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Goal/Purpose

The purpose of this study is three-fold: 1) to discover perceptions of district nurses (public health nurses) in England through the eyes of district nurses, hospital nurses, and healthcare consumers, 2) to compare perceptions vs. actual roles of PHN in England to those found in the United States, and 3) to contrast the United Kingdom (government-run) and Australian (physician-run) socialized health care systems with emphasis on PHN and the benefits of each to the field of public health nursing. The information gathered from England will be a valuable link to improving perceptions and roles of public health nurses in the United States and other parts of the world.

Main Proposal Body (Including Importance of Project)

Florence Nightingale was of the first to notice a need for public health in the community (Edgecombe, 2001). Her tireless efforts in developing the field of public health nursing (PHN) in England (referred to as district nursing), has created a world-wide movement of caring and keeping the community healthy. She boldly stated the comprehensive role of the district nurse in her day:

“A district nurse must first nurse. She must be of yet higher class and yet of fuller training than that of a hospital nurse because she has no hospital appliances at hand at all and because she has to take notes on the case for the doctor who has no one but her to report to him. She is his staff of clinical clerks, dressers and nurses.” (Edgecombe, 2001, p. 3)

This statement reflects the respect, competence and necessity of the practice of PHN then and now. In modern times and with an increase in acuity and threats of bioterrorism the role of PHN requires that same autonomy and high-skilled talent. Yet, so often the perceptions of PHN and the purpose of primary preventative care are misunderstood around the world (Edgecombe, 2001) This misperception can lead to errors of epidemic proportion in the community's health and well-being that could be minimized by awareness and utilization of public health services.

In England, district nursing greatly influenced health care until the field of specialized nursing was instituted in 1979 (Haste & Macdonald, 1992). These specialists had expertise in diabetes, HIV and other specific diseases. The new focus turned to secondary and tertiary care, while district nurses felt their role in the community eroding from under them (Haste & Macdonald, 1992). Presently, district nursing fights against skepticism and misunderstandings regarding their role and the skills needed to complete tasks (Goodman, 1996). District nurses are actively trying to change the perception of their role in the community and in the healthcare system by redefining their professional standing in the healthcare force. In addition, there has been a government motivated public health “renaissance” in England. Recently, England has experienced some of the “most significant health policy initiatives since the establishment of the National Health Service in 1948” including an “independent national advisory body for clinical excellence” in public health (Brocklehurst, Hook, Bond & Goodwin, 2005, p 996). These rapid innovations, as well as better health outcomes (England's health care system is ranked 18th in the world while the US is ranked 37th by the World Health Organization (WHO)) make it essential for us to study England's health care system and the role of PHN (WHO, 2007).

Australia, a former colony of England, has similar healthcare history founded on the principles of socialized medicine. One major difference between the two countries is that physicians oversee the system in Australia, while politicians manage the healthcare system in England (McDonald, 1998). With this study already completed in Australia, we can now gather information from England and compare the impacts of different leadership on the roles and functions of PHN. With Australia's system ranked at 32, also higher than the United States, we will be able to investigate significant ways to improve public health perceptions and roles and the utilization of public health resources in our country (WHO, 2007).

This project is a qualitative, descriptive design, which will support the study's aim to understand the perceptions of PHN, hospital nurses and health care consumers. Participants will be selected by convenience and then snowballing methods. We will use a stratified group of applicants from various parts of the country with a wide variance of experience. The participants will be interviewed in person

and/or by telephone depending on the circumstances. A semi-structured interview guide will be used and was developed for and used in previous studies in the United States, Switzerland, Australia, Taiwan and the Philippines. IRB approval has been approved for these previous studies and will be obtained for this study as well. There will be three subgroups within the selected informants: five public health (district) nurses, five hospital nurses, and five health consumers all living in England. The survey includes questions relevant to the interviewees' perceptions of health care in their community, particularly district nursing. Once data has been collected, interviews will be transcribed, coded and analyzed for common themes. After common themes have been identified, further analysis will be performed using the data already collected from Australia. This secondary analysis of the data will specifically look for differences in health care system objectives, and how the influence of politics (in England) and physicians (in Australia) have shaped the health care system, and impacted the role of public health nurses.

Anticipated Academic Outcome

I will submit a proposal to present my research at the BYU College of Nursing Research Conference in 2009 and the Utah and National Undergraduate Research Conferences. I will also submit my research to Public Health Nursing, an international public health journal.

Qualifications

I have prepared myself through thorough investigation of this subject and have sincere interest in the perceptions of the roles of district nurses in England and public health nurses in general. I have a Nursing GPA of 3.77 (including pre-requisites). I have taken and received an A in the nursing research course which has given me adequate knowledge in nursing research methods, terminology and analysis. I have also completed courses in many different nursing facets including community health, with clinical experiences in schools, day cares, community centers and homes. I have significant English heritage in my family and have served a full time mission for the Church of Jesus Christ of Latter-day Saints in England. From personal experience and observation, my missionary service introduced me to aspects of their socialized health system.

Erin Maughan, my mentor, is extremely qualified to assist me in this research. She has already completed this study with student assistance, in the Philippines, Switzerland, Australia, United States and Taiwan. Her area of interest is in the International Health Policy. She has worked as a research assistant on an NIH grant, giving her a foundation in qualitative research. Erin was my clinical instructor for my hands-on experiences in the community health nursing course and has extensive background within public health nursing. Erin was a great influence to me during my community health nursing course through teaching and exemplifying the roles and duties of a quality public health nurse.

Project timetable

Project Timetable

IRB approval will be received for this project in England by February 2008. Participants for interviews will be recruited by email, telephone, etc. March through May and the actual interviews will be conducted in person in July. The remainder of July through September will be used to transcribe and analyze the data. The final report will be completed and submitted for publication in December 2008.

Fit with BYU's Mission

This research project fits with the mission of BYU because of its "intellectually enlarging" nature. This project will expand my knowledge of public health nursing around the world and improve my ability to serve people in my own community. Also, as I discover the outcomes of different health systems, I will be able to better assess how the needs of the community can best be met. The research process will enhance my desire for "lifelong learning and service" as I experience this opportunity to the fullest. I believe continual research is a key to providing effective service as nurses. It allows me to serve better in my community as I gain a broader knowledge base of the needs of certain populations and the role of nurses within those populations. It will strengthen my character as I improve my knowledge base and research skills while working honestly and uprightly to accomplish my goals. I know that as I participate in this research, I will learn an aspect of nursing that will allow me to be an even greater instrument in the hands of the Lord in my future profession.

Sources

Blocklehurst N.J., Hook, G., Bond, M., Goodwin, S. (2005, August 3). Developing the public health practitioner work force in England: Lessons fro theory and practice. *Journal of the Royal Institute of Public Health*.119, 995-1002. Retrieved October 19, 2007, from <http://www.riph.org.uk/pdf/Brocklehurst%20ETC.pdf>

Edgecombe, G (2001). *Public Health Nursing: Past and Future: a review of the Literature*. Retrieved October 16, 207 from P 1-29
<http://www.rcm.org.uk/info/docs/060105163054-331-1.pdf>

Goodman, C. (1996). District nursing, and the National Health Service reforms: a case for clarification. *Journal of Nursing Management*, 4, 207-212.

Haste, F.H., Macdonald, L.D. (1992). The role of the specialist in community nursing: perceptions of specialist and district nurses. *Int. Journal Nursing, Studies*, 29, 1, 37-47

McDonald, P. J (1998). A social experiment that keeps adapting-Australia's public health system. *British Medical Journal*,317, 55-6.

World Health Organization (WHO). (2007). *2007 National Health Report: A safer future: global public health security in the 21st century*. Retrieved October 18, 2007 from <http://www.who.int/whr/2007/en/index.html> .