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Real-life story - Elizabeth Alderton

Elizabeth's decision on a whim to become a nurse proved to be one of the best of her life. Fast forward four decades later and she is still in nursing, as a district nurse, specialist community practice teacher and Queen's nurse.

Elizabeth Alderton

District nurse / specialist community practice teacher and Queen's nurse

Employer or university

North East London NHS Foundation Trust



My aim is to continue to provide skilled and compassionate care for my patients in their homes.

How I got into the role

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I was 19 and at a loss with what to do in my life so on a whim, I decided to become a nurse. The report from my first placement was terrible – the ward sister said I would never make it as a nurse and I nearly gave up but here I am, still in nursing, 38 years later!

During my training, I went on a two-week community placement. It was absolutely inspiring and that was when I knew that this was for me. In 1985, I started working in the community. In 1987, I became a district nurse and in 2008, I became a specialist community practice teacher.

What I do

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I think that many people do not realise the complexity of district nursing, both the variety of what we do and that we are, largely, a nurse-led service and therefore required to act autonomously.

A typical day encompasses a variety of nursing duties in people's homes, including medication administration, bowel care, complex wound care, IV care, palliative care, health promotion and many others.

One of the key points about community nursing is that every patient contact is one-to-one, enabling individualised care and the easy development of a therapeutic working relationship.

Non-medical prescribing and a palliative care degree are the two things that have most enhanced my role, enabling me to provide excellent symptom control and palliative care where it really matters – in the patient's home environment.

The district nursing service runs a variety of nurse-led clinics, for example caring for leg ulcers and specialising in Doppler [1] assessments. The job also includes liaising with members of the multi-disciplinary team, integrated working with therapists, specialist nurses and social service staff, and also teaching and mentoring students, both pre and post registration. We also offer teaching opportunities to other health professionals such as trainee paramedics and medical students.

I am also a specialist community practice teacher and train district nurses of the future. I am proud to be a Queen's nurse which has given me the opportunity to provide shadowing experiences for a variety of people, to act as an ambassador for district nursing and also to appear on radio four.

The best bits and challenges

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The rewards are phenomenal. District nurses make a real difference to people's lives, offering personalised care and promoting independence, treating acute illness and long-term conditions, palliative support and symptom control and end-of-life care. The list is endless.

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This year I received the Queen Elizabeth the Queen Mother's award for outstanding service to community nursing and attended a reception at Buckingham Palace.

There are challenges which include juggling resources, heavy caseload, skill mix, an often less than ideal working environment, multiple co-morbidities and complexity of care to provide excellent, skilled, evidence based practice to patients, whilst remaining a guest in their home.

Life outside work

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I have many hobbies and interests, including running (London marathon 5 times), cycling, singing, playing the piano, fundraising for a local hospice, sewing and reading.

They all help me to maintain my work-life balance and I guess keeping ultra fit helps to give me stamina for the role.

Career plans and top tips for others

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I have an amazing, rewarding job and my aim is to continue to provide skilled and compassionate care for my patients in their homes for as long as I am able.

I would recommend community nursing for anyone who is driven, fast thinking (and fast moving), able to use their initiative and passionate about patient care. They need to be an advocate, have excellent communication skills and a real desire to improve people's lives.

The ability to work autonomously but also to be a team player is essential. The role is stimulating, challenging, tiring, infinitely varied, very satisfying and there are many chances to develop clinical skills and acquire knowledge across a broad range of specialities.

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[1] https://www.healthcareers.nhs.uk/glossary#Doppler