**NURSING AND THE COMMUNITY**

**Community Practice Portfolio**

1. Describe what type of health services your practice setting provides and the typical patient/client population using this service (500 words). Include artefacts (i.e. photos of the venue entrance, scanned brochures, short videos, voice files etc.).

Improving and Promoting Community (IPC) Health is a community health service which is based locally in Victoria, Australia. IPC Health has six campuses throughout Melbourne’s western suburbs located in Deer Park, Hobsons Bay, Hoppers Crossing, St Albans, Sunshine and Wyndham. The main purpose of IPC Health is to provide opportunity and connections to allied health services for the community of Melbourne’s Western suburbs as well as make the highest quality primary health care accessible to all within the west and help communities be healthy and well. IPC Health brings value to those in the community as it is close to their homes with the delivery of culturally relevant care and the goal to keep patients out of hospital or other high acuity services (Improving and Promoting Community Health, 2017).

IPC Health offers a diverse range of services for the community (Artefact 1 Pamphlets), such as general medical and dental services, Home-based Aged Care, Family Services case management, alcohol and drug counselling, Gambler’s Help counselling, Generalist counselling, financial counselling, Acquired Brain Injury (ABI) case management and ABI community-based recreational programs, Allied health therapy services and Health promotion.

On community placement at the Deer Park campus (Artefact 2 IPC Health Entrance – Deer Park Campus), the health services which were accessible to the community were general practitioners, nurse practitioner, clinical nurses, counselling for family and indigenous health. The campus also offered Allied health services such as occupational therapy, physiotherapy, podiatry, social work, speech therapy, and audiology. Furthermore, IPC Health Deer Park campus provided Child, Youth and family services such as the Healthy Mothers Healthy Babies (HMHB) which aims to help pregnant women who require extra support and information during their pregnancy about nutrition, exercise, mental health, family violence, emotional support, information when bringing their newborn home, as well as financial problems. This campus provided services specifically to the patients who were part of the older population and had disability with the Acquired Brain Injury management as well as Chronic condition services which is presented in the living well program which offers diabetes education and early intervention of chronic disease for aged people and children. Other services offered at IPC Health Deer Park campus are health promotion, needle exchange, and Self-help and support.

The health services offered at the IPC Health Deer Park campus are all in relation to the general population of patients which attended the clinic. The client and patient population who utilise the services are the elderly with most being in the age bracket of sixty-five and older, young children under the age of seventeen, new mothers, and people with chronic conditions such as heart disease and diabetes.

Improving and Promoting Community Health is a community health organisation which endeavours to provide quality care to the community of Melbourne’s western suburbs. Due to the various locations for IPC Health services, the community of the west are able to access services in healthcare. IPC Health supports the community through creating an availability of services in healthcare in cohesion with a variety of Allied Health services and programs to better promote community health.

2. Explain the roles and responsibilities of the nurse in the practice setting you have attended and compare your observations to the roles and responsibilities described in the literature (1000 words).

Practice Nursing is an area of nursing centred around the primary care activities that are common in general practice with a major focus on prevention, patient education, and chronic disease management (McMurray & Clendon, 2015). Practice nurses have a central role in managing chronic disease, facilitating lifestyle risk factor modification, supporting acute health issues across a patient’s lifespan, and bridging the gap between patient and health services (McCarthy, Cornally, Moran, 2012). On clinical placement at Improving and Promoting Community (IPC) Health, Deer Park campus, there was a general practice nurse available to patients. The practice nurse provided education during patient interactions. Furthermore, the nurse had the responsibility of managing chronic disease. Additionally, the nurse collaborated with general practitioners. Lastly, the nurse aided in the support in the prevention of disease in the community.

The roles and responsibilities of a practice nurse is to educate and connect patients for the betterment of their health. A practice nurse has a unique position in the community as they have daily interactions with patients and develop a therapeutic relationship, according to the journal article by Young, Eley, Patterson, and Turner (2016), the nurse’s role as an educator created an environment that was therapeutic for patients which allowed them to be encouraged and self-motivated to be proactive in caring for their health. The study also outlined the main advantage that practice nurses had over general practitioners, as patients found that practice nurses were more attentive and would take time to discuss thoroughly issues of concern. On clinical placement it was observed that the practice nurse had created therapeutic relationships with most patients which provided the opportunity for them to be educated, taking time to provide them with information to ensure that they would comply with their treatment when at home and would have the ability to book for follow up appointments for continuity of care. Additionally, due to the setting of the workplace and sharing of patients, a practice nurse is able to closely collaborate with general practitioners.

Part of the role for a practice nurses is to collaborate closely with general practitioners to provide high quality care for patients. Due to practice nurses being an independent health profession with the opportunity to add value to the delivery of care for patients, collaboration between general practitioners and practice nurses is essential as collaboration optimises patient care (Lane, Halcomb, McKenna, Zwar, Naccarella, Davies & Russel G, 2016). The recent study by McInnis, Halcomb, Peters and Bonney (2017), expanded on collaboration in general practice between practice nurses and general practitioners. The study discussed that practice nurses were able to collaborate with general practitioners with an example of the delivery of adequate wound care and assessment. While on clinical placement, the practice nurse was able to easily communicate to the general practitioner who shared the same patient and together were able thoroughly assess the wound and decided on appropriate wound dressings. Furthermore, due to the interactions between the practice nurse and general practitioner the patient received a script of antibiotics to treat infection in the wound. With a professional relationship established with the practice nurse and general practitioner, they were both able to assist each other in providing optimal care for the patient, maximising their opportunity for recovery. Additionally, practice nurses are able to see patients daily who require support and manage a patient’s chronic disease.

Practice nurses provide chronic disease management for patients in the community. As the presentation of patients with chronic disease increases, practice nurses have the ability to be care coordinators and guide patients through the management of their chronic health disease. The journal article by Fuller, Koehne, Verrall, Szabo, Bollen and Parker (2015), outlines the scope in which practice nurses have the ability to care primarily for patients with chronic disease such as diabetes, coronary heart disease, asthma, chronic obstructive pulmonary disease, and mental health. It was described that the nurse was trained and worked in a primary care position for patients with chronic disease, the practice nurse would collaborate with patients in creating a care plan to manage their chronic disease as well as direct patients to appropriate sources of information through appropriate referrals. During clinical placement, the practice nurse held a primary care position when caring for patients with chronic disease such as diabetes and asthma, the practice nurse was observed to create care plans with patients and identify appropriate referrals to other health care professionals to increase the patients support in managing their chronic disease. Practice nurses are also proficient in caring for patients who present with acute health issues.

Practice nurses often have the role to provide prevention of disease in their practice setting. The benefits of disease prevention such as educating and administering immunisations are important to protecting the community from past and emerging communicable disease (Marston, Folkers, Morens. & Fauci, 2014). The study presented by Halcomb and Hickman (2016), elaborates on the importance of immunisation and the role practice nurses have in ensuring that patients are immunised. In the study, it was emphasised that the nurse must have sufficient knowledge of immunisations to provide appropriate education and intervention for the patient. While on clinical placement, the nurse was observed to educate patients thoroughly in immunisations as well as ensured that their immunisation history was up to date, the nurse educated patients regularly with emphasis for the elderly as they were informed about shingles and the free vaccine for patients over the age of seventy.

Due to the setting of general practice within a community, practice nurses are able to provide primary care for patients. The roles and responsibilities of the practice nurse as described in the literature parallels to what has been observed and experienced on clinical placement, the practice nurse on clinical placement at IPC Health fulfilled all the duties and roles within their scope of practice. The practice nurse provided education to patients daily, collaborated with general practitioners, guided patients in the management of chronic diseases through creating care plans, and lastly maintained the prevention of disease through immunisations.

3. Find out how the practice setting you have attended supports LGBTI persons (seek guidance from your buddy nurse). Compare findings with the current recommendations from the literature (1000 words). Include artefacts (i.e. relevant policies, brochures, pictures of posters, short videos or voice files etc.)

Support for Lesbian, Gay, Bisexual, Transgender, and Intersex (LGBTI) people has been widely reported as inadequate in healthcare, this presents as a problem due to the complex health determinates the LGBTI community face which result in a poor quality of life and health outcomes (Skerrett, Kõlves, & De Leo, 2015). Healthcare support for the LGBTI community is important in Australia as there is a rise in recognition for this community and their health determinants. On clinical placement at Improving and Promoting Community (IPC) Health, support for the LGBTI community are in development, the practice nurse described that staff had been educated about the LGBTI community and their needs in healthcare. The increase in recognition as a minority group has been effective in moving healthcare into developing support networks as well as providing specific programs to aid LGBTI members in treating and caring for their health determinants. Mental health issues in the LGBTI community is a leading health determinant experienced which requires support. Furthermore, health and disease promotion specific to the LGBTI community is beneficial to improving their quality of health. Lastly, improving accessibility in healthcare for LGBTI patients is most beneficial to care and improve their health.

Mental health support for LGBTI people is greatly important in healthcare and the community setting. People within the LGBTI community are at a higher risk for mental health problems in which members experience a higher prevalence of mood, anxiety, and substance use disorders compared to non-LGBTI people (Leonard, Pitts, Mitchell, Lyons, Smith, Patel, & Couch, 2012). Due to these higher reports, it is vital that the LGTBI community in healthcare receive the adequate aid required to help their mental health issues. The recent article by Bond, Jorm, Kelly, Kitchener, and Mason (2017), outlined the importance of understanding the type of mental health issues the LGBTI community face as well as the importance of treatment specific to each sub-group within the community improves their mental health outcomes. The study emphasises the importance of healthcare facilities to implement programs to understand the types of mental health issues each sub-group within the LGBTI community experience as this improves the quality of treatment provided when members seek help. In relation to the clinical placement mentioned earlier, IPC Health is in the process of implementing adequate support for the LGBTI community, the practice nurse explained that all staff attended an information evening by a speaker who represented the LGBTI community in which he provided information about the care required in order to relay an insight and understanding of what the community required in healthcare. Additionally, it is important that the LGBTI community receive specific health promotion and screening.

Specific health promotion and disease screening for the LGBTI community is central to improve health and quality of life. Due to the LGBTI community demonstrating higher rates of chronic illnesses, cancers, and sexually transmitted infections such as the human immunodeficiency virus (HIV), it is important that proper health promotion, education, and screening is implemented to support the health of these people (Donald & Ehrenfeld, 2015). In relation to health promotion and disease screening, research by Potter, Bernstein, Reisner, Alizaga, Agénor, and Pardee (2015), explains that due to due to insufficient promotion people who present as transgender are less likely to be screened for cancers and sexually transmitted infections. Furthermore, the article by Cochran, Grella, and Mays (2012), recommends that the development of health promotion campaigns and messages to reduce harmful effect of substance abuse and other mental health risk factors are tailored to specific subgroups which is effective in supporting the LGBTI community in reducing mental health issues. While it is important to recognise the LGBTI community in healthcare, understanding the health determinants specific to each subgroup is most effective to improve quality of life and health. As healthcare develops to support the LGBTI community, a main factor that healthcare facilities do for the LGBTI community is to improve the accessibility and available supports.

Improving the accessibility and support for the LGBTI community is important in healthcare. As healthcare moves to implement specific support for the LGBTI community, creating an environment which is welcoming and non-discriminatory in health facilities improves accessibility and utilisation of health services. The article by, Comfort and McCausland (2013), recommends that to provide the best care for LGBTI patients the health facility and staff must all be educated and actively show support for members of the LGBTI community. The article labels characteristics in which health practitioners should develop and be trained such as, being LGBTI sensitive and affirming, skilled in assisting in the disclose of the gender identity, as well as knowledge for appropriate referrals in the form of counselling and helplines, psychologists, psychiatrist and mental health nurse, allied health professionals, and aids councils. Another factor for increasing and improving the availability of health services is addressing the barriers that LGBTI patients identify which prevent them from accessing care and services. The article by McNair and Bush (2016), states that the common barriers identified by LGBTI patients which prevent the use of health facilities were, being judged and discriminated against by staff in addition to the experience of being a victim of stigmatisation. On clinical placement IPC Health displayed their support and welcoming to the local LGBTI community through staff dedicating a day to participate in wearing a rainbow ribbon and t-shirt, in the staff room support was also shown in the form of a poster (Artefact 3 LGBTI Support poster). Through this negative treatment LGBTI patients are not utilising health services resulting in poor health outcomes as well as a lowered quality of life, the importance of creating a welcoming environment in healthcare is vital to treat the health determinants of the LGBTI community.

To conclude, health support for the LGBTI community is greatly important as they have complex health issues which require support and aid within healthcare. In healthcare it is vital that supports for mental health issues, health promotion and disease prevention are specific to the subgroups in the LGBTI community to be effective in care. Lastly healthcare facilities which express LGBTI sensitivity are essential for making healthcare accessible to the LGBTI community.

4. Reflection on your community practice (500 words): Follow the provided in VU Collaborate example of the Critical Incident Analysis, except for the “Impact on Studies” section. This part does not require referencing and should be written in 1st person.

Context of the Incident

This reflection of my community practice clinical placement will outline a critical incident which occurred in the first week of my two-week placement. The incident was identified by my buddy nurse who was also my clinical educator which I worked alongside and interacted with daily. As she would be observing and supervising my actions, my buddy nurse would provide written feedback in my appraisal tool as well as communicate verbal feedback on the nursing tasks I performed throughout my placement.

Details of the Incident

On commencement of my shift I was to perform wound care for multiple patients in which afterward we would discuss my performance and she would provide verbal feedback. On the completion of the final wound care patient, my buddy nurse stated that she had observed my needed to improve in organising myself before the patient arrives, this included gathering all necessary equipment and creating an order of procedure in which I would follow to set up for wound care. She clearly explained the importance of setting up for wound care in an orderly way as it would ensure that I was able to be more efficient as I am not concerned with what to gather next throughout the procedure, as well as it provides safety for patients as the procedure is not interrupted when cleaning the wound. The view of my buddy nurse with maintaining sterility was done through being organised.

Thoughts, feelings, and Concerns

At the time of the incident, I had strong thoughts and emotions. I thought to myself that her feedback was very helpful and her insight of how I could improve greatly helped, I noticed I felt I disappointed my buddy nurse and myself for not implementing something that was so simple to do. I was also concerned with what her comments on my final report would be and felt anxious that I would have a negative comment. However, I did not take her feedback personally and acknowledge that this is an area in wound care where I could improve as it would make the whole procedure simpler, less time consuming, and I would be more safe. I said to my buddy nurse that I would be more organised and implement a standard operating procedure in which I perform before the patient enters the room, I also noted to myself that I would implement her feedback and work to improve being more organised to be safer in practice.

Demands   
This incident was not demanding for myself as I had made the decision to not take the feedback personally and looked at this incident in a positive perspective. As I value feedback, I find it important to recognise and identify areas where I require improvement, as the effects of implementing feedback are positive and help myself to progress.

Impact on Career

Ultimately my buddy nurse was right in her feedback and I am grateful for what she identified to improve. I witnessed an improvement in my delivery of wound care as well as apply an organised standard operating procedure to other tasks in nursing and outside of nursing. This incident has given me insight into the value of organisation as it also creates discipline and safety, as I am finished with my clinical placement, this has had a positive effect on my nursing practice as I strive to be more organised in other tasks to improve being more efficient and safe.

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