



Promoting Evidence-Based Nursing Practice: *The consumer's voice in medication management*

In this newsletter we explore the claims made by the clients and carers who were interviewed during the medication management project that was undertaken in November 2002. Clients and carers praised District Nurses, but it is important for us to understand why our service is so important to them. These understandings will serve as a platform to sustain our ongoing commitment to human caring.

Who made the claims?

Clients were interviewed as a part of data generation for the medication study because it was important to hear their accounts of medication management. Of the 18 interviews conducted, 11 clients were able to clearly articulate their perspective. The other seven clients (39%) had some degree of dementia. It is acknowledged that interviewing clients with dementia presents many ethical and interpretive issues. However, when the older person experiences memory deficits, insight into the problem is common and they may welcome an opportunity to discuss their situation. Rather than simply dismiss the claims from clients with dementia, we have made sense of their accounts. To further strengthen the data, the research team also interviewed some carers of clients who were observed during the period of the study (n=5).

District Nurses are valued and trusted!

Clients claimed that the service provided by RDNS was both trusted and valued. They claimed that hospitalisation was prevented through regular District Nurse visits to the home. As a result, clients claimed that their quality of life had improved due to the support provided by RDNS.

The extensive numbers of comments make this a substantial claim. Clients said:

She helps me do the medication into the pump, but I'm learning to do it myself so that I can be a bit more independent... She helps me communicate with the doctor, she writes letters to the doctor so I can take them to the doctor. Generally, she just makes sure I'm all right.

I told them the other day when I rang up and cancelled them, I said "thanks for what you've done. I think you've done a good job".

We think the girls are lovely. It does help us, because we don't have to worry going to the chemist or having to worry about whether we have enough medication, all that type of thing. And it's a great help to us ... it really is.

It takes a lot off my shoulders with my partner as well. And since they've been coming, he's improved out of all sight. You know, he's going really well with the medication.

Carers and clients trusted the District Nurses. Some examples of clients' trust in the professional ability of RDNS nurses were:

Well the District Nurse is a very responsible person and makes sure he has his medication every day. And even on public holidays, she arranges for someone to make sure he has his medication.

You've got the person who's got the knowledge and the understanding of what they're doing.

The nurse said 'Don't leave it until it gets too bad, take it every hour if you need it'. I'm not a believer in a lot of medicines and

medications. I've never been one for taking a lot and I used to let it (pain) get too bad. And she spent quite a long time here.

Prominent in the voices of these clients was the reassurance and sense of security that District Nurses provide. Reassurance and security are conveyed when nurses place clients as central to care, inviting participation by working 'with' them rather than only doing 'for' them. This approach increases the client's control over the health matters that impact on their lives.

District Nurses help clients avoid hospitalisation!

Certainly RDNS involvement with these clients means that medication mis-adventures are prevented and hospital admission avoided. As one client said:

...the nurse comes and hands them to me, so it means that you don't get muddled ... I've got no memory any more, so that's good. I can just go ahead and have confidence in what's already been done for you.

Once again confidence in the nurse is revealed in the conversation with a client. The importance of sustaining clients in the community and avoiding admission to hospital was a theme that emerged during the interviews with nurses, and some clients also had the perceptiveness to voice this claim.

I do, from time to time, get shutdowns. I end up having to go to hospital for a few days while the doctors re-stabilise (me). But in the more recent times, these shutdowns have become further apart.

This client maintains that the regularity of medications arranged by District Nurses was the single most important reason preventing re-admission to hospital.

Having insight that their memory was failing and that they needed some support, these clients valued the visit of the District Nurse. One client with dementia was able to contribute the following:

I think it's marvelous. It saves me having to worry about what time I'm going to take them, did I take them, if I did or I didn't, or if I've got it there, if I'm not sure if I did take them, just shake this, nothing in it, so I know I've taken them. But actually, my memory isn't quite as bad as that. I mean I wouldn't forget so quickly, I don't think. Sometimes, I have episodes where I'm worse than others, but I can go for days and be perfectly rational.

Another client with dementia said:

Oh yes, yes. Well it stops me worrying about did I take them or didn't I take them or you know, or sometimes, I'll find a tablet here or possibly on the floor. I don't know if it's fallen out of my morning tablets or out of my evening tablets. I might find it at night. But I tell the nurse the next morning what's happened.

It is clear that these clients perceive that hospitalisation is often avoided because the District Nurse visits regularly.

District Nurses help to improve the quality of life of clients!

One other common expression was that RDNS visiting was a 'means of my continuing to enjoy a reasonable standard of life'. One client, who received regular enemas, confided that 'without it (enemas) I would be more or less confined to bed'.

On reflection some of the activities provided by RDNS nurses seem quite small but the outcomes of these therapeutic relationships may mean that the client can actually have a life beyond their bed.

Well, the District Nurse coming and doing this, works into the other parts of my medical management by my doctors and so on and it's given me an overall sense of security as an ongoing part of surviving with the condition I have.

Feeling reassured and cared for and about was important to several clients, 'it makes me feel really good [having RDNS visit] because it relieves the stress. I suffer from schizophrenia and I can't take a lot of stresses'.

District Nurses support carers!

Carers are important partners in community nursing care. The carers stated that they felt reassured by the professional guidance offered by the District Nurse. To the carers this was a great support and gave them a sense of relief.

And I find it a relief too, ...because it means that someone with medical training is going in and if they look at her, and think well "she doesn't look right", I know that they will contact me and I find that reassuring.

Family are now sure that she gets her medication regularly and it has meant that she has not needed to go on insulin (diabetes control has improved since the commencement of District Nurse) It's a wonderful service. We know that mum's been taken care of, whereas as a family, we can't do it every day. They pop in and if anything's wrong when they get there, they know my number, they, yeah, it's just sort of an extra feedback with mum.

Yes, they're very good, they're very nice in the office. You've only got to ring up and, it's interesting out of all the people they must have contact with every day, you just say who you are and your mother, and they sort of click straight away. So they're very nice there at the office when you ring through.

I'd like to say that I'm really appreciative of the service, really appreciative. And also that I find that the nurses who I have contact with are caring, are very caring. So, I can't speak too highly of that.

These comments highlight the importance of carers feeling supported in their role. Having the District Nurse come each day relieves the burden on the carers as described below:

And if I'm not well, as I haven't been particularly well. Earlier last month I was unwell and it was just such a relief to know that well, if I didn't get up to see mum, it wasn't the end of the world, because I knew the District Nurse would be calling in, and I would soon hear if there was anything amiss.

The carers felt that overall communication with District Nurses worked well. The communication sheet was utilised or notes were left and placed in the blue folder. One carer stated that 'I'm finding them quite accessible in ringing the 1300 number and I can send messages across to them if I need to.' One carer described the importance of reading the communication sheets regularly and perhaps following up any message with a phone call. A couple of carers have experienced incidents where there were communication breakdowns that resulted in the client not getting their medication on that day. Most of the carers felt comfortable with the system of documentation and indeed found it easy to follow. However one carer did feel that the documentation could do with an overhaul.

It actually could do with a bit of an overhaul I think... The folder itself doesn't seem very well organised. There are no clear sections and there's always a clear section about the medication and I follow that fine. There's a pink sheet that has all the days and the different medications on that and I can follow that. But the other communication, there's different pages and different dates, that's a little difficult to follow, so a bit of a re-vamp of the actual communication sheet in there and perhaps pages taken out when they're redundant. Yes, perhaps a bit of a clean up and I don't know how it works for anyone else of course, I can only talk about my mum.

The concern for this carer was that she might miss something if she didn't read through all of the documentation. The lack of date order meant that she wasn't sure where communication would be filed.

What did we learn?

We learnt that clients and carers valued highly the service offered by RDNS, felt supported by the District Nurse and were extremely grateful that this service was available to them. Listening to the voices of our clients and their carers offer District Nurses the opportunity to hear the outcomes of working 'with' people. We encourage the use of participatory approaches to care (throughout the organisation) as a framework for taking action to address the many issues identified by the medication study. We applaud District Nurses and encourage them to feel proud of the work they do in the community, whilst embracing the challenges of the expanding area of medication practice.

Further Information

The full report of this study will be available on the RDNS website (www.rdns.net.au) in April 2003.

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- Tina Koch, Director RDNS Research Unit
- Debbie Kralik, Senior Research Fellow,
- Kate Visentin, Research Associate seconded from Royal Adelaide Hospital
- Jane Smith, Research Administrative Assistant
- Natalie Howard, Research Coordinator
- Anne Maddock, Quality Manager
- Helene Martin, Clinical Specialist – Informatics
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- Tina Koch, Director RDNS Research Unit
- Debbie Kralik, Senior Research Fellow
- Kate Visentin, Project Manager seconded from Royal Adelaide Hospital
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- Natalie Howard, Research Coordinator



- Jane Smith, Research Administrative Assistant
- Geoff March, Consultant to the Study, Lecturer in Pharmacology, University of South Australia

*This issue written by Professor Tina Koch, Dr Debbie Kralik and Kate Visentin, RDNS Research Unit.
Edited by Natalie Howard, RDNS Research Unit.*

Contact Details: Research Coordinator, *RDNS Research Unit*, PO Box 247, GLENSIDE SA 5065, Ph: (08) 8206 0111,
Fax (08) 8206 0010, Email: howard.natalie@rdns.sa.gov.au, Web: <http://www.rdns.net.au> (newsletter available on website)