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THE CREATION AND DEVELOPMENT OF AN INTEGRATED NURSING SERVICE WITHIN A RURAL COMMUNITY HEALTH TEAM

AN ACTION RESEARCH STUDY

A thesis presented in partial fulfilment of the requirements for the degree of Master of Arts in Nursing at Massey University.

Margaret Elizabeth Cornish
December, 1995
FRONTISPICE

The citadel of an established practice will not fall to the polite knock of a good idea.

ABSTRACT

This Action Research study, guided by the philosophy of Critical Social Science, was undertaken to facilitate District and Public Health Nurses working in a multidisciplinary team in a rural area to reflect on and change their practice. The goal was to explore the possibility of combing their two separate roles into one integrated role. The idea was initiated by management who anticipated that an integrated role would ensure survival of their nursing service in the competitive environment created by the New Zealand Health Reforms. The study resulted in planned participative change brought about by this nursing group.

Analysis of the process increased knowledge about rural community nursing and showed that the research group created a local theory. Through their reflection the nurses isolated and related factors about their work. From this, they created a model that represented a combined nursing practice while retaining their specialist roles. Using this model the nurses planned strategies that they predicted would bring specific results. During action and evaluation, these strategies were tested and culminated in putting the emergent model into practice. The model has potential to be generalised to other community nursing groups.

Analysis of data showed that many factors enhanced the change process. Observation revealed that some group dynamics also had potential to inhibit change. When analysed with the group, the nurses recognised that there was a relationship between these dynamics and their job structure, their socialisation as women and their indoctrination as nurses. It also highlighted differences between how these District and Public Health Nurses think about their work and their roles. This critical reflection increased their self understanding and ensured that any planned change was more likely to endure.

For the participants, this study has resulted in a positive sense of the value of their work, a strong sense of group cohesion, a better co-ordinated communication network, and confidence in their ability to make decisions for themselves. This has, in turn, given them a stronger nursing representation within their team and organisation.
ACKNOWLEDGEMENTS

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My thanks extend to my Canadian family. Their positive influence on my life has helped me through many a challenge and this study is no exception. Seeing things through to the end regardless of the rocky road IS most rewarding.

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INTRODUCTION

This introduction is designed to inform the reader about editorial, technical and structural features of this thesis.

Editorial Features

The first two points are related to the philosophy of empowerment that guides this work, and to one of the goals of Action Research to bring research, theory and practice together.

Use of the First Person

Throughout this thesis I have chosen to describe my role in the first person. Though there is continued academic debate about the appropriateness of such a stance, I concur with the argument presented by Webb (1992). She states that the researcher's use of the third person in academic writing is meant to convey an objectivity and scientific neutrality that is unobtainable within any research method. In this project, where I openly declare my researcher role as a joint participant whose ideas and impressions become part of the data, use of the first person adds to the accuracy and the credibility of the written report. Also claiming ownership of the ideas I have generated, and presenting them in the first person is a very self empowering activity.

Language

While recognising the need to meet a high academic standard, I have chosen to keep my use of formal language to a minimum in order to maximise the understanding of nurses in practice. This coincides with my goals of making research 'user friendly' to nurses.
Unless otherwise stated, the discussion about health care and specifically community nursing is related to New Zealand.

Technical Features

The data were coded in a way that preserves anonymity in the presentation of recorded information from the nurses. Each participant has self chosen initials. When attributing data from individual interviews, the format is the chosen initial, the number of the interview and the page number of the transcript e.g. (TS 2, p. 9).

When quotations are from a group meeting, these are coded with GM, the number of the group meeting, initials of the participant and the page number of the transcript e.g. (GM 2, KO, p. 7).

A weekend workshop held involved five separate sessions. Quotations from these are coded with WS, the number of the session, initials of the contributor and the page number of the transcript e.g. (WS 3, KB, p. 6).

Structural Features

This thesis is divided into six chapters. Chapter One follows with an overview of the study, summarising the process and the results. Chapter Two describes the study background placing community nursing and specifically District and Public Health Nursing into their historical, political and social contexts. The Action Research method and the chosen theoretical basis of Critical Social Science are the foci of Chapter Three. Chapter Four gives a description and an analysis of the research process while Chapter Five presents the outcomes and a theoretical discussion. Chapter Six concludes with a brief overall summary.