

What do we do that is nursing?

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Bennett, PN 2011. What do we do that is nursing? *Ren Soc Aust J* 7(1) 5

One of the first assignments we did as a new nursing student may have been an assignment titled “What is nursing?” It may have been one of the hardest and most loathsome of all assignments. That was then and probably is a distant memory.

Moving forward to our current roles, do each of us have a good response to this question, now that we are nephrology nurses? Can we articulate what it is we actually do that is nursing?

We may respond ‘so what’, but this question is fast becoming important for us all.

Maybe reflect on what we did today. You might be a clinician who had a challenging day caring for four complex dialysis patients: permcaths with poor flows, new accesses, hypotensive patients. You may have had to find enough staff so a satellite shift could run safely. You may have had to try and explain the benefits of different dialysis modalities to a uraemic patient who really didn't seem to care. You may have had to handle a verbally abusive patient. Whatever it was you did today at work...what was it you did that was nursing and wasn't a role that could be undertaken by another professional, a family member or a non-nurse?

Each of us may have a different response to what part of our practice was nursing. Our response may be about patient advocacy, applying evidence into practice, caring, experience, skills, knowledge...the list goes on.

The “what do we do that is nursing?” question is important given some of the current and future professional and workforce developments in nephrology nursing. Some are addressed in this issue of the RSAJ, such as the role of enrolled

nurses, nurse practitioners and nurses' views on home dialysis.

Tranter *et al's* (2011) survey of New South Wales' nurses have described, among their findings, marked variation in enrolled nurses' (EN) scope of practice. No doubt many differences relate to context (incentre, satellite, regional, rural), however, they identify a need to continue a conversation on the EN scope of practice. There are many different perceptions regarding what an EN can and can't do. By reflecting on “what do we do that is nursing” may assist us in developing support, governance and advanced practice for the increasing number of ENs contributing greatly to care of people with kidney disease.

The pioneering efforts of many Nurse Practitioners (NP) have required each NP to identify their own “what is it we do that is nursing”. Each NP is required to submit a portfolio describing their scope of practice in order to be an endorsed NP. The Delphi consensus statement of Australian NPs (Douglas & Bonner, 2011) in this RSAJ issue will contribute to supporting and continuing the conversations around the pioneering NP roles.

The advocacy component of our role as nurses is exemplified in the recent renewed commitment to home dialysis. Certainly nurses are in the best position to encourage the most appropriate therapy for people with kidney disease and there is now strong evidence that nephrology nurses support the increase and expansion of home dialysis services (Lauder *et al.*, 2011). This could have significant effects on quality care, patient outcomes and workforce requirements and represents an area where nurses can play a significant role.

As offered in a recent RSA Communiqué editorial (Passaris, 2010), using evidence, research and ultimately knowledge in order to contribute to practice is an area all nurses are required to engage in. The example provided by San Miguel *et al* (2011) contributes to our understanding of a component of an everyday dialysis practice...priming dialysis blood lines. Exploring whether 5% Dextrose or Normal Saline is the preferred bloodline priming solution is a research proposal that could be duplicated by any of the almost 300 dialysis units in Australia today and a great example of a research study easily applicable to practice to improve the outcomes of people with chronic kidney disease.

The next time we are asked “what is it that we do that is nursing” I hope we have our own response that we can articulate, reflecting the important role nephrology nurses play to improve the care of people with kidney disease.

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