



# **Orthopaedic Nursing in the 2010s. A Critical Ethnography.**

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## STATEMENT

This body of work contains no material which has been accepted or offered for the award of any other degree or diploma in any university or other tertiary institution and to the best of my knowledge contains no material previously published or written by another person, except where due reference has been made in the text.

I give consent to this copy of my thesis, when deposited in the School of Nursing library, being available for loan and photocopying.

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Paul McLiesh

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## **ABSTRACT**

This is a complex yet subtle story- it is a story about orthopaedic nurses, who they are, what do they do and why.

### Background

Orthopaedic nursing is a speciality that has members in many settings and institutions throughout the world. Orthopaedic nurses identify themselves as a distinct group who share common beliefs, values and actions. Their patients have similar needs and they work in similar ways to meet those needs. Changes in nursing and changes in the surgical treatment of orthopaedic patients have impacted the way orthopaedic nurses' deliver care. In part, this has created a threat to the speciality as some no longer see the need to have the care of orthopaedic patients delivered by specialist orthopaedic nurses.

### Aims

This study describes the orthopaedic nursing group and makes evident the value of their roles and actions in caring for their patients. It asks if the group identifies as a speciality, how that speciality is defined and what are the essential skills needed to be considered an orthopaedic nurse. It identifies the common needs of members of the group, how those needs are met by leaders of the group and what it is that makes them leaders of the group.

### Methodology

A critical ethnography framework was used for this research as it best matched the aims of understanding the group and what factors influence its existence.

### Method

The research was conducted in two phases. Participants were self-selected. The first phase used an online questionnaire that asked a series of questions about the participants' backgrounds, their roles and activities as members of the group. Phase two consisted of six semi-structured interviews with six participants selected from phase one.

### Findings

The orthopaedic nursing group is a complex and difficult group to define. The group and its members vary in a number of ways but share common elements. They describe an attraction to orthopaedic nursing that is based on the type of nursing and the team focussed nature of the work. Orthopaedic patients are often restricted to bed or have limited mobility. This has implications for

the way their nursing care is delivered. Much of the care they require is basic nursing care but it needs to be delivered in a unique way by orthopaedic nurses. The skills and knowledge needed to deliver this care may not be overtly obvious to outsiders, or even to someone looking directly at the care being delivered but for nurses from other specialities who try to deliver that same care it becomes more obvious. It is difficult for some orthopaedic nurses to articulate the specifics of that care as they have learned to deliver that care over time from other members of the group at almost an intuitive level.

Changes to the surgical management of orthopaedic patients have been the most significant issue influencing the way the group practices. Some in the group and others outside the group have seen the reduction in the requirement for specific skills such as traction as a sign that the group is no longer a specialist group and that orthopaedic patients do not need their care delivered by specialists. However the fundamentals of orthopaedic nursing remain unchanged and still need to be delivered by specialist nurses.

Leadership of the group is a complex issue and is often undervalued, even by the leaders themselves. Developing teams, attracting new staff to the speciality, relationships with other disciplines and inspiring and promoting orthopaedic nursing are all responsibilities of the group but must be fostered and directed by the leaders.

### Conclusion

Orthopaedic nursing remains a strong speciality but continues to face many challenges. While the specific skills and knowledge required by orthopaedic nurses continues to fluctuate, the fundamentals remain constant. It is vital that the group considers their current position and use this knowledge to help influence the future direction of the group. The future of the group is dependent on how it responds to external and internal changes and demands. This is how the speciality has evolved and is the best way forward to ensure success in the future.