

A day in the life of a District Nurse

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Hi, I'm Sue and I'm a part time Registered Nurse working in the Northern Public Program. I work on some weekdays and alternate weekends. This suits me down to the ground as I can pursue my other interest in training and education outside of RDNS.

Some of my colleagues work full time and some part time. Most of us start at 8am but we have an early start shift (0730) and a later start shift (0900) to cover the early morning and tea time medications.

My weekday round includes a group of the east/north-eastern suburbs, and my weekend round skims along the beaches.

I start straight from home because it's closer to my clients than the office is! I have an RDNS fax machine at home so my visit information can be faxed to me the night before. Then in the morning I get organised and charge off into the wild blue yonder in my Corolla. The fresh air and sunshine (most days) is fantastic.

At the end of the day I return to the office, usually spending about 15 - 30 minutes organising my worksheet, collecting stock, speaking to my supervisor, Associate Clinical Services Coordinator (ACSC), or arranging any additional help. For instance I may need advice from the palliative care specialist nurse for my terminal clients, speak with my Clinical Service Coordinator (CSC) about a client with a difficult wound I'm due to visit tomorrow.

A typical day will see me ordering supplies through the Customer Service Representatives, changing client's schedules, contacting doctors, leaving messages for case managers at Domiciliary Care about a client we share, rearranging the round schedules to even out the workload and sometimes contacting the RDNS Call Centre (e.g. for information about a new drug one of my client's has been prescribed.) There is often an admission scheduled later in the day for a new client. The end of the day back in the office is a good time to debrief, review and organise my work for the next day, and attend an education session.

The weekends are slightly different in structure as we cover essential services only. I usually visit a number of clients for medication administration for the first half of the morning. These clients usually need our care, seven days a week to be able to remain at home safely and it's great that we can provide the care to allow them to do so. From mid morning, I visit my other clients providing palliative care and wound care.

Week days have a combination of these essential services and comprehensive client care which includes: organising services with Domiciliary Care and other healthcare agencies, admissions and assessments, care planning, client advocacy, counselling, liaison and review by specialist RDNS staff for my clients with complex wound care, palliative care, continence care, diabetes management, disabilities and mental health or behavioural issues.

I really enjoy the variety of clients and health conditions that I am challenged with (and the fact that fabulous support and assistance is there for me, if I need it). I may see anywhere from 5 to 18 clients in a day depending on what level of care is required. I've had some clients who have care requirements which have only taken 15 minutes and others that have needed 1½ hours.

Some days go exactly as they should on paper. Other days, despite all planning and good intentions, the course of human nature and changes to clients' health status impact on the whole round. What started out as a medication visit has the potential to turn into an exercise of managing services to deal with a crisis situation, e.g. a client falling in their home. If I do come across an unexpected situation I can always contact my ACSC or CSC, my team mates or the Call Centre for advice and assistance.

Probably the biggest part of the transition from acute/aged care nursing to District Nursing is the increased level of autonomy to do my job and the relationship that develops with the client in getting to know them as a whole person. I feel really lucky to have found a job where I can make such a difference to people's lives and really use and develop my nursing skills and knowledge.

Although it sometimes feels like I'm brushing through people's lives at a rapid pace, I am reminded that my clients receive just as much care from me as being in a facility (i.e. hospital or nursing home) it's just more concentrated. The big bonus is that I am giving individual quality time, the client has the opportunity to maintain a level of control and independence in their lives, and as their nurse, I can work with my client to deal with the issues straight away at the time of my visit.

I can honestly say I have had more job satisfaction in the last 3 months than I have had in the last 5 years before I joined RDNS.

Sue
Registered Nurse

A day in the life of a Contact Centre Nurse:

My name is Angela and I am a Clinical Nurse within the RDNS 24 hour contact centre (called RDNS Direct) which is based at Glenside. I work full time, five days a week with no weekend work. Currently I start at 0700, 0800 or 0900, however, there are a variety of start times and shifts, with people working part time, weekends and after hours.

Most of my day I manage the referrals received by RDNS for both our public programs and Focus Healthcare (our private arm). Following up with GP's, hospitals and any other referral source to ensure that the information they have provided is accurate, and referral is appropriate. I complete assessments and assist in problem solving with other staff members to provide the best possible care for our clients. I also provide nursing advice to clients regarding issues such as wound care, catheter care, diabetes care and general nursing advice.

There are approximately five nurses in the Contact Centre during business hours, including Clinical Nurses and a Clinical Service Coordinator. We are currently helping to implement the Tele-Health Program which enables some client's visits to be performed using a video phone rather than face-to-face. These "Virtual Visits" are usually to assist clients in taking their medications and doing this frees up our field nurses to spend more time visiting complex clients. We are continually assessing current and new client's suitability for this program.

We have three after hours teams which cover weekends, evening and night shifts, After hours and at night, there is at least one nurse and one administration officer at all times.

Coming into the Contact Centre from working as a field nurse six months ago, I experienced a significant change in my working life. The biggest challenge was adjusting to assessing clients over the phone, without having the opportunity to use my hands on skills (e.g. touch, smell and vision) to assist my decision making. I have found my listening and questioning skills have really improved and I am more confident in my assessment skills. Every day is different, whether you are providing health advice or setting up a nursing service for a client, the work is never boring.

The other good thing about contact centre nursing is that it can suit nurses with a variety of experience, such as those from public or private hospitals, midwives, triaging nurses in emergency departments. I believe what makes us such a good team is the variety of skills pooled together to provide the most comprehensive care possible.

For me the best parts of this job are everyone's positive attitude, the variety of the work performed and the fun we have at work. I enjoy coming to work as there is such an enthusiastic atmosphere and team spirit within the centre. We even have a fundraiser which we donate to various charities.

I enjoy the feeling of satisfaction I get from providing the best possible care to a variety of individuals in need.

Angela Graham
Clinical Nurse
RDNS Direct