The CNS Role at Mission Health

Nurses at Mission Health in western North Carolina now have another avenue to move into advanced practice. With the continued focus on our BIG(GER) Aim, the need for more advanced practice Clinical Nurse Specialists (CNS) has become apparent. The CNS collaborates and consults in the management of complex patient and family care across the continuum of care for acute and/or chronic health conditions.

Two Mission Health nurses who are passionate about their CNS roles are Jeanie Bollinger, MSN, RN, ACCNS-AG, CCRN-CSC, Sepsis CNS, Mission Hospital and Andie Slivinski, MS, RN, ACNS-BC, CEN, Emergency Services CNS, Mission Health.

Jeanie Bollinger, MSN, RN, ACCNS-AG, CCRN-CSC, Sepsis CNS
Jeanie started the Sepsis CNS job in July, 2014. She previously worked as a direct-care RN in the Cardiovascular Intensive Care Unit and served as a leader on a shared-decision making council. When she went back to school for a higher nursing degree, she knew she had the passion to become a CNS. “My main concern was—would this be a role I could do at Mission Hospital?” Jeanie said. She wondered if she and her husband would have to move away to pursue her dream career. She persisted in her studies and landed the CNS job, which was established after she completed her degree.

Through Jeanie’s leadership, there has been a big focus on sepsis in the Mission Hospital Emergency Department (ED). Three pilot units have also implemented computer alerts to bring attention to potential hallmarks of impending sepsis. Education for nursing staff about sepsis was initiated and includes having a heightened awareness of sepsis, the important role of the RN in recognizing signs and symptoms, and the application of evidence-based strategies in treating the patient. New RN graduates and other nursing staff members engage in the simulation lab to learn subtle changes in the patient’s condition and ways to communicate the sense of urgency to the physician.

Jeanie enjoys her role, “because a CNS can influence more than one patient at a time. I can use my knowledge and passion to touch patients, families, and nurses across the system.” She remarked that she enjoys the self-
directed varied work, which requires a perspective of “the 30-thousand foot view to see the big picture then zero in to improve patient outcomes.” Like any CNS, she focuses on evidence-based information and evaluating and interpreting research, then translating the information into patient care.

**Andie Slivinski, MS, RN, ACNS-BC, CEN, Emergency Services CNS.**

Andie started her role at Mission Health in April, 2015. She previously worked at Miami Valley Hospital, Dayton, Ohio, serving as the CNS for three EDs. A nurse since 2001 and a CNS since 2008, she focused her career in the ED. Andie wanted to move to a large city in the mountains and work in a large health system. She and her husband traveled to several states around the U.S. to get a feel for different areas. When they visited Asheville, she said they were both impressed with the region and actually returned to visit the city a second time on the same trip.

Andie loves the BIG(GER) Aim and the focus of purpose it provides. Her job, she said, is “to translate evidence and best practices to care at the bedside to improve patient outcomes and flow.” In addition to working with the staff in Mission Hospital’s ED, she routinely travels to the member hospital EDs at Angel Medical Center, Blue Ridge Regional Hospital, McDowell Hospital, Transylvania Regional Hospital and Highlands-Cashiers Hospital. She remarked that the unique aspect of this CNS role is making that practice translation across six different hospitals in varied geographical regions with different needs and resources.

Andie has spent time at the member hospital EDs working at the bedside to get to know the staff and meeting with each hospital’s leaders to discuss their needs. She said the member EDs are “doing great innovative things.” Building relationships is important to her, because it facilitates working together and developing ways to improve patient outcomes.

She commented that the CNS has been around for decades; then it went out of vogue in the 1990’s. Now with the increasing focus on outcomes and quality by the Center for Medicare and Medicaid Services, the CNS role is making a comeback. Andie decided to become a CNS instead of a Nurse Practitioner, because “I love to figure out things, get to the root of problems and determine how to make changes to improve outcomes.”

Mission Hospital’s Vice President and Chief Nursing Officer Karen Olsen, MBA, BSN, RN, NE-BC, said “Clinical Nurse Specialists are valuable assets to our patients and families and our healthcare team. Their work incorporates evidence-based practice to improve patient outcomes. The work of our CNS in the early recognition of sepsis and standardization of treatment has already made a dramatic difference for our patients. Our focus on patients and families propels us to continually evaluate new care models, such as the role of the CNS.”

Read more on the next page about the CNS role across the U.S.
Details about the CNS Role across the U.S.  
2014 Clinical Nurse Specialists Census

The first national census of Clinical Nurse Specialists was conducted in 2014 by the National Association of Clinical Nurse Specialists (NACNS).

- Open this link to read the two-page 2014 Clinical Nurse Specialists Census about CNS:
  - Practice areas and duties,
  - Employment,
  - Education,
  - Reimbursement,
  - Prescriptive authority, and
  - Demographics.
- To read more about the NACNS, open this link.

*CNSs provide direct patient care and lead initiatives to improve care and clinical outcomes, and reduce costs.*

*Photos by Cherry Odom, BSN, RN-BC*