Do you ever wish that you had a superpower? Not necessarily anything spectacular like an invisibility cloak or X-ray vision, but just a mundane everyday superpower, like the ability to be in two places at once or get from A to B at the speed of light? It sounds fanciful, but if reports about the numbers of district nurses are to be believed — not to mention the continued shift of care into the community — you might soon need special powers simply to keep up with the amount of work coming your way.

This issue’s ‘Community matters’ (pp. 8–10) takes an in-depth look at the so-called crisis in district nursing and tries to find out the truth behind the figures, after all with the Queen’s Nursing Institute (QNI) announcing that there has been an increase in district nursing students (‘District nurse student numbers on the up’ — pp. 14), perhaps the future is not as bleak as we thought?

We also take a look at the power of Twitter, not only as a way of keeping up to date with changes in policy and clinical practice, but also for networking and keeping in touch with colleagues. Social media can be intimidating for healthcare workers, who may worry about what to say (or more pertinently, what not to say), but if used correctly, Twitter can be a useful tool for the modern community nurse. Read our Twitter feature (pp. 12–13), and get started by signing up and following us @jcnreport...

In this issue we’ve covered the usual range of clinical content, including pain management, continence, wound care, respiratory nursing, nutrition and skin care, and don’t forget to keep your CPD profile up to date by checking out the Learning Zone (pp. 90) before taking the online test — in this issue we examine the fundamentals of treating the skin around a stoma site.

Jason Beckford-Ball
Editor, JCN

If you would like to comment on any of the articles in JCN, or indeed have ideas of your own for an article, please contact jason@jcn.co.uk
As a senior nurse researcher, I am passionate about the translation of research into practice to ensure that patients receive quality evidence-based care. I am delighted to be a part of the JCN editorial board because the journal helps to bridge the research-practice gap in community care. JCN is a well-recognised and established journal that keeps clinicians abreast of policy, practice and research in community care.

Janelle Yorke

I feel our ‘moment’ in primary care has arrived. Why? Well, politicians, professionals and patients are all asking a similar question, ‘Can care be provided closer to home?’ This means the spotlight is now on those of us based in primary care and it is important not to provide poorly organised or inferior care. Consideration needs to be given to both clinical and financial outcomes. I am pleased to be on the editorial board of the JCN because throughout my 25 years as a GP I have felt that the greatest strength in the NHS has been in the services we provide in the community. Strong links between GPs and their community nursing colleagues are vital for effective working, particularly at a time when GPs are being asked to coordinate care for the most needy patients. We can’t do this without you!

Julian Spinks

JCN allows me to raise important issues. For instance, after negative media coverage following RCN congress in June where it was said that district nurses face extinction, it would appear that there is a glimmer of hope. The QNI have produced a report highlighting the 38% rise in district nurses due to qualify this year in England, Wales and Northern Ireland and a 25% rise in universities running district nurse programmes. (See ‘District nurse student numbers on the up’ pp. 14). Some good news at last.

Heather Bain

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Jackie Stephen-Haynes