

Working as an Enrolled Nurse at Nurse Maude

Caring for the community since 1896

The logo features a stylized, cursive 'nm' monogram in a gradient of yellow and orange. Below it, the words 'Nurse Maude' are written in a bold, dark blue, sans-serif font.
Nurse Maude



Nurse Maude History

Nurse Maude Association came to Nelson/Marlborough area in September 2017.

Nurse Maude was founded in 1896 by Sibylla Maude and operates in Christchurch and Wellington.

I have been with Nurse Maude as an Enrolled Nurse since October 2017, and my first job as an EN and I am based in Marlborough.

In the Nelson/Marlborough we provide Homecare support in the community – DHB, MOH and ACC funded supports.



The purpose of Homecare

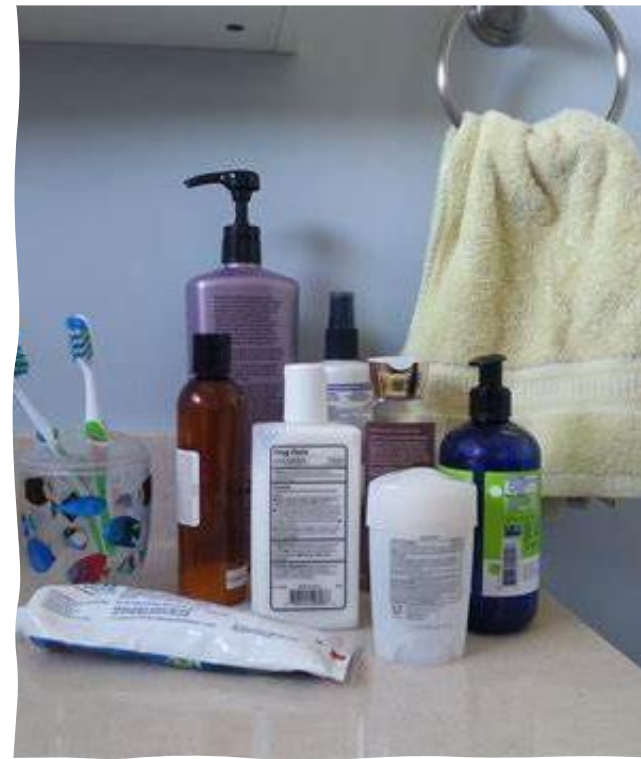
The goal is keeping people in their own home – including villa, studio, and apartment living.

We follow the Restorative Model of care to ensure that the client has support that is needed and to promote independence.

What does the support look like

We provide support to those who live in their own home.

- Personal care needs – showering, basic hygiene, dressing.
- Palliative care/ end of life
- Medication support – blister or robotic packs and eye drops.
- Compression hosiery and farrow wraps
- Meal prep support, security checks and housework needs.
- The support is based on the needs of the client.



Photos from Nurse Maude approved with full consent across all socials, web, publications, power points etc.

Care Plan Report
NMDHB - HOP Disability Clients

Name: _____ NHI: _____

Care Plan Status: _____ Start Date: _____ End Date: _____

Authored By: _____

Name: _____ GP: _____
Gender: _____ NHI: _____
Birth Date: _____ CSC: _____
Age: _____ Linked NHI: _____
Primary Language: _____ Casemix: _____
Interpreter Required: _____ NHI (dormant): _____
NHI (dormant) 01: _____
NHI (dormant) 02: _____
NHI (dormant) 03: _____
NHI (dormant) 04: _____
CSC expiry: _____

Ethnicity: _____
Diseases and Diagnoses: _____

Advance Directives

Address

Service: _____

Phone Numbers

Cell: _____

GP _____

Providers

Generated on: _____

Care Plan Report
NMDHB - HOP Disability Clients

Name: _____ NHI: _____

Presenting Situation

NURSE MAUDE

OVERVIEW:

CLINICAL CONCERNS:

PLAN:

Objectives

Classification

General Comments and Contingency Plan

Worker Safety Concerns

Client Safety Concerns

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How does care get implemented

Either via GP or presentation to Hospital



Needs assessment assess the client to determine coding and needs



Client chooses agency – paperwork can take 2- 3 working days to get to the Agency



Agency contacts client or specified contact person and arranges time for initial assessment.

What do I do in my role as an Enrolled Nurse



I have a mixed role at Nurse Maude which consists of two different roles.

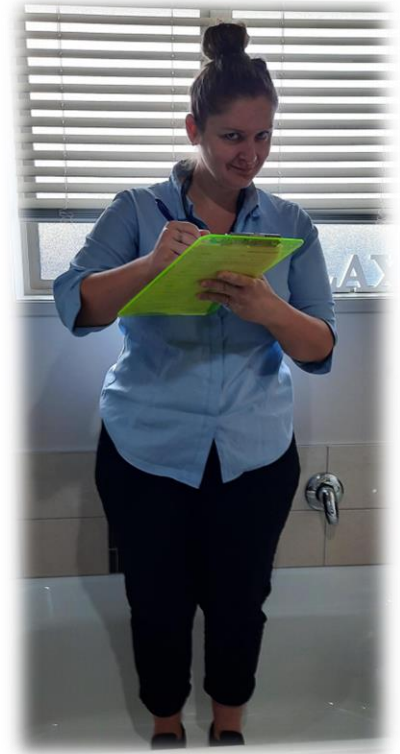
Main role -

- Assess new clients coming into our care
- Review existing clients and reviewing their needs
- Trouble shoot issues raised by clients, whanau, and support workers.
- Liaise with Needs Assessment Team, GP, PN, DN, Allied Health services, pharmacy, Hospice and other organisations such as – Maataa Waaka, Age concern, Ngati Rarua, Tipiki Oranga etc..
- Contact Assessment on InteRAI
- ACC set ups
- Audit involvement

Continue....

Secondary role –

- Orientation for all new support workers
- Appraisals for Support workers
- Education and sign off for competencies for the Support Workers
- Career force Health and Wellbeing observer for Support Workers



Clinical Support

As an EN my direct line is to a Registered Nurse. I can call and speak face to face regarding any concerns or questions I have if I am not sure about or general support.

We work autonomously but we work closely together in Marlborough.

Further up the chain – Case Manager Team Leader and above Service Manager – both have Nursing background.

There is also a Team in Nelson that cover the area which has 4 RNs and x1 EN.



Scenario of complex client

- Coming out of RHLC into independent living in Community
- Finding accommodation
- Lack of personal belongings
- No apparent life skills related to their ADL's.
- Complex family dynamics
- Needing other services involved



Problems



Potential
homelessness



Lack of life Skills



Wound care needed



Refusing prescribed
medication

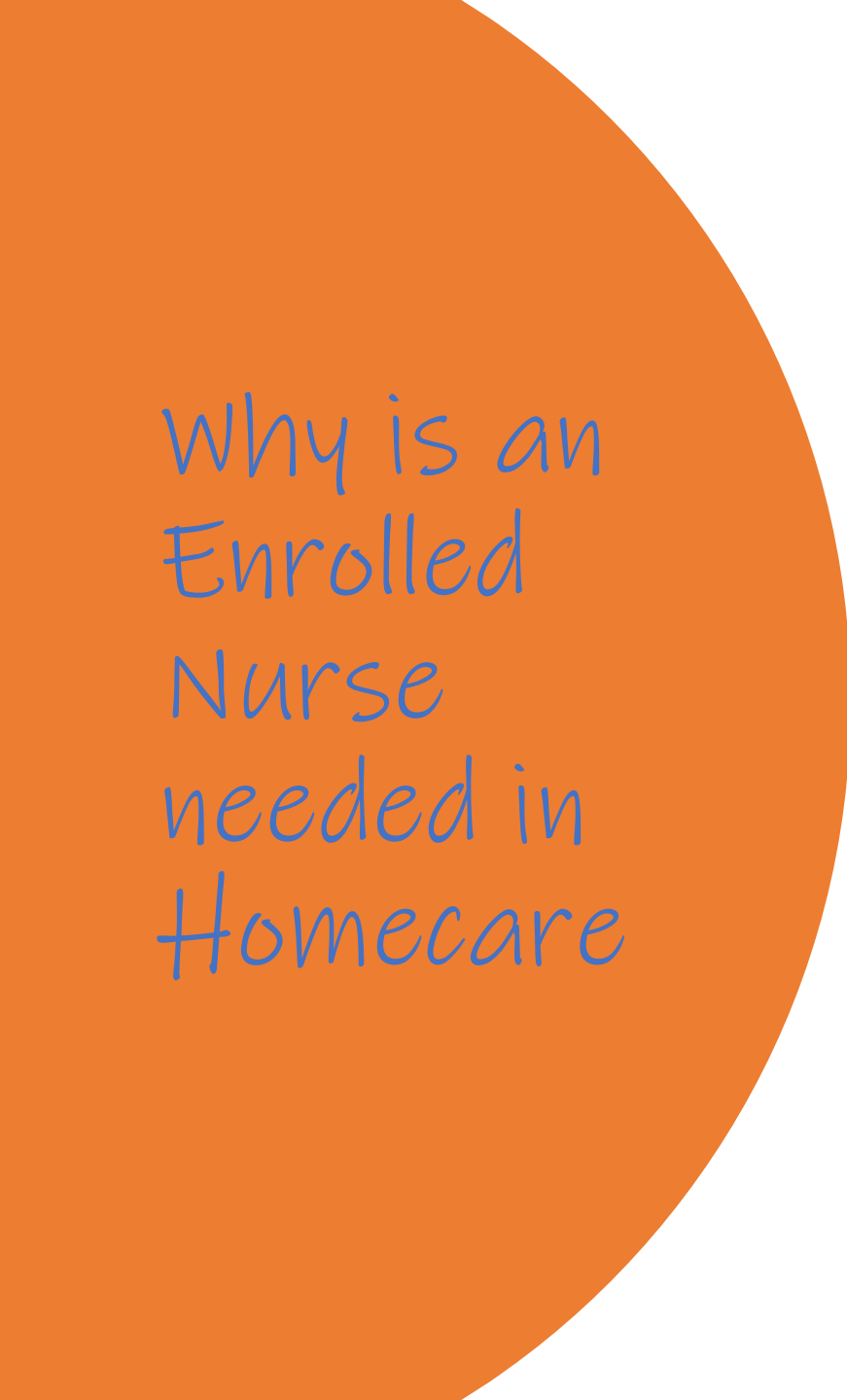


Lack of insight

Things to think about before the referral is made and being sent home

- Is it safe to discharge this person?
- What other informal support or local support do they have in place if agency support is not able to start?
- What is their current home set up like?
- Has OT/Physio cleared them for discharge, and do they have the relevant equipment?
- Has a referral been done for district nursing input?
- Do they have the correct medications – are they blister/ or Robic packed? If not, this needs to be done. For Agency support workers to oversee.
- Does the client require other agency/organisation input? Has this been organised?
- If known to Agency, has the Agency been contacted that the client is going home and when?





Why is an
Enrolled
Nurse
needed in
Homecare


Enrolled Nurses play a crucial role in the Homecare sector.

Enrolled Nurses bring a different perspective to the role and provide direct client care as required.

Enrolled Nurses provide teamwork and coordination; support to the educator and to the Support Workers to ensure competencies and appraisals are met.

Enrolled Nurses have a high level of accountability and competence as we work autonomously and in collaboration with the RN.

Enrolled Nurses are valuable and essential part to community health.



In Summary

Working in home care in the community has its challenges but it also has its benefits.

It's trying to manage clients, family, hospital, GP etc. expectations while ensuring that the needs and support are in place.

But, over all it is a rewarding role to be in. You meet so many interesting people along the way.

