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# REFORMING CARE

NURSING IN A SUPER PRISON

The RCN represents nurses and nursing, promotes excellence in practice and shapes health policies.

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## Congress submissions now open

Members can now submit agenda items and events to be considered for inclusion at next year's RCN Congress at Belfast Waterfront Arena (pictured above).

The agenda forms the backbone of the RCN's annual flagship event, which sees delegates debating a wide variety of topical issues affecting nursing and health care. This year's Congress took in everything from nursing pay to Brexit to cycle helmet legislation.

So if there's a burning issue you want to see discussed at a national level, now's your chance to make that happen. Find out more about what makes a good agenda item and how to submit one at [www.rcn.org.uk/congress](http://www.rcn.org.uk/congress)

RCN Congress 2018 takes place from 12 to 16 May. Apply for funding to attend as a voting member before 1 November at [www.rcn.org.uk/congress/about/funding-to-attend-congress](http://www.rcn.org.uk/congress/about/funding-to-attend-congress)

## Let's be ballot ready

We need members' correct details in case a ballot on industrial action is called as part of negotiations over pay. Update your details at [www.rcn.org.uk/myrcn](http://www.rcn.org.uk/myrcn) or call 0345 7726 100.

## New standards response

Proposed changes to nursing education, which include replacing mentors with separate practice supervisors and assessors, have been welcomed by the RCN following consultation with members.

In its response to the Nursing and Midwifery Council (NMC) review of new standards for pre-registration education, the College said creating two distinct roles for overseeing and evaluating the work of students would address concerns around some mentors being reluctant to fail those on placement.

The RCN approves of plans to ensure newly qualified nurses are ready to prescribe straight away, and able to conduct a full assessment of any patient regardless of their field of practice.

While welcoming the new standards' potential, the RCN said more funding for CPD would be needed to help current nurses support students. The College also called for the number of simulated practice hours to double, from 300 to 600, and for the NMC to update its medicine management standards.



🔗 Read the full RCN response at [www.rcn.org.uk/education-workshops](http://www.rcn.org.uk/education-workshops)



## Student opportunities

Members have until 16 October to put themselves forward for election to the RCN's UK Students Committee. Visit [www.rcn.org.uk/elections](http://www.rcn.org.uk/elections) to find out which areas need representatives and to nominate. Or attend the RCN's first ever student debate at Birmingham City University on 25 October to argue whether trade unions are the future for a compassionate workforce. Details at <http://tinyurl.com/yddepclf>



## Ballot could be called if cap remains in place

The RCN will move towards balloting members on industrial action if the 1% cap on NHS pay is not lifted in the November budget.

The decision to continue the campaign for fair nursing pay was made by Council after the College condemned the Government's "vague" signals that there will be increased wage rises from next year.

Chief Executive Janet Davies said the move to give prison and police officers more than 1% puts another nail in the coffin of the public sector pay cap but vowed to pile pressure on the Government until there's concrete proof the cap's been lifted for NHS staff.

It comes after thousands protested outside the House of Commons last month in the biggest Scrap the Cap rally to date. Members travelled from all over the UK to get their voices heard.

Teifion Woodward, a staff nurse from Caerphilly in south Wales, said he had made the journey to London because the cap was "blatantly not fair".

Now the campaign's focus turns political with members encouraged to lobby their MP. The College had representatives at both the Labour and Tory Party conferences and continues to hold meetings with senior politicians.

The RCN, alongside 13 NHS trade unions, has demanded to see wage increases that match inflation and an additional £800 consolidated lump sum for all staff to make up for the years of lost pay. Visit [www.rcn.org.uk/scrapthecap](http://www.rcn.org.uk/scrapthecap)

# Urgent action needed to tackle staffing crisis

RCN calls for new legislation as thousands of members reveal chronic nursing shortages



Hospitals and health care providers must examine whether they have enough staff to deliver safe patient care this winter as the RCN discloses the concerns of frontline nursing staff.

More than 30,000 members responded to a survey seeking to gain a snapshot of their experiences on the last shift they worked. The results, published in a new RCN report, paint a perturbing picture of staff stretched to the limit and compromised patient care.

More than half said there were fewer nursing staff on shift than planned and that care quality suffered as a result. "I drove home from work sobbing today, knowing the patients I cared for didn't get a fraction of the care I would consider acceptable," said one respondent.

More than a third said they had to leave elements of patient care undone due to a lack of time, while two-thirds reckoned they worked at least an hour over shift unpaid.

"This situation was entirely predictable," said Janet Davies, RCN Chief Executive. "Successive governments have failed to commission enough training places and kept vacancies unfilled to balance the books. These findings are a direct result of years of failings in workforce planning."

The RCN is calling for new legislation across the UK that guarantees safe and effective nurse staffing. It would give clear accountability and responsibility for workforce strategy, policy and planning and must lie at ministerial level.

The College has also repeated its calls for increased funding for health and care services to meet the real demand.

It plans to launch a safe staffing campaign next May and is inviting members to get involved in consultation events. Find out more and read the full report at [www.rcn.org.uk/safestaffing](http://www.rcn.org.uk/safestaffing)

# 4 DOING THE ROUNDS

## Know someone exceptional?



Each year the RCN elects a small number of new fellows in acknowledgement of their experience, accomplishments and dedication to the nursing profession.

Awardees are mostly put forward by peers who've been blown away by their exceptional commitment to advancing the science and practice of nursing and how they've helped improve health care.

Nominations are now open for you to acknowledge someone you feel deserves to join this prestigious group of members.

Ruth Oshikanlu (pictured) received her fellowship earlier this year. "It was lovely to be nominated," says Ruth. "There are so many unsung heroes. I don't know why we, as nurses, don't celebrate what we do. We're doing amazing things, from before conception, throughout life and to the grave. It's such an honour to help inspire."

Ruth, a nurse and midwife, wrote and published a book while working with first-time teenage mums in Tower Hamlets. *Tune into Your Baby*, written in 90 days as a self-help guide for anxious clients, kickstarted a change in career and led Ruth to set up her own business specifically supporting women who've conceived through IVF.

"The anxiety many pregnant women feel following miscarriage

or fertility treatment can be crippling," says Ruth. "It's my aim to help them enjoy their pregnancy and bond with their baby before birth."

Members have until 26 January to nominate colleagues for RCN fellowships, honorary fellowships and awards of merit. Visit [www.rcn.org.uk/fellowship](http://www.rcn.org.uk/fellowship) to find out more.



There are so many unsung heroes

### Nomination checklist

You'll need three other people, from a range of nursing backgrounds, to support your nomination and show how the nominee has made an exceptional commitment to advancing the science and practice of nursing and the improvement of health care. It's wise to start your application early and keep it a secret from the nominee to avoid possible disappointment.

## Casting call

Ever wanted to see yourself on the silver screen?

The RCN is making a film to show all the ways it supports members – and it wants you to be the stars. So if you've ever used an RCN service, this is your chance to grab your 15 minutes of fame.

Filming will take place from late October. The RCN will cover your travel costs and lunch and refreshments will be provided. Email [james.warnock@rcn.org.uk](mailto:james.warnock@rcn.org.uk) including your membership and phone number by 16 October to get involved.

## Remembering the fallen

The RCN is hosting a remembrance ceremony at its London headquarters on 8 November to honour the nurses killed or wounded while caring for victims of conflict. The service is free to attend and open to all but advance booking is required.

Major Chris Carter, Chair of the RCN Defence Nursing Forum, says: "Remembrance is a time for the profession to come together to contemplate our achievements but also to recognise and remember our losses."

Visit [www.rcn.org.uk/remembrance17](http://www.rcn.org.uk/remembrance17)



## The big picture



Thousands of members protest in London's Parliament Square urging the Government to scrap the cap. Visit [www.rcn.org.uk/scrapthecap](http://www.rcn.org.uk/scrapthecap) to find out next steps for the campaign.

## MEET THE MEMBER



Each month *RCN Bulletin* asks a member to share a little bit about themselves.

**Name:** Graham Mummery

**Details:** Theatre nurse, Basildon Hospital

**Describe your job in three words:**

Rewarding, challenging, stressful.

**If you weren't a nurse, what would you be?** Maybe a counsellor – something which still involves helping people.

**What item can't you do without at work?** My phone. As a team leader I have to be in regular contact with my staff.

**Who would play you in a film?** Jason Statham. It could be a disaster in a hospital film.

**If you could have a superpower what would it be?** Invisibility. You could go places you shouldn't.

**Why did you choose nursing as a career?** I was going to go into forensic science but didn't get the grades. I started dating a student nurse and she said I should.

**What would you take with you to a desert island?** A bottle of rum and a good book. I'd eat fish and coconuts – it sounds like a dream!

**Where is your ideal holiday destination?** Sorrento in southern Italy.

[www.rcn.org.uk/myrcn](http://www.rcn.org.uk/myrcn)



## PATIENT PERSPECTIVE



James Lawrence explains the positive difference nursing care made to his family's life when his son Frey was born 10 weeks premature

“Frey's early arrival was certainly unexpected. He was born healthy, albeit small, so his 34 days in hospital following his birth was spent simply making sure he put on weight in a safe, controlled environment.

We were told about kangaroo care and Frey's nurse spent a lot of time making sure that both Frey and his mum were comfortable for their first cuddle, and she was part of a really incredible and emotional moment for us all.

For me, nursing wasn't just about the ability to carry out daily tasks, it

was about taking the time to ensure that we, as parents, were also cared for and had support when needed. It wasn't always easy – every time an alarm beeped, we panicked a little, and sometimes the uncertainty of our situation was upsetting. In these moments, the nurses were always there to listen and reassure us.

We were made aware of support organisations and charities such as Bliss, but were very fortunate in that Frey was strong and healthy, and we lived close by. After a few days in NICU, we were confident of taking care of Frey in the incubator and only rarely needed nurse intervention. The nurses empowered us with the skills and confidence to be Frey's main care givers. Without them, we wouldn't have such fond and positive memories of our stay.

ARE YOUR MEMBERSHIP DETAILS UP TO DATE?

CHECK ONLINE AT MYRCN, CALL 0345 7726 100, OR WRITE TO RCN MEMBERSHIP TEAM, COPSE WALK, CARDIFF GATE BUSINESS PARK, CARDIFF CF23 8XG.

## THE VIEW FROM HERE



**Annique Simpson**  
Community nurse

I challenged my MP about the Scrap the Cap campaign at his surgery after receiving no reply to letters I'd emailed him. I gave him the letter I'd posted on Facebook which included the reasons why I campaign on behalf of vulnerable patients, exhausted nurses and in memory of my mum.

I was one of four nurses at his surgery. He looked a bit shocked at our wee posse initially and peddled the usual excuses: "austerity cuts", "must work within the budget", "having an NHS deficit of £30 billion", and "we're all in this together".

"No we are not," I said. I then hit him with up-to-the-minute data and statistics, posters and pictures of us in the media at protests. I found my inner terrier. We all shared our experiences of trying to keep his constituents alive and I told him I'm prepared to strike if the Government doesn't budge.

I'm pleased I held my nerve to facedown an MP and I'm proud of the nurses who came with me to voice their views. The gloves are off. The Scrap the Cap badges are on.

### Top tips for meeting your MP

- Prepare in advance – know your key messages and be clear on the facts.
- Share your story – your personal experience will be of most interest.
- Tell us – the RCN can help provide support. Contact the communications manager in your country or region.

[www.rcn.org.uk/scrapthecap](http://www.rcn.org.uk/scrapthecap)



## What you've been saying

### Where are the thanks?

Last week I found myself in that uncomfortable position every nurse dreads – a night shift as the lone nurse with responsibility for the ward.

Thankfully the shift went OK – just one unwitnessed fall and all the care and paperwork that ensues. All HCAs had their breaks – I used mine to complete incident reports. I very gratefully thanked staff at the end of the shift and provided cake and biscuits the next night as a thank you.

But where is the thanks from our employer? Who was it that had to apologise to patients for the late medicine round, delayed personal hygiene care and sleep being interrupted or disturbed?

Dare I suggest Mrs May and Mr Hunt that perhaps you don gloves and lend a hand

next time then tell me and my colleagues we're only worth 1%!

Julie, by email

### Attitudes are contagious, are yours worth catching?

As nurses working in very busy and stressful environments we must never forget the impact our attitudes can have on our colleagues and patients. Negative situations don't necessarily require a negative response. If we try to create an air of positivity, we have the ability to really change others' perspectives. If we're to meet the needs of our patients and be supportive and friendly towards our colleagues, then we must be kind, sensitive and compassionate at all times.

Donato Tallo, RN, by email



### QUOTE OF THE MONTH

You are the heart of our nation when it's suffering. When we're confronted by pain, disease and death it's you who care for us."

Actor Sir Tony Robinson speaking at the RCN Scrap the Cap rally in Parliament Square

### 4 THINGS TO DO IN OCTOBER

1. Get the flu jab to help protect yourself and your patients. [www.rcn.org.uk/get-help/rcn-advice/flu-vaccinations-2017-2018](http://www.rcn.org.uk/get-help/rcn-advice/flu-vaccinations-2017-2018)
2. Seek a meeting with your MP as part of our campaign for fair nursing pay. [www.rcn.org.uk/scrapthecap](http://www.rcn.org.uk/scrapthecap)
3. Think about a nursing issue you feel strongly about and put it forward to be debated at RCN Congress next year. [www.rcn.org.uk/congress/agenda/submit-an-agenda-item](http://www.rcn.org.uk/congress/agenda/submit-an-agenda-item)
4. Appear in a film about how the RCN has helped you. Email [james.warnock@rcn.org.uk](mailto:james.warnock@rcn.org.uk) and include your membership number to get involved.

### GOT SOMETHING TO SAY?

The RCN Bulletin team is always looking for members to contribute to the opinion pages. If you're keen to share your views, email [bulletin@rcn.org.uk](mailto:bulletin@rcn.org.uk)

## HOT TOPIC



More than 30,000 members responded to an RCN survey asking about staffing levels on their last shift. This is what some said:

“Short staffing has left me feeling stressed, anxious, unsafe, unsupported and ready to give up on my career. I feel burnt out and worry about my mental health if conditions like this continue. I have cried during and after so many shifts. As a newly qualified nurse, this isn't what I expected to feel like so soon into my career.” **Intensive care nurse**

“Every day I feel my registration is being compromised, as is the quality of care we provide due to the lack of nurses. We are pushed to exhaustion and no one wants to listen to our concerns. Every day I question why I became a nurse as I feel my health is deteriorating. I'm not able to drink enough on shift or even go to the toilet.” **Older people's nurse**

“I started nursing to look after and care for people, but poor staffing levels mean that I struggle to give the best care due to the stress and strain put on staff. Most days I feel low and completely demoralised. I would like to believe things can change but fear this may never happen.” **Practice nurse**

“The NHS is surviving on the goodwill of those who work within it. The majority of staff work above and beyond on a routine basis, studying and performing mandatory training in their own time. This would not be expected in any other profession.” **Registered nurse**

“Each shift, I feel drained, broken and inadequate from never having enough time to give the care that patients and families deserve. I only qualified in 2014 and yet I'm already considering leaving nursing.” **Emergency nurse**

## MESSAGE TO MEMBERS



**Janet Davies**  
RCN Chief Executive

The debate around NHS staffing can at times feel at risk of stagnation. But when 30,000 members give you an account of their own last shift, they cannot be overlooked. These are personal experiences – too often desperately sad – and their truth will have its own power in driving the debate forward.

It is the personal detail in these accounts that matter. They range from the seemingly minor complaints of missed tea breaks – a situation I remember well – to those saying that some patients are no longer afforded enough dignity, dying alone and even in corridors.

On the back of this work and all the studies that support it, the RCN wants to see – enshrined in law – guarantees on safe and effective nurse staffing in each country of the UK. The ambiguity and uncertainty that exists for our nurses and patients cannot continue.

Legislation alone will not improve patient safety but it would give clear accountability and responsibility for workforce strategy, policy and planning. Ministers across the UK must have responsibility for it if patient safety is to receive the prominence it deserves. But they must also increase funding so that health services can meet the real demand and nurses' pay can be increased.

[www.rcn.org.uk/safestaffing](http://www.rcn.org.uk/safestaffing)



## Why are we still talking about this?



As October marks Black History Month, Cecilia Anim, the RCN's first black president, questions why inequality still exists in nursing

I recently attended an event where we discussed the issue of racism and its impact on nursing. There were some interesting reflections and it was good to highlight the issue, but I was frustrated by the apparent lack of progress.

Though attitudes have changed, it seems the programmes and initiatives we've seen to eradicate inequality have done little to improve experiences and outcomes. Only 2% of top nursing jobs in the NHS in England are filled by black and minority ethnic staff and yet a quarter of the band 5 nursing workforce are from BME backgrounds.

What's going wrong? Why have we got this saturation of BME staff stuck on band 5 and why is there still a disproportionate number of referrals of BME staff to the NMC?

It shouldn't still be that you walk into a room and feel different because of your colour. Or that it's assumed you're not the nurse in charge because of your race.

We have thousands of talented, highly skilled and dedicated black nurses and yet somehow they're being inhibited from reaching their potential. There can be no room for racism in nursing, tolerating it or avoiding action to tackle it only makes our profession poorer.

The RCN's cultural ambassadors programme aims to ensure employers treat everybody fairly and do not discriminate on the grounds of race.  
Email [diversity.team@rcn.org.uk](mailto:diversity.team@rcn.org.uk)

# 8 FEATURES

## Nursing behind bars

RCN member Simon talks to Tom Metcalf about establishing and managing health care services in the UK's largest prison



We're doing things a bit differently here

Setting up a fully integrated health service from scratch in a brand new “super prison” is no mean feat. But that’s just what Simon Newman (pictured far right), Head of Healthcare at HMP Berwyn, has been devoting himself to for the past few months.

“To have the opportunity to set things up from the start has been exciting,” says Simon, who started his role in October last year, ahead of the prison’s opening in February.

“Since opening there have been some challenges around the complexity of the men and receiving them into a new prison with a new system, but it feels like the way Berwyn wants to be different is slowly coming into force.”

The category C facility on the outskirts of Wrexham currently houses around 600 men, but by the time its full capacity of 2,106 is reached it will be the biggest prison in the UK and one of the largest in Europe. But it’s not just its size that makes it unique.

### A different approach

While some of the on-site health care facilities, such as primary and dental care, are widely found in prisons, Berwyn also has its own integrated pharmacy, audiology, radiology, physiotherapy, speech and language therapy, substance misuse, mental health and learning disability services.

This is all provided by Betsi Cadwaladr University Health

Board, which administers NHS services in North Wales. As Simon explains, this is very different to how prison health services are provided in England, where he previously worked at a number of facilities.

*Pictures by Ian Southerin*





“The prison’s health and wellbeing services are all delivered by the local health board and staff are all employed by the health board. This is not the case in England.

“The main benefit of the Welsh system is services are more joined up, because you don’t have multiple providers. It also means communication with local hospitals and community services is really good, and from a staff perspective you don’t get the professional isolation which can come from working in a prison because we link in with the health board’s wider training and development plans.”

It’s not just the staff who benefit from the services, however.

“HMP Berwyn has a clear rehabilitative focus,” says Simon. “We’re doing things a bit differently here with the aim of preventing men coming back to prison.”

### First name terms

Central to the prison’s ethos is “the principle of normality”, the idea, advocated by Nelson Mandela, that making prison feel as normal as possible helps make the transition back to the community easier.

“HMP Berwyn has a clear rehabilitative focus

To this end, staff do not refer to “prisoners” or “offenders”, but “men”, and there are “rooms” rather than “cells.” Everyone, staff and men alike, is encouraged to call each other by their first names, and all name badges have a word or phrase on them to trigger a conversation; Simon has the RCN’s motto, *tradimus lampada* (Latin for “we carry the torch”), on his.

The principle of normality also extends to the on-site health care

facilities. The waiting room in the dedicated health and wellbeing centre is designed to look as much like an ordinary NHS surgery as possible. As one of the prison’s core values is to embrace the Welsh language and culture, signs are bilingual and pictures of local landscapes adorn the walls.

The health care services have only been fully operational since July but the early signs have been positive, despite some initial teething problems.

### Signs of success

“The main health care challenges have been around medicines management,” says Simon. “Some of the men come to us on multiple medications and might not have had a medication review for several years. Our medicines management process is aimed at recovery and reducing dependency on prescribed drugs, so we review all medication to ensure the men are only prescribed the medicine they need. It’s a very robust approach.”

Aided by the on-site pharmacy and a range of state-of-the-art dispensing, storage and administration machines, which improve efficiency and accuracy, the health benefits have been noticeable. The prison is also smoke-free.

“We’re getting good feedback from the men,” says Simon. “They’re saying how much better they’re feeling, more awake and alert. Their families are also saying they are more positive during visits.”

He’s also quick to point out that the general public benefit indirectly from the kind of health care facilities available at Berwyn, and uses the on-site x-ray facilities as an example.

“At most other prisons, if a man had a suspected fracture you’d need to take him off-site to get



The men are saying how much better they’re feeling

it checked out, which would require a minimum of two prison officers to accompany him,” he explains. “Here, an x-ray can be taken on-site and our staff can send it electronically to Wrexham Maelor Hospital for a consultant to look at. So it not only saves time and manpower, but it also keeps services in the community available for the public.”

He adds that he hopes Berwyn will become a model for other prisons to follow.

“It’ll be a year or two at least before we can say if it’s working or not. No doubt we’ll make mistakes along the way, but hopefully it’ll be something others can learn from.”

### The RCN view

“It’s great to see RCN members like Simon and his team making such progress at HMP Berwyn. We see so much negativity in the press so it’s really good to hear about some of the hard work being led by nurses to care for those in prisons.”

*Ann Norman, RCN professional lead for justice and forensic nursing*

Join the RCN Nursing in Justice and Forensic Health Care Forum at [www.rcn.org.uk/forums](http://www.rcn.org.uk/forums)

## Influencing change

This year's Mary Seacole awards will be presented later this month. Sophie Lowthian interviews two previous winners about their work with black and minority ethnic (BME) communities and what they've gone on to do in their careers

The knowledge that three people are dying each day waiting for an organ transplant, with a high number of those being from a black and minority ethnic (BME) background, is the driving force behind Angela Ditchfield's work.

RCN member Angela (pictured below) received the Mary Seacole Leadership Award in 2014 for her work with BME communities. At the time she was working as a specialist nurse for organ donation at East Lancashire Hospitals NHS Trust and joined forces with a community group to launch an organ donation campaign directed towards the Asian community. As part of the campaign Angela helped produce a film to raise awareness of the importance of donations.

Angela is now working as Diversity Lead Nurse for Organ Donation for NHS Blood and

Transplant, which she's been doing since April of this year. It's a role that has UK-wide impact.

"Getting the Mary Seacole award was the highlight of my career really," she says. "It brought me to the role I'm in today, opening doors and deepening my understanding of the NHS. It's such a privilege working with the community. Ultimately the reward is saving people's lives."

Angela says her current role is all about educating and increasing consent within the BME community.

"Education is key for all communities and cultures, of course, but with 27% of the waiting list being South Asian people, there is particular need for a focus in this area. As only 1% of people can become organ

donors, it's an ongoing challenge," she explains.

Angela's focus at the moment is working with specialist nurses to get the message out there. "We are looking at developing resources to raise awareness. Sometimes people are hesitant, perhaps due to cultural reasons, but starting the conversation is vital – if people fully understand it's giving the gift of life to someone they can make an informed choice."

Despite the challenges, Angela says that organ donation is becoming less taboo and she's enthused by how the topic is being embraced by the community. However, she says it is crucial to keep talking about it.

"In today's climate we need to learn about each other to live together well," adds Angela. "This goes beyond organ donation, it's about engaging with different communities and reaching out to individuals from all backgrounds."

### Transforming care

When midwife and RCN member Marsha Jones (pictured right) began her Mary Seacole award work in 2011 at Newham University Hospital, she didn't foresee just how big a mark it would make on her nursing and midwifery journey.

"I've always wanted to make people's lives better. Patients are at the heart of what I do," says Marsha, whose award work



Ultimately the reward is saving people's lives



Picture by John Behets

focused on improving postnatal care for BME women. “The award inspired me to want to do more to influence the system as a whole so I can make quality improvements a reality, and enhance patient and staff experience.”

## Adapting strategies

“My award project was driven by seeing first-hand the challenges women from BME backgrounds present with, as well as the evidence that health care outcomes for these women are not as good as for women from other backgrounds,” says Marsha. “This has got to change, but remains a challenge.

“The biggest challenge is that we’ve labelled this group hard to reach. But this just isn’t true. What we need to do is adapt our communication strategies to reflect diversity and inclusivity. We need to avoid a one-size-fits-all approach.”

Marsha, who is currently doing the Nye Bevan programme for aspiring directors, has been the lead midwife for maternity inpatients and outpatients at Whittington Health NHS since 2014.

**“ We need to avoid a one-size-fits-all approach**

In 2013, Marsha had the opportunity to go to the Institute for Health Care Improvement in Boston to learn about quality improvement and patient safety. And in 2015, she became a Darzi Fellow to focus on delivering care closer to residents’ homes.

Marsha says all the learning and development opportunities that came out of the Mary Seacole award shifted her thinking. “I’ve been developing my leadership skills ever since. It opened my eyes to the realisation



Picture by Justine Desmond

that as a clinical leader I can make a real difference,” she adds. “The award work was challenging but also a great experience for practising resilience.”

So what does the future hold for Marsha? “My aspiration is to become a board member to influence change that reflects the demographics of the population and is in line with the NHS Constitution,” she says. “We need to engage with citizens, patients and staff to co-design and co-produce services that will deliver the best possible health care outcomes with finite resources. If we don’t, how can we give timely care and help reduce risks?” she adds. “We’re getting there but there is still more work to be done.”

## Celebrating Black History Month

The RCN is co-hosting a free Black History Month conference with Health Education West Midlands and the MERIT Vanguard – an alliance of NHS trusts in the West Midlands – on 17 October in Birmingham. Visit [www.rcn.org.uk/bhm-con-17](http://www.rcn.org.uk/bhm-con-17)

## Did you know?

Mary Seacole was a Jamaican Scottish nurse and businesswoman, celebrated for her bravery in nursing soldiers during the Crimean War (1853–56). The Mary Seacole Awards were created in her honour and provide the opportunity for individuals to fund a project that aims to improve the health outcomes of people from BME communities.

On 23 October, this year’s awardees will graduate and next year’s awardees will be announced. Visit [www.nhsemployers.org/maryseacole](http://www.nhsemployers.org/maryseacole)

## Bursary brilliance

Five different RCN Foundation bursary schemes are currently open for applications. Sharon Palfrey looks at how funding can help further your career in a practical way



Nursing staff know the importance of keeping up to date, but in these days of austerity, education is often the first in line for cuts.

RCN member Nabeel Durgahee (pictured above) was determined to stay ahead of the game. “As a nurse, you can’t afford to sit back,” he says.

The diabetes specialist nurse at Addenbrookes Hospital in Cambridge faced financial challenges when he applied to study for his MSc in Diabetes in 2015. Although he continued to work full-time during his studies, there were still other significant costs to be met, especially as the course was based miles away at Leicester University.

“After searching online for funding I applied for the RCN Foundation Professional Bursary Scheme. Specifically I was looking for help to pay for

travel, accommodation for some residential weekends and to buy some annual leave from my employer to give me study time,” he says.

“It wasn’t too difficult to apply but I had to provide a detailed explanation of why I needed the money and get my application endorsed by my manager.”

### Patient benefits

He was awarded £2,500 to put towards funding his study and he’s now reaping the rewards of his hard work.

“The course helped me improve my teaching skills which has enabled me to better support other health care professionals, including student doctors and GPs. I also have access to the most up-to-date research and knowledge which helps me apply a patient-centered approach to managing diabetes.”

As Nabeel puts the final touches to his dissertation, he’s keen that others should get the funding benefits he’s received.

“Staff shortages mean there’s no time for training and there’s certainly no funding in the NHS to pay for courses. On the wards people are even struggling to get their mandatory training. But changes are happening every day and long-term conditions are getting more challenging so I’d urge other members to consider their futures and remember these bursaries are here to help you.”

Deepa Korea, Head of the RCN Foundation, agrees. “These opportunities help nursing staff keep up-to-date and use their knowledge and skills to transform the care their patients receive,” she says.



These opportunities help staff transform the care patients receive

🕒 Bursary applications are open until 30 November. Visit [www.rcnfoundation.org.uk/how\\_we\\_can\\_help/bursary\\_schemes](http://www.rcnfoundation.org.uk/how_we_can_help/bursary_schemes)

### Top tips when applying for a bursary

- Apply early so you can prepare for any interviews and ensure you complete your application accurately.
- Type your application and submit it electronically.
- Read the eligibility criteria carefully. Make sure you meet the requirements.
- Estimate your costs accurately. The budget you provide will be used to calculate the amount awarded.
- Sell yourself and the activity you’re applying for. Include the benefit the funding will have for patients and identify the challenges you may face and how you’d overcome these.
- Fully complete the form and use the guidance notes to help you.
- Prepare for an interview. Think about likely questions and how you could answer these.
- Be persistent. If you’re not funded first time, try again.



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The Royal College of Nursing acts as an Introducer Appointed Representative to the Liverpool Victoria group of companies for General Insurance and Life Insurance.

17344-2017

## Mental health matters

This issue of Forum Focus is promoting best practice in mental health care across all nursing specialties as the RCN gets set to mark World Mental Health Day on 10 October



Leanne Taylor, a second-year nursing student and Mental Health Forum member, was one of 100 people chosen to develop a project as part of the RCN's centenary *Celebrating Nursing Practice* initiative.

Leanne submitted a proposal aiming to improve mental health care for patients attending general hospital settings, saying: "When I was working as an HCA in a

trauma unit, I found that it was all too often the case that, while a patient's physical health was well looked after, their mental health needs weren't really addressed."

Leanne cites the example of a young man being treated for a broken leg who was known to have a diagnosed personality disorder but didn't receive his specialist medication for four days. "The patient's leg was on the

mend but his mental health was massively deteriorating," she says. "Only dealing with mental health conditions once they've reached crisis level is no good for patients and no good for staff."

The first step of the project was a survey, which revealed an overwhelmingly positive response to the idea of increased training and awareness of treating patients with mental health needs.

Leanne's plan now is to create a set of questions to be added to all general hospital admission forms asking patients about their mental health history, current needs and medication, which will trigger a pathway for staff to follow if needs are identified.

"Most people I've talked to recognise that there is a stigma and lack of training when it comes to handling mental health in general hospital settings. Hopefully implementing a new system will give everyone the information, knowledge and tools they need to respond to patients with mental health needs confidently."



Only dealing with mental health conditions once they've reached crisis level is no good for patients

## How are you feeling?

Some areas of nursing are particularly likely to cross over with mental health care.

Ismalia De Sousa, a committee member of the Neuroscience Forum, is a stroke clinical nurse specialist who implemented a



The emotional effects of a stroke are important to recognise

campaign in her workplace to address the mental health needs of patients who have suffered a stroke.

*How are You Feeling?* has helped encourage staff to ask patients about their emotional wellbeing after a stroke, resulting in

more patients receiving the psychological support they need. "It's important that we reinforce the idea that a stroke will not only have physical impairments. The emotional effects, those you can't see, are as important to recognise and address," she says.

## IN THE SPOTLIGHT



### Mental Health Forum

#### Who's the Chair?

Ed Freshwater, a community mental health nurse with the Perinatal Mental Health Service in Birmingham. He first became a forum member as a student and progressed to a committee member and then Chair in January of this year.

#### Recent highlights?

An online webinar resource addressing the physical health needs of mental health patients (read more below), and a supportive role in the debate on places of safety at RCN Congress this year, alongside the Emergency Care Association.

#### What's coming up

A social media campaign addressing the stigma attached to patients with mental health needs presenting at emergency departments. The #oneofyours campaign aims to create solidarity among nursing professionals and encourage appropriate care for service users' physical health concerns. The forum

# #OneOfYours

also has goals to improve the morale of mental health nurses and solidify the identity of the specialty.

#### Why join?

Ed says: "The forum is all about promoting mental health nursing and it has something to offer everyone working within the discipline. Our membership is so broad that there's no way you won't learn something from your colleagues or find something to get passionate about. It's the perfect way to stay at the forefront of your specialty and meet a lot of great people doing it."

Find out more about the Mental Health Forum at [www.rcn.org.uk/forums](http://www.rcn.org.uk/forums) or visit its Facebook page.

## WHAT I'M THINKING



### Dr Gemma Trainor CYP Staying Healthy Forum member

There's been a lot in the news recently about the changing landscape of mental health in university students. A recent report by the Institute for Public Policy Research revealed that the number of students experiencing mental health problems has drastically increased, and higher education institutions are not currently equipped to provide the kind of response and low-level care required. As a mental health nursing lecturer at King's College who spent more than 30 years working within child and adolescent mental health services, it comes as no surprise to me.

Due to the absolute demands on the NHS, it's a system that is geared towards acute crisis. A small percentage of patients suffering with mental health issues receive high-level care, being sent from A&E to Tier 4 in-patient units (a flawed process in itself). The rest often don't get any help at all.

For children and young adults suffering with chronic anxiety or depression, they will therefore often leave the security of the family nest and take on the stresses and pressures of independent living and studies without ever having received support or care for their mental health.

The implementation of support services within universities is now essential, but until more funding is put into early identification and low-level, continuous care for young mental health patients, it will continue to be an ongoing crisis.

[www.rcn.org.uk/forums](http://www.rcn.org.uk/forums)



## An unshakeable travel companion

Travel can be stressful for anyone but perhaps more so for those with existing mental health needs. The journey can bring its own concerns and adapting to a new culture and environment, especially where language creates communication difficulties, can exacerbate anxieties.

Sandra Grieve, who leads on travel health for the RCN Public Health Forum, recommends that a pre-travel risk assessment addressing both mental and physical health needs should be performed for each traveller. The forum supports the FCO's Travel Aware Campaign, which includes a resource explaining what help can be offered to travellers with mental health needs. Find out more at <https://travellaware.campaign.gov.uk/>

## Physical health in mental illness

People with severe mental health conditions are at higher risk of developing physical health problems, yet research shows they tend to receive less medical intervention.

The RCN Mental Health Forum, with support from the Charlie Waller Memorial Trust, has created an online resource consisting of three short videos presented by forum committee member Dr Sheila Hardy.

The resource aims to provide health care professionals with a toolkit to help improve patients' physical health.

Access the resource at [www.rcn.org.uk/clinical-topics/mental-health](http://www.rcn.org.uk/clinical-topics/mental-health)

# 16 EVENTS

For details of more events visit the region and country pages of the RCN website or go to [www.rcn.org.uk/events](http://www.rcn.org.uk/events)

## Society conference and exhibition

### Challenges and innovations in orthopaedic and trauma care

**14 November**  
Crowne Plaza Chester  
Trinity Street  
Chester CH1 2BD

The Society of Orthopaedics and Trauma Nursing annual conference and exhibition is the event to attend to share innovation and best practice with colleagues working in orthopaedics and trauma, rheumatology, acute, emergency and critical care. The conference features speeches from professionals at the top

of their field and will include workshops, research and discussion on the challenges and innovations in orthopaedic and fracture trauma care for patients at every stage of life.

Delegates can attend a choice of 12 concurrent sessions on the themes of:

- musculoskeletal care of the child and adult
- orthopaedic and trauma knowledge and skills: across the lifespan
- contemporary approaches in education for the musculoskeletal practitioner.



Attending will earn members seven hours of CPD towards revalidation and provide unrivalled opportunities to network with nurses, health care assistants, occupational therapists and physiotherapists in both the NHS and independent sector.

🕒 To book your place or find out more information visit [www.rcn.org.uk/sotn](http://www.rcn.org.uk/sotn) or call 02920 546460.

## RCN Wales

### ExpertTeas: meet a therapy dog

**9 Nov from 11am-1pm**  
Royal College of Nursing  
Ty Maeth, King George V Drive East  
Cardiff CF14 4XZ

Meet a four-legged therapy friend at this free drop-in session at the RCN library in Wales.

Learn about how pets can enhance health and wellbeing in the community and improve the lives of people living with mental and physical health conditions and illnesses. Come along for a cup of tea, pet therapy and talk to experts about how you could adopt and deliver this form of treatment in your care setting.

🕒 Visit [www.rcn.org.uk/events](http://www.rcn.org.uk/events) for more information

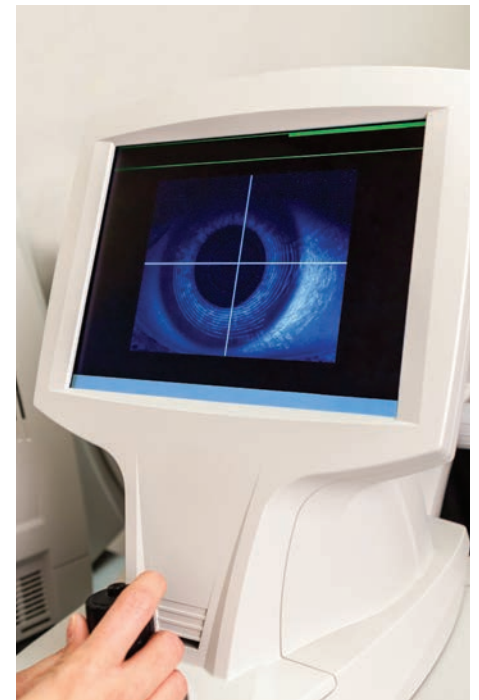
## Ophthalmic nursing

### Seeing is believing

**4 November**  
RCN HQ  
20 Cavendish Square  
London W1G 0RN

Modern ophthalmic nursing is changing with ocular health care taking place in a greater variety of settings than ever. The profession faces the challenge of maximising capacity, embracing new technology and treatments and utilising ophthalmic specialist skills, while also providing value for money and the highest standards of care.

Whether new to this niche field of nursing or an experienced eye health professional, this event will provide an unrivalled learning opportunity to reflect on how you can improve your practice and the patient experience.



🕒 For more information visit [www.rcn.org.uk/on17](http://www.rcn.org.uk/on17)