
FROM THE EDITOR: **Patricia McClunie-Trust**

Contemporary issues for nursing in New Zealand

Future approaches to nursing education and professional development need to look beyond existing models that have served past health-service needs. Demographic and epidemiological challenges in New Zealand's population, including population growth and extended life expectancies, will require different nursing relationships, knowledge and skill sets to support the health and well-being of more diverse populations across the lifespan (Wheeler, Fisher & Wing-sum Li, 2014). Health consumers are now more socially and culturally diverse, and often better informed than in previous decades. Some populations are living longer, with more complex health conditions, and are more proactive in their health-seeking behaviours. However, other disenfranchised populations have greater morbidity and mortality, and require more connected and culturally responsive health practitioners and services.



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The World Health Organization (WHO, 2017) identifies the importance of “transformative, high-quality education and lifelong learning so that all health workers have skills that match the health needs of populations and can work to their full potential” (p12). Transformative approaches require developing leadership, critical thinking and teamwork attributes among both currently practising and new-graduate nurses, to enable them to act as effective agents of change who will engage with communities in respectful, culturally responsive and generative ways (Frenk et al, 2010). Strategies for innovation include entry to nursing via graduate-entry programmes, and undergraduate nursing programmes that mindfully engage students in novel and culturally responsive, research-based learning experiences. Transforming the knowledge and skill-base of our current nursing workforce also requires creative approaches to ongoing professional education that is responsive to our ageing nursing workforce and changing population health needs. The papers in this issue of *Kai Tiaki Nursing Research* focus on nursing workforce concerns, undergraduate nursing education, professional relationships in nursing, and practice innovations.

Nursing workforce

Like many other countries, New Zealand has an ageing nursing workforce, with the majority of nurses having at least 15 years’ experience (Ministry of Health, 2016). As the workforce ages, and nurses begin to think about retirement, thought needs to be given to how experienced nurses might be retained in the workforce for as long as they remain able to safely and competently practice. Walker, Clendon and Willis examine whether the reasons reported in the international literature as the intention to leave nursing match those given by New Zealand nurses leaving the profession before retirement age. Retaining or delaying the retirement of older nurses has the potential to alleviate future nursing shortages. However, nursing management needs to consider what impact working conditions have on decisions by older nurses to leave the profession before retirement age.

Nursing education

Sound ethical judgement is a fundamental component of competent nursing practice. However, there is little evidence to suggest that, in the growing complexity of contemporary health care, newly graduated nurses are any more able to make sound ethical decisions than their historical counterparts. Song explored the experiences of a group of nurse educators teaching ethics in an undergraduate nursing programme. The findings of this research reiterate the importance of promoting undergraduate nursing students’ ethical awareness through teaching and learning activities in both theory and practice. Nurse educators also need to highlight more culturally specific ethical views that genuinely address the interests, values and aspirations of Māori and Pacific people. Nurse educators also have a key role in supporting students’ learning in clinical practice, particularly in challenging situations. Undergraduate nursing students have limited situational or ready-to-hand knowledge about how to manage complex clinical situations. The paper by Proverbs and McClunie-Trust reports the findings of research exploring third-year nursing students’ experiences of dialogue with nurse educators during clinical practice placements. The findings of this research suggest that the supportive

aspect of dialogue with nurse educators is highly valued by students, particularly in enhancing learning through listening to, and interpreting, students’ experiences and guiding them in making sense of clinical situations.

Nursing practice innovation

Innovations in nursing practice help to bridge gaps between health consumers and care providers by providing more accessible, appropriate and continuous delivery of health-care services. Innovative approaches involve deploying organisational, clinical and human resources in new ways to better manage demands related to population ageing and the prevalence of chronic illness (Longpré & Dubois, 2015). Kumari, Ritchie, Thomas and Jull examined patients’ experience of care provided by an outpatient intravenous antibiotic (OPIVA) service. OPIVA services enable health consumers requiring long-term antibiotic treatment to receive some, or all, of their treatment at home, creating less disruption to their lives. The findings of this study suggest that OPIVA was well-regarded by the majority of the health consumer participants, though opportunities were identified for improvements, including better discharge information, more education for community nurse teams and health consumers, and the possible provision of after-hours services.

Research briefs

The research briefs in this issue provide limited reports on research that has implications for practice. Hughes, Kirk and Dixon researched enrolled nurses’ (ENs) and registered nurses’ (RNs) perceptions of their everyday experiences of delegation and direction. The findings of the study show the need for up-to-date, clear policies about the roles and responsibilities of ENs in the workplace and expectations about how delegation will occur in practice. Palmer’s research brief reports on an integrative review undertaken to ascertain best practice for wound dressings following lower-limb amputation. The review concludes that, overall, rigid removable dressings applied immediately post-operatively were associated with improved wound healing, reduced oedema and faster time to prosthesis fitting.

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