the National Safety & Quality Health Service Standards
- Comply with all relevant clinical and/or competency standards
- Comply with the principles of Patient and Family Centered Care that relate to this position

The RCH is committed to a diverse and inclusive workforce. We encourage applications from Aboriginal and Torres Strait Islander people, all members of the LGBTQI community and people with disability.

| Position description last updated | Feb 2019 |
|-----------------------------------|----------|

Appendix 2: CNS Position Description

| Position Title | Clinical Nurse Specialist | |
|-------------------------------|---------------------------|--|
| Unit / Branch All departments | | |

| Classification | Registered Nurse Grade 2 Clinical Nurse Specialist (YS9) | Employment Status | Full time and Part time: Minimum 0.4 EFT |
|---------------------|---|-------------------|---|
| Position reports to | Nurse Unit Manager | | |
| Location | The Royal Children's Hospital, Flemington Road, Parkville | | |
| Position Contact | Nurse Unit Manager | | |

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The Royal Children's Hospital (RCH) provides secondary and tertiary care to children and young people across the northern and western suburbs; specialist paediatric healthcare to the children of Victoria, Tasmania, southern NSW and parts of South Australia; and is the designated statewide provider of services including paediatric trauma, rehabilitation and forensic medicine. As a quarternary centre for complex cardiac surgery and organ transplantation, the RCH cares for the sickest children from around Australia.

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ROLE PURPOSE

In Victoria, the Clinical Nurse Specialist (CNS) is defined in the EBA as a nurse who "is responsible for clinical nursing duties", therefore is recognised as someone providing direct clinical care. The CNS is a clinical expert in an area of nursing specialisation and accepts responsibility for professional activities that support service delivery and the professional development of self and others.

The CNS classification is made in recognition of a Registered Nurse, who:

- Has developed and continues to maintain a higher level of clinical knowledge, skills, abilities and attributes
- · Actively participates in and contributes to initiatives that have a unit and/or organisational impact
- Undertakes ongoing professional development activities for self and contributes to others' development
- Engages in quality improvement and research activities to improve practice
- Serves as a role model and demonstrates leadership in the specialty

KEY ACCOUNTABILITIES

Direct and Comprehensive Care

- 1. Conduct comprehensive patient assessments including history, physical examination and psychosocial, cultural, and religious factors affecting needs.
- 2. Interpret assessment data to formulate plans of care and proactively initiate care within scope of practice.
- 3. Proficiently perform specialty-specific procedures.
- 4. Assess patient response to treatment and modify plan of care on the basis of response.
- 5. Effectively communicate with patient and family including the sharing of information and education.
- 6. Document appropriately and accurately.
- 7. Facilitate the process of ethical decision making in patient care.
- 8. Coordinate interdisciplinary plan for care of patients.
- 9. Collaborate with other services to optimise the patient's health status.

Support of systems

- 1. Facilitate efficient movement of patients through the RCH.
- 2. Participate in planning for the unit.
- 3. Contribute to the development, implementation, and evaluation of standards of practice, policies, procedures and guidelines.
- 4. Serve as a spokesperson for nursing and the RCH when interacting with other professionals, patients, families, and the public.

Education

- 1. Actively pursue own professional development and maintain a record of continuing professional development
- 2. Take an active role in teaching and enabling others.
- 3. Serve as an informal educator to staff while providing direct care activities.

- 4. Formally serve as a supervisor, preceptor or mentor.
- 5. Take a lead role in unit based education activities.
- 6. Contribute to the development of education resources.

Research and Quality

- 1. Use evidence and integrate theory into practice.
- 2. Participate in audits to monitor and improve patient care.
- 3. Actively contribute to unit quality-improvement initiatives.
- 4. Identify practice problems and utilise resources to address practice issues through research or quality improvement processes.

Professional leadership

- 1. Act as a positive professional role model.
- 2. Represent a professional nursing image.
- 3. Serve as a resource or committee member to groups within the unit or organisation.
- 4. Disseminate nursing knowledge through presentation or publication.

QUALIFICATIONS AND EXPERIENCE

- Current Registration as a Registered Nurse with the Nursing and Midwifery Board of Australia (NMBA) administered through the Australian Health Practitioner Regulation Agency (AHPRA).
- Postgraduate qualification in specific nursing field, twelve months' experience working in clinical area of specific post graduate qualification OR
- Minimum 4 years' post basic registration experience including 3 years' experience within relevant area of specialty
- Evidence of ongoing professional development as reflected in Professional Practice Portfolio

KEY SELECTION CRITERIA

To be successful in the role of CNS, you will be able to demonstrate:

- ability to meet key accountabilities
- well-developed interpersonal skills
- effective working relationships
- flexibility and ability to prioritise workloads
- commitment to ensuring safe, quality care for all patients and their families

ONGOING AGREED CNS FULFILLMENT

CNS is a personal classification that allows an individual CNS or RPN2 to elect at a future date to discontinue fulfilling the higher level CNS criterion and henceforth revert to a non-CNS Grade 2 classification whilst remaining within the current team/ unit.

In cases where it is identified by the manager that an individual CNS has ceased to meet the agreed criteria for CNS classification, the CNS will be given the opportunity to produce evidence of meeting the criteria within a 7 day timeframe. If the CNS is unable to produce evident of meeting the criteria within a 7 day timeframe, the CNS classification will be withdrawn and the individual will revert to the appropriate grade 2 classification.

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| Position description last updated | March 2019 |
|-----------------------------------|------------|

Appendix 3: Clinical Nurse Specialist Evidence of Attainment of Standards Tool

As part of the application process for classification as a Clinical Nurse Specialist (CNS) at the RCH, you are required to present evidence of attainment of the Standards for Practice for CNS that are outlined in the position description under key accountabilities. It is an expectation that you are able to demonstrate a **minimum level of proficiency** as described in Benner's "Novice to Expert". At the proficient level, the nurse

- Takes in the overall picture and identifies the important aspects to focus on.
- Knows what to expect and how to modify plans in atypical situations.
- Applies increased understanding to improved problem solving and decision making.
- Is stimulated to question practice and continuously develop.

You are required to complete the table below and submit it as part of your application. The dot points provided under each domain are prompts only. You should refer to the Key Accountabilities in the CNS position description for more detailed explanation. It is not an expectation that all standards will be addressed in the table, however you should be prepared to speak to any of the standards during the CNS interview. This table will be completed annually as part of the PDAP process as ongoing evidence of meeting the criteria

| DOMAIN | EVIDENCE OF ATTAINMENT AT MINIMUM LEVEL OF PROFICIENCY |
|--|---|
| Direct and Comprehensive Care | |
| Patient assessments Care planning | |
| Care planningCare delivery | |
| Patient communication and education | |
| Documentation | |
| Ethical decision making | |
| Multidisciplinary collaboration | |
| Support of Systems | |
| Patient flow | |
| Planning | |
| GuidelinesSpokesperson | |
| • Spokesperson | |
| Education and | |
| Professional | |
| Development | |
| Continuing professional development Enabling others | |
| Education | |
| Resource development | |
| Research and Quality | |
| Integration of evidence | |
| Questioning practice | |
| Audits, Quality improvement and Research | |
| | |
| Professional Leadership | |
| Role model | |
| Professional nursing image | |
| Committee membership | |
| Knowledge dissemination | |

Appendix 4: Clinical Nurse Specialist Criteria (Nursing Agreement)

Applicants must meet the clinical nurse specialist definition, be employed either full time or part time and demonstrate one criterion in each of paragraphs 1,2 and 3.

1. Clinical Skill

- Higher level of skill demonstrated in clinical decision making in particular in problem identification and solution, and analysis and interpretation of clinical data;
- Maintenance and improvement of clinical standards.

2. Professional Behaviour

- Positive role model;
- Act as a mentor or preceptor to less experienced nurses, including graduate nurses;
- Support of, and contribution to, quality improvement and research projects within the area of practice and ward/unit/department;
- Acting as a resource person to others in relation to clinical practice.

3. Professional Development

- Membership of relevant professional body, and ability to demonstrate and document:
- learning from a journal article, or attendance at a conference or seminar, or reflection
- on seminar or conference papers; or
- participation in effective learning activities relevant to their learning needs; or
- membership of a sub-grouping of the professional association relevant to their area of practice;
- Contribution to the education of other professionals, for example, being willing to provide at least one in-service education program each year;
- Undertaking own planned professional development and competence through various forms of continuing education, for example, conferences, study days, formal study, reading.