D eck the halls — Christmas is upon us once again, which means peace and goodwill to all men and, more importantly, a new John Lewis advert. It also means that we get to look back on another year full of NHS changes — this year’s gifts included commitments to move even more care out of hospitals and the new Five Year Forward View, the latest attempt to make the NHS more responsive to patient need (or save bundles of cash, whichever way you look at it.)

But with a new year comes uncertainty, and even if I did find a crystal ball nestled in the bottom of my Christmas stocking, I’m not sure I’d be brave enough to gaze into it. All the talk of ‘ticking time bombs’ and ‘funding gaps’ means that the future of the NHS looks less certain than at any time in its 66-year history. As we discuss in this issue’s ‘Community matters’ (pp. 8–9), new proposals for radical restructuring mean the breakdown of traditional boundaries between the professions and a greater focus on offering services in areas of patient need, irrespective of who provides them. While this could mean a wealth of opportunities for community nurses to set up their own clinics, it also means that some traditional ways of working — think practice nurses delivering flu vaccinations from GP surgeries, for instance — might become obsolete as cheaper ways of delivery are found.

This issue isn’t all about policy, however. We also take a look at some of the great work being done by community nurses around the country, for example the role of Queen’s Nurses (‘Could you be a Queen’s Nurse?’ p.12) and a fascinating account of the life of a cruise-ship nurse (pp.16–17). As usual, we also have a range of clinical articles featuring respiratory nursing, wound care, dermatology, mental health and continence, and you can keep your CPD profile up to date by checking out the Learning Zone on shingles (pp.59–64).

As it’s the end of the year, I’d also like to thank everyone who attended the free JCN Roadshows this year. The mix of clinical education and networking seems as popular as ever and you can check out our 2015 schedule on pp. 18–19. All that remains for 2014 is to say a happy Christmas and New Year to all of our readers — the JCN team look forward to seeing you again in 2015.

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
I am really pleased to be part of the editorial board of the JCN. The cascade of policy and change that nursing is charged with turning into good practice might sometimes feel like an assault, but there is no doubt that nurses have often turned policy into clinical opportunity. This very well-designed journal offers an opportunity to spread some good practice and share ideas.

Mark Radcliffe

As a respiratory nurse specialist, (albeit based in secondary care), I am conscious that patients with long-term respiratory conditions are increasingly being managed in the community. On behalf of the Association of Respiratory Nurse Specialists, I am pleased to be able to contribute to the editorial board of a journal that highlights a breadth of clinical issues and research relevant to the varied roles of community nurses. ARNS represents and supports nurses working with respiratory patients across all settings and we are pleased to bring respiratory issues to another forum.

Sandra Olive

I feel our ‘moment’ in primary care has arrived. 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