The case for the District Nurse Specialist Practice Qualification

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Students experience the District Nurse Specialist Practice Qualification (SPQ) as ‘transformational’, equipping them with knowledge and skills to be effective caseload managers and team leaders in a variety of community settings (QNI 2015a). As a result of the resolution passed at congress in 2016 (RCN 2016) the Royal College of Nursing (RCN) commit to lobbying for all District Nurse (DN) caseload holders to have the professional SPQ. The RCN will work with key stakeholders to raise the profile of DNs to ensure that they are adequately prepared to undertake their role over the coming year.

Community care is changing and has recently undergone ‘modernisation’ in response to policy drivers (QNI, 2009; DH, 2013; RCN, 2013). The remit of DN teams continues to expand and includes responsibility for caring for acutely ill patients and those with debilitating long term conditions and with end of life care. (QNI, 2009; DH, 2013, RCN, 2013). Care which is underpinned by an anticipatory and health promoting approach. However, competing demands, accompanied by diminishing staff numbers, present every DN team with daily challenges that compromise care and increase risk (Dickson et al 2015a). This intensifies the challenge of allocating and managing workload and the ability of teams to deliver high quality care. In such environments it is essential that the DN is an assertive, inspirational leader equipped with the knowledge skills to manage a team that is highly complex.

However, there has been a continued reduction of DNs holding an SPQ (Lintern, 2016). The changes in funding for the post registration workforce may also impact on the development of future DN SPQ staff. The government has reported staffing increases but these are mainly located within hospitals in response to the Mid Staffordshire Inquiry (Francis, 2013; NICE 2014). This hospital focus fails to support health and social care policies that aim to provide
care closer to home. In Scotland the Chief Nursing Officer’s Review of District Nursing is seeking to drive implementation of a re-focused District Nursing role within integrated services. In a recent paper to the Scottish Executive Nurse Directors for the review of District nursing, workforce and educational challenges were acknowledged and emphasised the need for post-registration educational but fell short of supporting SPQ standard, preferring to cite to be ‘nationally agreed standards’

Educationalists across the United Kingdom work with their partner trusts and health boards to ensure the contemporary nature of their programmes, meet individual service needs. Recent developments include establishing advanced patient assessment and independent prescribing as core parts of the programme and incorporation of the new QNI/QNIS Voluntary Standards for District Nurse Education and Practice (QNI/ QNIS 2015b), Programmes maintain 50% learning in practice which is supported and assessed by District Nurse Practice Teachers.

In 2014, the RCN issued ‘District and Community Nursing Services in England: a call to action’, in response to a commissioned survey of community of district and community nurses (Ball et al 2014). Since then the organization has been active in a number of service reviews across the four countries. In addition to proposing the recent RCN congress item: All DN caseload holders should have an SPQ, the RCN DN Forum have been active in influencing a number of pieces of work including the QNI/QNIS Voluntary Standards for District Nursing Eduction and Practice (2015a); Health Education England (HEE) District Nurse and General Practice Nursing Service Education and Career Frameworks and Commissioning Specifications (HEE 2015) thus contributing to a range of policy of national policy and guideline development. We have taken opportunities to engage with members through Fringe events at Congress, the development of the new DN Forum webpage on the RCN website https://www.rcn.org.uk/get-involved/forums/district-nursing-forum and establishment of a twitter feed @RCNDN and Facebook Group. Projects reviewing evidence around recognizing patients who are deteriorating in the community and community placements for pre-registration students have been undertaken (Cable et al. 2015; Dickson et al. 2015 a & b; Gibson et al. 2015 a & b).
Building on this previous activity, and to represent Forum members, the RCN DN Forum submitted the resolution to the RCN Congress Agenda committee for consideration in January. The agenda committee supported the resolution that “That this meeting of Congress calls on RCN Council to lobby for all district nurse caseload holders should have the specialist practitioner qualification (SPQ)” and the resolution was presented for debate at Congress in June 2016. The experience of presenting the resolution at Congress and the debate that followed was exhilarating for the Steering Group as we recognised our responsibility in representing our members’ views in our 5 minute slot. We found ourselves in the position of being the last resolution of the day. This meant our time ran out. The Chair of Congress, Stuart McKenzie encouraged us to re-present a short version in the morning and then the discussion would commence. The decision to halt the discussion was in some ways stressful as it resulted in the resolution essentially being presented over 17 hours rather than one! However giving us additional time the next day felt supportive, not just for us but for the work undertaken by DNs across the four countries. The debate was very encouraging and the resolution was passed. We would like to thank to everyone who contributed either in person or via social media.

During the debate we were asked if we could amend the wording to cover other community nursing disciplines rather than focusing on the DN SPQ. The link being the importance of leadership and risk management being a requirement for nurses and midwives across all areas of practice. We felt strongly, whilst we do not disagree this would apply, our commitment as a Forum is to represent District Nursing Forum members without dilution. Building on anecdotal evidence and to ensure we represented members’ view accurately, we undertook a survey of RCN DN Forum members via Facebook in the weeks preceding Congress. Over five days 164 members completed the survey, one respondent captured the debate:

“The specialist practice qualification expands your knowledge (making you more critical), also makes you consider the wider picture and healthcare challenges, which in turn ensures that your practice approaches are in keeping with the needs of our society, it develops leadership knowledge and skills”.

Leadership, management, complex care management, end of life care and an enhanced role were all discussed at length. There was recognition for DNs who lead and manage teams
they do not see (Dickson unpublished thesis), caseloads are 'without limits'. Managing risk emerged as a large part of the DN role, including managing and supervising staff, both registered nurses and unregulated members of the team who are working in the community without direct supervision. It was acknowledged that there are band 6 DN s who have not had an opportunity to gain the DN SPQ, who are leading and providing quality care in people’s homes. However recent work by the QNI (2015a) suggest the DN SPQ develops practitioners able to work flexibly to provide effective evidence based care working across a range of organisations.

The next steps for the Steering Group are working jointly with RCN Council and DN Forum members to find a way forwards. Together we will work with key stakeholders to continue to develop the current SPQ within the context of the Policy drivers across the four countries. The SPQ can be integral to advancing practice within an integrated landscape of health and social care and across the primary secondary care interface.

A reflection on the experience of presenting at Congress: developing the resolution felt iterative, inclusive and time consuming. It was exciting but challenging to encapsulate key, persuasive points to be said in five minutes. The best bit of having a resolution accepted? The debate, passion and support from our RCN colleagues. Now it is time to take the next steps. Come on the journey with us! If you are involved in a DN team and have not yet joined the District Nursing Forum we would like to encourage you to do so. If you are a member of the DN Forum please join the RCN DN Forum Facebook page. This active group is a mechanism that allows engagement and discussion with all forum members. You will also find us on twitter @RCNDNForum


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