Clinical Nurse Specialist: The Clinical Nurse Specialist is an advanced practice registered nurse with clinical expertise in a population foci with specialty expertise. The CNS has a unique APRN role to integrate care across the continuum and through three spheres of impact (influence): patient, nurse, system. The three spheres are overlapping and interrelated but each sphere possesses a distinctive focus. In each of the spheres of impact (influence), the primary goal of the CNS is continuous improvement of patient outcomes and nursing care. Key elements of CNS practice are to create environments through mentoring and system changes that empower nurses to develop caring, evidence-based practices to alleviate patient distress, facilitate ethical decision-making, and respond to diversity. The CNS is responsible and accountable for diagnosis and treatment of health/illness states, disease management, health promotion, and prevention of illness and risk behaviors among individuals, families, groups, and communities. (APRN Joint Dialogue Group Report, July 7, 2008)

Coaching: Skillful guidance and teaching to influence behavioral changes by patients, families and staff to improve outcomes.

Collaboration: A dynamic-interpersonal process in which two or more individuals share responsibility and commit to accomplishing a shared goal through open, honest and trustworthy interactions. (Hansen and Carter, 2014, in Hamric, Hanson, Tracy, and O’Grady)

Competency: A competency is an expected level of performance that integrates knowledge, skills, abilities, and judgment. (ANA. {May 28, 2008}. Professional Role Competence. American Association of Nurses.)

Consultation: Patient, nurse/healthcare professional, or system level problem-focused interactions between a CNS possessing specialized knowledge and expertise, and a consultee seeking expert recommendations.

Direct Care Sphere: Direct interaction with patients, families, and groups of patients to promote health or well-being and improve quality of life. It is characterized by a holistic perspective in the advanced nursing management of health, illness, and disease states.

Diversity: Identifies, acknowledges and respects the unique differences of individuals and integrates this in tailoring the plan of care.

Ethical Decision-Making, Moral Agency and Advocacy: Ethical and advocacy concerns at the patient, family, healthcare professionals, system, community, and public policy levels.

Evidence-Based Practice: A decision-making and/or problem solving process by which evidence, theory, clinical expertise and patient preferences are critically evaluated and considered to provide delivery of

Health Care Policy: Integrating knowledge of regulations, standards, and economics of healthcare to promote positive outcomes across the three spheres.

Leadership: The ability to envision the need for change, influence and enthuse others to create change in clinical practice processes, policies and outcomes both within and across systems.

Nurses and Nursing Practice Sphere: Within this sphere, the CNS advances nursing practice to achieve optimal outcomes by assuring nurses and nursing personnel utilize evidence-based practices to meet the multifaceted needs of patients and/or populations.

Patient: Represents patient, family, health care surrogate, community, and population.

Organization/System Sphere: Within this sphere, the CNS articulates the value of nursing care at the organizational, decision-making level, influences system changes that facilitate improvement of quality cost-effective patient outcomes, and advocates for professional nursing.

Quality Improvement and Safety: Promoting, participating, and planning care services for individuals and populations that are clinically effective, efficient, safe, and outcome driven.

Relationship-centered Communication: A group of communication strategies and behaviors that promote mutuality, shared understandings, and shared decision making in health care encounters. (Koloroutis, M. and Trout, M. (2013). *See Me as a Person: Creating Therapeutic Relationships with Patients and Their Families*)

Research: The work of thorough and systematic inquiry. Includes the search for, interpretation, and use of evidence in clinical practice and quality improvement, as well as active participation in the conduct of research. The generation, and ultimately dissemination, of new knowledge through formal, systematic and rigorous inquiry and methods.

Specialty Competency: CNS specialty practice builds on core competencies and represents an interpretation and integration of the core competencies into the knowledge and skills of the specialty. (K.M. Baldwin, et al. (2007). Developing clinical nurse specialist practice competencies. *Clinical Nurse Specialist*, 21 (6), 297-303.)

Sphere of Impact: A domain or area of CNS practice that reflects the pertinent stakeholders or consumers of CNS services. A particular sphere of impact includes the scope of practice, activities, and parameters of targeted outcomes.

Wellness: Wellness is a subjective experience and is characterized by pleasant sensations and a perception of comfort. It can be experienced in the presence or absence of disease.