District and Community Nursing Resources

NZNO Library Resource Guide

Nurse Maude District Nursing Association, Christchurch, 1914

Nurse Maude, Sibylla Emily Maude (1862-1935) was a pioneer of home-care nursing. Sibylla Emily Maude became famous in Christchurch for her efforts to provide care for poor and elderly people throughout Canterbury. This link describes her life and career, and her legacy through the Nurse Maude District Nursing Association.

The NZNO library has prepared a list of resources for members about district and community nursing, available either for direct download or to borrow from the library:

REPORTS


Rushcliffe Multispecialty Community Provider (MCP) have implemented a pilot scheme, focusing on the gaps and overlaps between Community/District Nursing and General Practice Nursing, in which four new nursing appointments were implemented for a 12-month training and development opportunity where they took part in mixed General Practice Nursing and Community Nursing roles and training.


District nursing services play an important role in helping people to maintain their independence by supporting them to manage long-term conditions and treating acute illnesses — and demand for such services is increasing.


Identifies 65 separate district nursing services offering a wide range of home, clinic, and community-based health-care services, usually seven days a week, for which the prevention of hospital admissions and enabling early discharge are the focus of the services.


Highlights the range of creative and responsive district nursing service delivery models. Delves into four case studies demonstrating how district nurses provide care to help patients make the transition between hospital and home. Opportunities and challenges for developing district nursing are identified: governance, leadership, clinical outcomes, information sharing, and advancing scope of practice.

Focusing on registered nurses, articulates what is expected in the specialty and outlines a career pathway in primary health care nursing, which refers to the practice of nurses who provide care in the community in a variety of roles and settings.


The District Nursing Knowledge and Skills Programme (DNKSP) has been developed by the New Zealand Nurses’ Organisation (NZNO), College of Primary Health Care Nurses (CPhCN) in partnership with MidCentral District Health Board Health Care Development Team and District Nursing Service, and a wide range of community nurses working in specialty areas. The programme draws on the content from a range of other programmes including the National Diabetes, Respiratory, Pain Management, Youth Health and Nephrology Nursing Knowledge and Skills Frameworks and the NZNO Cancer Nurses’ Section competencies as well as aligning with the Nursing Council of New Zealand (NCNZ) competencies. The result is a programme that illustrates the continuum of learning required to develop from a generalist nurse to a level two nurse within the specialty practice area of District Nursing.


Sets out the essential elements for a quality home-based district nursing service within a variety of settings, which is consistently high quality, accessible, equitable, efficient and effective, while complementing and assisting both primary and secondary services.


Aligns with the Generic Competencies for Public Health in Aotearoa-New Zealand, also released by the Public Health Association (PHA), in 2007, the Nursing Council of New Zealand’s Competencies for Registered Nurses and a range of other significant public health resources.


Written by Queen’s Nurse Candice Pellett OBE and funded by the Department of Health, based on a series of focus groups with Queen’s Nurses, nurse educators and students, an online survey, as well and literature search and data analysis to demonstrate the value of the Specialist Practitioner Qualification (SPQ) in District Nursing.


Independent survey of district and community nurses to inform those organisations and leaders with responsibility for designing and commissioning health services, to prioritise building capacity and support the district nursing workforce and services.


RCN has worked closely with nursing organisations in Canada, Australia, Norway, Sweden and Denmark to learn from their experiences relating to shift. Sets out the current policies and initiative in these countries to move care closer to home; outlines the impact of these reforms on the nursing workforce; offers recommendations for key stakeholders in the UK.

Prepared by the NZNO library – November 2019
WEBSITES

New Zealand College of Primary Health Care Nurses NZNO
The College was officially formed on the 25 June 2010. Comprises members from the former District Nurses Section (NZNO), Public Health Nurses Section (NZNO) and NZ College of Practice Nurses (NZNO).

The New Zealand Institute of Community Health Care
http://www.nzichc.org.nz/
Manages research and development projects that contribute directly to improvements in health care for the community.

Nurse Maude
https://nursemaude.org.nz/
Describes the current nursing services offered by the organisation in Canterbury, Nelson/Marlborough and Wellington 120 years after its foundation.

BOOKS


NZ JOURNALS

L.O.G.I.C.: The official journal of the New Zealand College of Primary Health Care Nurses, NZNO
https://www.nzno.org.nz/groups/colleges_sections/colleges/college_of_primary_health_care_nurses/logic_journal
Published four times per year in March, June, September and December, it replaced The Practice Nurse in 2016.

Journal of Primary Health Care
https://www.publish.csiro.au/hc/content
Published on behalf of The Royal New Zealand College of General Practitioners (RNZCGP).
Encompasses general practice, primary health care nursing and community pharmacy. Includes papers on: Māori, Pacific and Asian health issues; epidemiology, health-care delivery; health promotion; public health; medical sociology of interest to a primary health-care provider audience.

INTERNATIONAL JOURNAL ARTICLES

https://bmjopen.bmj.com/content/bmjopen/8/6/e021931.full.pdf
This social enterprise organisation uses a patient-centred model of care combined with self-managing teams of visiting nurses. A central tenet has been ‘humanity over bureaucracy’, that is, giving authority and responsibility to the frontline nurses supported by small functional back office support without creating tiers of management and associated expensive overheads such as offices.

Emphasises the paradox of health policies that promote more care within and closer to home and the reported decline in district nursing services. Using the lens of workforce development theory, an explanatory framework is offered, identifying factors such as the nature of the nursing labour market, human resource practices, career advancement opportunities as well as the contractual context, and the economic environment.


https://journals.plos.org/plosone/article/file?id=10.1371/journal.pone.0211160&type=printable

Community nursing and midwifery is changing in response to a shift in care from hospital to home, brought about by increasing costs to care because of an aging population and increasing chronicity. Until now, community nursing positions and scope of practice has been dependent on service focus and location, which has led to the role being unclearly defined.


https://doi.org/10.1016/j.nepr.2019.05.004

Given the current learning outcomes for clinical practice education at the postgraduate level, district nurses need to be more influenced by preception focused on reflective learning.


Investigate the views and experiences of community-dwelling older adults on their participation in a nurse-led intervention, taking into account their views on healthy aging.


https://journals.lww.com/ajnonline/Fulltext/2019/07000/Rising_to_the_Challenge__Re_Embracing_the_Wald.aspx

As care begins to decentralize, returning to homes and communities, it is much more difficult to ignore the social, economic, and physical conditions of health. In this context, nurses have a historic opportunity to reclaim and expand their original vision of nursing practice grounded in a holistic focus on patients in the context of their full psychosocial well-being as members of families, workplaces, and communities.


https://doi.org/10.1371/journal.pone.0216488

Older people with frailty (OPF) can experience reduced quality of care and adverse outcomes due to poorly coordinated and fragmented care, making this patient population a key target group for integrated care.

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Contact us: library@nzno.org.nz