Running head: COMMUNITY NURSING

Community Nursing in Australia

Name of the Student

Name of the University

Community Nursing in Australia

In this assignment, an assay will be made to explain the concept of community nursing and the various strategies for implementing these skills will be examined. In addition, the principles of primary health care will be discussed. Furthermore, the opinions of Florence Nightingale regarding health care and the nursing profession will be assessed. Withal the Nurses Amendment (Nurse Practitioners) Act 1988 will also be reviewed. Finally, the extant position regarding community nursing will be analyzed.

The concept of community health nursing was introduced in the 1970s and it encompasses the earlier systems of district and public health nursing, which had been in existence from the 1800s. Since its very inception, Australian nursing had been principally restricted to hospital health care. The conclusion to be drawn was that the education and organization of Australian nursing had been concentrated on illness, which had been conferred greater importance than community health nursing (Keleher, Community Nursing Practice: Theory, Skills and Issues, 2006. P. 59 -60).

Community nursing denotes nursing care that does not take place in hospitals. Community nurses have to work with a wide array of clients, philosophies and objectives. Further, these nurses are given different labels like child health nurses, community health nurses and domiciliary nurses. In one survey it disclosed that nearly three hundred different labels were used for describing the work done by community nurses in different areas of work in Victoria (Keleher, Community Nursing Practice: Theory, Skills and Issues, 2006. P. 4).

Nurses are essential for primary health care. However, the reality is that social challenges have not been met by nurses, whose role in such endeavours has been minimal. Moreover, the majority of the nurses do not adhere to the guidelines prescribed by primary health care. Further, it is essential for them to comprehend the relationship between primary health care and the nursing profession (Blackie, M, & Blackie, 1998. P. 12).

The amount of control with regard to the delivery of care determines the extent of a nurse's effectiveness in obtaining results for which they are responsible (Hoffart & Woods, 1996). Accordingly, the existing models of professional practice ensure that they consider the autonomy and accountability requirements of nurses. In addition, such models have a very important bearing on providing organizational empowerment to nurses and in the establishment of work teams that are effective (Laschinger, Havens, & Havens, 1996. Pp. 177 - 186. 5th Edition).

The World Health Organization considers primary health care to be a means of enabling individuals to attain the best possible health. Nurses, due to their contribution to primary health care, play a major role in furthering the social and economic well being of the community. Moreover, nurses work in conditions where medical standards have greater importance. This multifaceted task makes the profession of nursing as an invaluable component of the health care system (Nurses' role in advancing primary health care: a call to action, 2004). From the perspective of primary health care, it is imperative for nurses to permit clients to exercise greater control over the personal, social and political aspects of health. Moreover, nursing is crucial for bettering the health of the people and in this all important task the involvement of clients is essential. Accordingly, nurses have to modify their current practice so as to incorporate this all important concept. Moreover, this approach has to receive the support of health care management, because of the fact that health care practice is governed to a major extent by structures established by it (Davis, 1999. Pp. 136 - 138).

In order to improve primary health care it is essential for nurses to bestow greater attention to preventing illness and the promotion of health, instead of focusing on the treatment of diseases. Thus it becomes evident that the primary objective of health care is to promote the health of the populace. In this context, health denotes the overall well being of the people and not merely an absence of disease (Besner, October, 2004).

An example of community nursing is provided by psychiatric treatment. Previously psychiatric patients had to be admitted in hospitals, where nurses would provide medication and health care, however, the present day community nursing provides treatment at the patient's dwelling. This has transformed the community nurse's role from that of a sentinel to that of an independent provider of health care (Gillam & Gillam, 2002. P. 2).

According to Florence Nightingale, the concept of health does not accept the idea of illness. In her book *Notes on Nursing*, Nightingale held that women who cared for others and who lacked medical knowledge were to be found only in the

nursing profession. In her earlier works, Nightingale was of the opinion that nurses did not require medical knowledge. However, she was forced to change her views on this issue due to the advent of the germ theory, which revolutionized the nursing profession. Nightingale was of the opinion that nursing and health care were synonymous and that nursing knowledge differed from medical knowledge. According to Nightingale, nursing profession helps people by providing hygienic conditions with gentle care, which was instrumental in helping them to recover their health (Lundy & Janes, Community Health Nursing: Caring for the Public's Health, 2001. P. 261).

It was the considered opinion of the National Health Workforce Strategic Framework that it would be difficult to maintain health services if the extant models of practice were left unchanged. Their contention was that there was an urgent need for health services and professions to better understand the effect that they have in providing health services. This is especially true in the case of rural areas in Australia and there is vast scope for modifying extant nursing practices, so as to provide better health care facilities. The National Health Workforce Strategic Framework constitutes a comprehensive national policy in health care (National Health Workforce Strategic Framework , 2004).

The Royal District Nursing Service was established in order to aid the frail and the elderly. The strategy adopted is to utilize nurses or other staff to attend to the patients. In addition, expert nursing advice is made available to the patients and this has transformed it into an invaluable institution in respect of bettering the health and results (case study Royal District Nursing Service, 2005). In the year 1998 a joint project was undertaken by Queensland Health and Queensland Education, which was christened as the School Based Youth Health Nurse or SBYHN program. This project entails collaboration between students, school staff and parents with nurses in order to deal with problems relating to health (Barnes, Walsh, Courtney, & Dowd, 2004).

One of the main functions of the SBHYN is to facilitate the provision of suitable health services to young people. This function assumes great significance in the rural and remote areas, which suffer from a scarcity of health care professionals (Barnes, Courtney, Pratt, & Walsh, 2004).

An important development in Australian nursing was the promulgation of the Nurses Amendment (Nurse Practitioners) Act 1998 by New South Wales. Withal, the efficacy of combining forces with medical practitioners was considered and the questions of successfully dealing with the problems of primary prevention, provision of adequate mental health services that conform to the national objectives in this regard and establishing a mechanism for early intervention were discussed at length (Fishcer, December, 2005).

In Australia the problem of providing community nursing services has been deteriorating. The current perspective on health care, which focuses on the promotion of health, prevention of illness, detection at the incipient stage and intervention has only served to make the community nurses job more difficult and tension prone. At this stage it is imperative to confirm their observations, because this would encourage them to participate enthusiastically in the development of health care (Kemp, Harris, & Comino, 2005). Concomitantly, with changes to communities there has been a change in community nursing. Graduate nurses are trained to perform in different health organizations. Moreover, community health care nurses cater to the health needs of society. Furthermore, community health nursing is now an intricate system that has to perpetually countenance the effects of swiftly changing health care delivery systems, however, health care has risen to the occasion and provided outstanding service to the destitute, female HIV positive patients and sick school children. Thus, community health care nurses have to possess knowledge about the health care system, tendencies in society, financial aspects of the health care system and the health care culture, in order to provide efficient medical care to the public (Lundy & Janes, Essentials of Comunity - based Nursing, 2003 .P.5).

After analysing the facts relating to community nursing, we can conclude that the present day community health care nurse has departed to a great extent from the traditional nurse. It can also be surmised that community nurses have to address a variety of ailments and social problems and they are no longer mere custodians of the health of the patients. On several occasions community nurses have been compelled to take decisions on their own regarding the well being of their patients. Accordingly, irrespective of the place of their work, be it a school, a patient's home, a rural community, etc, community nurses have to discharge their duties to the best of their ability and they have to make all out efforts to satisfy the needs of the community.

References

- Barnes, M., Courtney, M., Pratt, J., & Walsh, A. (2004). School-Based Youth Health
 Nurses:Roles, Responsiblities, Challenges, and Rewards. *Public Health Nursing* , Vol. 21, Iss. 4, Pp. 316 322.
- Barnes, M., Walsh, A. M., Courtney, M. D., & Dowd, T. (2004). School based youth health nurses' role in assisting young people access health services in provincial, rural and remote areas of Queensland, Australia . *Rural and Remote Health*, Vol. 4, Iss. 4, P. 279.
- Besner, J. (October, 2004). Nurses' role in advancing primary health care: a call to action. *Cambridge Journals*, Vol. 5, Iss. 4.
- Blackie, C., M, F., & Blackie, A. (1998. P. 12). *Community Health Care Nursing.* Elsevier Health Sciences.
- case study Royal District Nursing Service. (2005). Retrieved September 29, 2007, from Zeacom: http://www.zeacom.com/customers/success_stories/Royal_District_Nursing Service zcc.pdf
- Davis, S. (1999. Pp. 136 138). *Rahabilitation Nursing: Foundation for Practice.* Elsevier Health Sciences .
- Fishcer, J. (December, 2005). Mental Health Nurse Practitioners In Australia:
 Improving Access to Quality Mental Health Care. Int J Mental Health Nurs,
 Vol. 14, Iss. 4, Pp. 222-229.
- Gillam, T., & Gillam, A. R. (2002. P. 2). *Reflections on Community Psychiatric Nursing*. Routledge.
- Hoffart, N., & Woods, C. Q. (1996). Elements of a Nursing Professional Practice Model . *Journal of Professional Nursing*, Vol. 12, Iss. 6, P. 354.
- Keleher, H. (2006. P. 4). *Community Nursing Practice: Theory, Skills and Issues*. Allen & Unwin.

- Keleher, H. (2006. P. 59 60). *Community Nursing Practice: Theory, Skills and Issues.* Allen & Unwin.
- Kemp, L. A., Harris, E., & Comino, E. J. (2005). Changes in community nursing in
 Australia: 1995-2000. *Journal of Advanced Nursing*, Vol. 49, Iss. 3, Pp. 307–314.
- Laschinger, S., Havens, H. K., & Havens, D. S. (1996. Pp. 177 186. 5th Edition). Staff
 Nurse Work Empowerment and Perceived Control Over Nursing Practice . *E.C. Hein, ed., Contemporary Leadership Behavior: Selected Readings*. New York:
 Lippincott.
- Lundy, K. S., & Janes, S. (2001. P. 261). *Community Health Nursing: Caring for the Public's Health.* Jones & Bartlett.
- Lundy, K. S., & Janes, S. (2003 .P.5). *Essentials of Comunity based Nursing*. Jones and Bartlett.

National Health Workforce Strategic Framework . (2004, April). Retrieved September 29, 2007, from Australian Health Ministers' Conference: http://www.health.nsw.gov.au/amwac/pdf/NHW_stratfwork_AHMC_2004.p df

Nurses' role in advancing primary health care: a call to action. (2004). *Primary Health Care Research and Development*, Vol. 5, Iss. 4, Pp. 351 - 358.