

LIFE BEYOND SEPSIS

TOM TALKS ABOUT THE IMPACT SEPSIS HAD ON HIM AND HOW HE DEVELOPED RESILIENCE TO OVERCOME ITS DEVASTATING EFFECTS

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

Editor: Kim Scott
Email: bulletin@rcn.org.uk
Web: rcn.org.uk/bulletin
Address: 20 Cavendish Square, London W1G 0RN
Classified advertising
Tel: 020 8423 1333
Fax: 020 8423 4382
Email: advertising@rcni.com

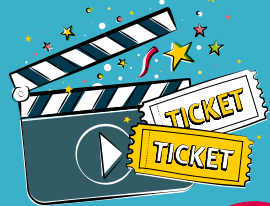
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Cover picture by Steve Baker

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Fresh calls for investment in district nursing

A new report from the RCN and Queen's Nursing Institute shows the number of district nurses working in the NHS in England has dropped by almost 43% in the last 10 years. As a result, there are only 4,000 district nurses providing care for a population of around 55.8 million people.

The NHS Long Term Plan, which was published earlier this year, sets out aims for more nursing care to be delivered in the community. The report says urgent investment and training is needed to make that vision a reality.

Outstanding Models of District Nursing explores what needs to be in place to support the delivery of district nursing services. It includes the views of patients, carers, commissioners, nursing staff and GPs. Visit tinyurl.com/rcn-district-nursing-report

Search starts for best nursing staff in Wales

Nominations are now open for the RCN in Wales Nurse of the Year Awards 2019. This is your chance to highlight the exceptional care nursing staff in Wales provide.

Last year's overall winner Eve Lightfoot says her award has given her a platform to promote the role of community nurses. "It's brought new opportunities and experiences that have expanded my knowledge and increased my confidence, helping to open up new possibilities for my career." Nominate at rcn.org.uk/wales/get-involved/awards and read about Eve's work at rcn.org.uk/bulletin

Members want law to tackle workplace bullying

The raw experiences of members who've been bullied by colleagues were shared during a debate at RCN Congress. The debate asked whether the RCN should campaign for a new law to prevent workplace bullying. Members voted overwhelmingly in favour of it.

RCN steward Maggy Heaton said bullying had implications for psychological and physical wellbeing. Research indicates the NHS tolerates a culture of bullying, she said.

Several students described the hostile attitudes of other staff during placements. "I'm sick and tired of being referred to as 'the student'," said Lia Cooper. "It ticks me off, and you wonder why we leave the profession."

Colleen White described bullying as "despicable, deplorable and an absolute disgrace". She added: "We need to call these people to account."

Read the full story at rcn.org.uk/magazines/congress



Thousands sign plea to Matt Hancock

A massive letter calling for an end to the nursing workforce crisis in England was signed by thousands of members at RCN Congress in Liverpool. It was addressed to Health Secretary Matt Hancock and demanded a law for safe nurse staffing in England to catch up with Wales, and now Scotland. "Dear Matt," it said. "We've got to talk. There are 40,000 nursing vacancies in the NHS in England alone. Patient care is suffering. Nurses are suffering. Too many are voting with their feet. We need change."

Hear our students roar



RCN Congress saw a huge student turnout this year, and they were on fighting form.

A successful student programme ran over two days, covering topics from modern slavery to palliative and end of life care.

But the star of the student show was undoubtedly the continuation of their campaign *Fund our Future*, which is calling on the UK Government to invest in nursing higher education. Students took over the main hall as they stormed the stage, singing along to Katy Perry's song Roar. They also showed a film of a rousing poem calling for action. Watch the film now at: tinyurl.com/rcn-student-film

Public back Northern Ireland nurses

Members of the public in Northern Ireland have shown their support for nursing staff in a series of meetings held to inform them about the current nurse staffing and pay crises there.

There are more than 2,500 unfilled nursing posts in Northern Ireland and the value of nurses' pay has fallen by 15% over the last eight years. Meanwhile, the cost of securing nursing staff via agencies has risen to an all-time high.

RCN Northern Ireland Board Chair Fiona Devlin said: "The meetings have given us much to reflect upon." The board has already been given the go-ahead by RCN Council to ballot members working for the HSC on industrial action, including strike action, if it decides that's what's needed.

Scotland passes new safe staffing law



Members have been crucial in shaping the legislation. Now our focus shifts to getting it implemented

A ground-breaking new law to ensure safe staffing in Scotland's NHS and care homes has been passed by the Scottish Parliament. The Health and Care (Staffing) (Scotland) Bill is the first legislation of its kind in the UK to apply to both health and social care services.

Scotland's First Minister Nicola Sturgeon made the commitment to put safe staffing on a statutory footing from the stage of RCN Congress in 2016. Since then members have been campaigning tirelessly to influence the legislation. Their views have been absolutely crucial in shaping the bill.

More than 5,000 people signed up to support our #askformore campaign, which aimed to make sure the law makes a real difference to nursing staff. We wanted it to do more than simply put workforce planning tools in law. We've been listened to and most of what we wanted is in the legislation. "Many of the provisions in the final bill are a result of our lobbying and influencing,"

said Tom Wilson, Chair of the RCN Scotland Board. "It shows the power of our collective voice. We need to build on this as we work towards implementation."

The passing of the bill is the start of our next phase of work to have effective legislation in Scotland.

RCN Scotland Director Theresa Fyffe said: "This law sets expectations on standards of care and defines who is accountable for maintaining safe staffing. But there is a lot of work to do before the legislation comes into force. This won't be quick and the government is yet to set a clear timetable for implementation. We also need to influence other issues, such as student numbers and workplace culture. Members will be key to getting this right."

The RCN is campaigning for staffing for safe and effective care to be enshrined in law across all four countries of the UK. Visit rcn.org.uk/safestaffing to get involved.

4 GOOD NEWS

World record for marathon member Jess after #WhatNursesWear backlash



Picture by Eric Tolentino

Huge congrats to RCN member Jessica Anderson who now holds the world record for the fastest woman to run a marathon in a nurse's uniform

Jess was initially told she couldn't claim the title, as she wasn't wearing a dress for the London

“

For me the issue went beyond achieving a world record

race, but Guinness World Records revised its rules amidst a Twitter storm about #WhatNursesWear.

Nurses tweeted selfies in their uniforms in support of Jess, showing the guidelines on which the original decision was made were outdated. Those rules said a nurse's uniform must include a blue or white dress, a pinafore apron and a traditional nurse's cap.

Jess completed the 26.2 mile course in 3:08:22 wearing scrubs, which she wears in her role on the acute admissions unit at the Royal London Hospital.

In light of the social media backlash, Guinness World Records admitted its rules were “outdated, incorrect and reflected a stereotype it did not wish to perpetuate”.

“I'm delighted,” Jess said on Instagram. “For me the issue went beyond achieving a world record. While nursing uniforms vary, one thing they have in

common is that they are designed for professional women AND men who care for people in all sorts of ways across the world. I would have been doing a disservice to my profession if I had worn a fancy dress costume.”

What's in a uniform?

At RCN Congress, members debated whether standardised uniforms should be introduced in England, as they have in other parts of the UK.

Members from acute care settings made it clear they would support a standardised, gender-neutral uniform, saying the varying colours and styles of uniforms are confusing for staff and patients alike. However, it was also pointed out that nursing is so diverse that a single uniform might not suit all purposes and may even be impractical or inappropriate in certain settings.

RCN Council elections open

Members have until 19 July to put themselves forward for election to 13 seats on RCN Council, the governing body of the RCN. Members will be elected for four years with the next elections due in 2023.

Dame Donna Kinnair, RCN Chief Executive & General Secretary, said: “Electing members to RCN Council is a key way to ensure we're truly member-led.

“This is your chance to make sure the voice of members is loud and clear. Whether standing for election or voting, members will be part of the change happening in our College.”

Find out more at rcn.org.uk/elections

Interested in nursing history?



The spring 2019 issue of our *Nursing History Now* magazine is out. Read all about the last remaining memorials to Crimean War nurses, recording the voices of nurses past, chamber pot taxes in the 1700s and district nursing through the ages. You'll also meet some charismatic characters as we go behind the scenes of a new book about the Royal London Hospital Nurses League and into the archives of Northampton General Hospital. Download the issue at rcn.org.uk/History-of-Nursing-Spring19

The big picture



Nurse entrepreneur Ruth Oshikanlu collects her honour from Prince William at an investiture at Buckingham Palace. RCN Fellow Ruth was made an MBE in the new year honours for services to community nursing, children and families. *Picture supplied by PA images*

MEET THE MEMBER



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

Name: Andy Rogers

Role: Third year student mental health nurse

Describe your role in three words:
To give hope

Why did you choose the profession?
I fell into it really. I had been working in the family business but it went bankrupt. I lost everything – money, house, marriage. But out of the ashes, nursing found me and totally changed my life.

How did you get where you are now?
I never thought I'd be able to become a nurse. I have dyslexia and it wasn't diagnosed until I was 40 but the support and encouragement I've had through my nursing studies so far has been more than I could have hoped for.

What's the best bit about your role?
Making that connection with someone. Especially on those days when you know that just by being there, listening, holding someone's hand, you've made all the difference.

And the worst? Working with children and young people who believe there is no hope for happiness. It's heart-breaking.

What's the best lesson nursing has taught you? To believe in myself.

rcn.org.uk/students



PATIENT PERSPECTIVE



Tom Ray, who lost limbs to sepsis, says his treatment in hospital could have been better if there had been more consideration and communication

I was put into a side room after waking from a coma with my arms, legs and part of my face removed. I was there for four months and felt very isolated, left on my own to deal with the fallout of what had happened. I was very lonely and it increased my sense of panic.

I had my hands amputated so I couldn't feed myself. But often there would be nobody to feed me. Food would be left by the side of the bed and I'd just stare at it for 12 hours. I had the same issue with water.

There was very little communication between the nursing staff and the

consultants. The nurses were the people who could talk to me in language I could understand. But information wasn't shared with them by the consultants so they couldn't explain things to me.

The consultants had this habit of turning up at 7am in large groups, surrounding my bed and talking over me, about me, in language I couldn't understand. I had no idea what they were saying about me or what the implications were.

So if there was one thing I would fix, it would be the communication.

I don't think patients in my situation should be isolated in the way I was and I would have appreciated better information from the medical staff.

Read Tom's story in full on page 10.

THE VIEW FROM HERE



Ruth Bailey Sexual health nurse

I've had patients break down in tears during routine sexual health check-ups, telling me that their periods cause them immense discomfort and are so heavy they "can't afford to have them".

There is so much stigma surrounding the topic as well. But menstruating is a natural, biological function. It shouldn't cause anyone to live one week of each month in pain or embarrassment.

That's why I'm so happy my nursing colleagues have acknowledged the importance of tackling period poverty and voted at Congress to put the weight of the RCN's influence behind the issue.

Whatever setting nursing staff work in, they will undoubtedly come into contact with people who are menstruating and for whom this may be causing knock-on physical, social or mental effects.

The UK government's pledge to provide access to free sanitary products for those in schools and hospitals is a good start, but it is just a start. As a political body, one that is uniquely placed within health care, we can hold them to account and continue to highlight this issue.

As nursing staff we are well placed to make a real difference to the many more vulnerable people in our society who will continue to fall through the cracks.

rcn.org.uk/magazines/congress

What you've been saying

It's been a privilege and a pleasure to attend #rcn19 congress. Absolutely blown away by the commitment, professionalism and enthusiasm there. Nursing has a bright future.

@ChrisPerryPSC

First congress and loving it! The passion and courage from everyone speaking is truly inspirational. I am proud to be joining the profession, you are all amazing! Thank you!

@jayneby85

Dame Donna Kinnair meaning business in her keynote speech!! Loving the honesty and conviction with which she speaks!! #FundOurFuture #safestaffingsaveslives. It's time for the government to take note.

@OnlyAmy90

I feel so proud to be a #Nurse. I've seen tweets from sex workers to nurses in general. They say things like "feeling heard", "feeling valued", "thank you for listening to us". We've made a real difference today.

@Cahill_Lou

Very interesting to learn about the dangers of nitrous oxide. The negative cumulative effects: hypoxia, irreversible damage to brain cells, and in the worst cases death.

@FancourtAmy

An inspirational and moving talk from @LFBCCommissioner at #RCN19. Upsetting that such brave fire fighters are being made to relive their trauma from #Grenfell. At least she is going above and beyond to support their mental health.

@ClaraLuck100

#rcn19 So good to hear the debate on homelessness and hear of the wonderful work to support people who are homeless. I worry about those with chronic conditions and terminal illness who are on the streets. More needs to be done to reduce this poverty gap.

@SandraC65402031 @iola_marie86

Sobering thought, most of us are only two pay packets away from homelessness #RCN19

@Louisa_Brad

QUOTE OF THE MONTH

“ Just be kind to people. Don't be judgemental. Don't look people up and down.

Kevin Crimmons shared his thoughts on how to prevent bullying behaviour during a debate at RCN Congress. Visit rcn.org.uk/magazines/congress

FOUR THINGS TO DO IN JUNE

1. Catch up on the debates, speeches and events at RCN Congress: rcn.org.uk/congress
2. Find out about the work of RCN delirium champions on 17 June at RCN HQ: tinyurl.com/rcn-delirium-event
3. Learn about the lifecycle of a medical glove in our informative new film: tinyurl.com/glove-journey
4. Consider standing for election to RCN Council. Find out more at rcn.org.uk/elections

GOT SOMETHING TO SAY?

The RCN Magazines 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

HOT TOPIC



Measles cases are rising in the UK. How can the nursing profession ensure people get essential vaccinations?

Promoting positive messages about vaccinations will help tackle the negative misconceptions that families may see. It's our role to act as vaccine heroes and limit the effects of misinformation. We could do this by engaging with families in settings outside of GP practices such as schools and nurseries.

Action is required from all levels within the nursing profession, from those on the frontline, to nurse leaders. We must continue to make every contact count and speak confidently about vaccines to ensure correct advice is delivered across the health system. [Oluwakemi Olufon](#)

All members of the nursing team need to know the benefits of vaccinations and understand the evidence base

for them. We all have a role to play in encouraging the uptake of vaccinations, challenging incorrect information and highlighting the benefits of vaccinations for children, young people and adults. Maintaining good health is essential and vaccinations play a key part in achieving this. [Jason Warriner](#)

The MMR (measles, mumps and rubella) vaccine produces an immune response similar to that produced by the natural infection, but without the serious risks of death or disability connected with natural infection.

Deadly diseases have a habit of making a come-back when immunisation rates drop as we're seeing now with measles. Only by making sure everyone gets their jabs can we prevent vaccine-preventable diseases. We should not rely on people around us to stop the spread of disease, we all have a responsibility to do what we can. [Denise Thiruchelvam](#)

Protecting your mental health

London Fire Commissioner Dany Cotton delivered a powerful speech to members at RCN Congress, stressing the importance of caring for both your physical and mental health. She shares her thoughts here

Nursing staff are under tremendous pressure. They're in a similar situation to firefighters in that they're quite often seeing people at the worst points in their lives. It can be terribly difficult to cope with alongside the pressures of the job.

A lot of people aren't prepared to talk about how they're feeling and that's something I'm trying to change. I want people to feel they can be honest, and that they can talk about their feelings at a very early stage so they can flag that they need some support.

Some people might just want to chat with a colleague, others might need professional help. Either way it's about

giving people the ability to ask for help without any negative stigma. We need to create an environment where people can be open but we all need to widen our horizons in what we're looking for when we think about health and safety.

Traditionally people have thought about health and safety as very one dimensional so making sure there aren't any trip hazards or obvious risks. But they don't always think about the mental health and safety of the people around them. Your physical wellbeing and your mental wellbeing are inextricably entwined and as important as each other.

It's really easy for someone to replace a loose stair carpet because it's a physical thing that you can see. Talking about how to look after people's mental health is more challenging. But the more we do it and the more we normalise that conversation, the easier it will become. Read more at rcn.org.uk/magazines/congress

MESSAGE TO MEMBERS



Dame Donna Kinnair RCN Chief Executive & General Secretary

RCN Congress is a remarkable event. It brings together thousands of you, our members, to debate, learn, socialise and feel inspired. It's where we discuss the most pressing issues in nursing and jointly set the RCN's direction for the year ahead.

This Congress was an opportunity to share my vision. I didn't mince my words. My number one priority is to get meaningful legislation and investment in every part of the UK to put an end to the nursing workforce crisis.

I will not stop until people are held to account for the desperate shortages each and every one of us has witnessed. Nurses are accountable for the care they give. And there is no more devastating moment than knowing you've made a mistake or weren't able to give the best possible care. But there is a terrible culture of pushing responsibility and accountability down to the frontline and away from the very top. Those with power, money and authority to stop these shocking workforce shortages are too often found unwilling, too happy to let nurses take the blame for failings that are genuinely systemic.

I will not stand by while this profession is denigrated. The goodwill of nursing staff is being abused and politicians must know it is running out. The stakes are high but so is our determination. Let's work together and we will win.

rcn.org.uk/magazines/congress



Decriminalising prostitution

Nursing staff at RCN Congress voted to campaign for sex work to be decriminalised. One member explains why it would help improve the health of both those who buy and sell sex



“I’ve had members of the public come to see me in a panic because they’ve slept with a sex worker. They’re frantic with worry that they’ll pass on an infection to their partner as a result,” says Kate Nulty, a nurse practitioner working in a sexual health clinic.

“But the reality is they’re probably more at risk of getting an infection by sleeping with someone they’ve met in a bar. The sex workers I care for know how to protect themselves.”

Kate believes decriminalising prostitution will help keep people safe and says nursing staff were right to debate the controversial issue at this year’s RCN Congress.

“When we look after sex workers, we’re looking after their clients too. They need empathic nursing care because otherwise they might not feel confident enough to disclose the information we

need, meaning they won’t get the services they require. They need to know that as nursing staff, we’re there to look after them and not to judge,” she says.

In a former role based in Tottenham in London, Kate worked with young and vulnerable women, who were sex workers.

“I would go out and meet these women. I’d give them essential advice on contraception, drug and alcohol use as well as safety and health issues. By seeing them where they worked, I could see first-hand if they were safe or frightened. They learned to trust me,” she says.

This was before the 2012 London Olympics. Back then Kate knew where to visit. While prostitution was still a criminal offence, there was an area in Tottenham where brothels were tolerated by the police.

“

When we look after sex workers, we’re looking after their clients too

Words by Sharon Palfrey

🔗 Visit tinyurl.com/rcn-prostitution-debate to watch a webcast of the debate

All that changed as the Olympics drew closer. The benefits of the hugely successful sporting event were not extended to these most vulnerable of women. The brothels were closed and most sex workers moved onto other areas of the city.

“It was much safer for them to be in these tolerated areas,” Kate says. “When they were moved we didn’t know where they went and neither did the police.”

Challenging misconceptions

Now Kate works in another area of London but once a week continues to run a popular clinic for sex workers.

“I’ve known many of my clients for years now. They remember the feeling of being looked after when they were at their most vulnerable. They remember being safe and not being judged. Being able to tell us anything is really valuable for them.”

Kate feels strongly that keeping sex workers safe is an important way to keep everyone healthy.

“We really need to challenge misconceptions that all sex workers are drug users with a terrible life or that they’re dirty. Many people are still too quick to judge but these people are honest and hard-working individuals. Often they’re just looking for a way to support their families, even if this means putting themselves at risk.

“Their care should be the concern of all nursing staff and prostitution should be decriminalised for the safety of all.”

Nitrous oxide: members warn it's no laughing matter



The dangers involved in recreational use of nitrous oxide – so-called “hippy crack” – came under the spotlight at RCN Congress in Liverpool.

Taking substances in search of a high is rarely without risk, but the dangers involved in this newer form of misuse are being overlooked, members warned.

Nitrous oxide, also known as laughing gas, was once known mostly for its role in anaesthesia. But its use as a recreational drug has rocketed in the past few years. A recent Global Drug Survey listed it as the fourth most used drug in the UK, behind ecstasy, cocaine and cannabis.

Nitrous oxide is often seen as being low risk and offering a short, harmless burst of euphoria. But Office for National Statistics data show there were 25 deaths linked to the gas between 2010 and 2016.

Stuart McKenzie sits on the committee of the RCN Mental Health Forum, which suggested the debate on nitrous oxide at RCN Congress. He says that because it is a gas, nitrous oxide is perceived differently from other drugs.

“The reality is we’re talking about an unstable substance, which causes hypoxic brain damage and injury,” he says. “There’s no clear treatment pathway for nitrous oxide addiction so people don’t accept that individuals can be addicted.”

Easily accessible

Its classification as a psychoactive drug makes nitrous oxide illegal to supply for its psychoactive effect. But there’s no penalty for possessing it and, says Stuart, it’s easily available from sites such as Amazon and eBay, where it is often sold to make whipped cream.

Although legislation has been changed to try to limit its availability, two major court cases brought forward by the Crown Prosecution Service in England failed.

The aim of the debate was to heighten understanding among nursing staff. Stuart says: “The feeling on the Mental Health Forum is that we should be working as a professional college to raise awareness of the problems nitrous oxide causes.

“We are also aiming to open up the debate – to look at how we can work with the legislature to undertake health promotion and to combat the prevalence of deaths associated with nitrous oxide.”

“

It’s an unstable substance which causes hypoxic brain damage and injury

📺 Watch a webcast of the debate at tinyurl.com/rcn-nitrous-oxide

Words by Daniel Allen

‘It ruined my life’

The potential risks of nitrous oxide as a recreational drug were exposed last year in newspaper reports about a young mother whose habit of using up to 15 balloons filled with the gas over a weekend left her paralysed.

Olivia Golding, 24, told the media the drug had “ruined her life”. She was diagnosed with Lichtheim’s disease, a degenerative condition of the spinal cord that occurs as a result of vitamin B12 deficiency, which is associated with repeated use of nitrous oxide.

Interviewed by ITV News, she said she was inhaling nitrous oxide at a festival when she began getting pins and needles in her back.

Hospitalised for two weeks, she said: “I couldn’t speak, my eyesight was going, I was talking like I had a stutter.”

She issued a warning to others about the dangers of nitrous oxide. “You don’t think it’s going to hurt you. But it can happen to anybody. You have a 20-second high, for weeks and months of rehabilitation.”

Life beyond sepsis

Quadruple amputee Tom Ray talks about the impact sepsis had on him and how he developed resilience to overcome its devastating effects



Tom was 38 when his life changed beyond recognition. He got sepsis. Within 24 hours he was in a coma. Four months later he woke up. He'd had both arms and legs amputated and part of his face removed. While unconscious, his wife Nic had given birth to their second child.

"I was fit and healthy before sepsis," says Tom. "It came on without warning. I started vomiting and couldn't stop. My head was pounding and I kept going from hot to cold."

Mistaken for a bad case of flu, Tom was advised by his GP to take paracetamol, go to bed and sleep it off. Later that night, after deteriorating further, his symptoms were missed again in A&E.

"It was a Friday night so the staff were dealing with the usual

comings and goings," recalls Tom. "They were mystified why I was suddenly feeling so extremely ill. There was no consultant on shift and I wasn't referred to one. They dropped the ball basically."

With sepsis, speed is of the essence. While up to four in every 10 people with the condition will die, it can be cured if identified and treated quickly. For severe cases, antibiotics must be given intravenously within an hour of diagnosis to avoid serious complications or death.

Delays prove devastating

In Tom's case, it took 10 hours to get the blood test results that confirmed sepsis. By that point sepsis had spread through his body shutting down the blood supply to his extremities. He had total organ failure.

Now, following a speech to members at RCN Congress, Tom, his wife Nic and clinician Pippa Bagnall want to further raise awareness of the impact of late diagnosis and encourage nursing staff to voice their concerns about deteriorating patients.

"Though awareness has improved significantly in the 20 years since I got sepsis, it remains a debilitating, life-threatening condition that affects hundreds of thousands of lives," says Tom. "Rapid diagnosis can save a lot of money, heartbreak and distress."

In 2017 a study showed sepsis could cost the UK economy up to £15.6bn each year. At least 250,000 people are affected by it in the UK annually and it causes 52,000 deaths. That's more than the number of people killed by breast, bowel and prostate cancer

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When you're dealing with a patient with sepsis, it's like you're dealing with someone on fire

Words by Kim Scott.
Pictures by Steve Baker

Find out more

Tom, Nic and Pippa's speech is available to watch at tinyurl.com/rcn-tom-ray. Read more about their advice on developing resilience at rcn.org.uk/magazines/congress

each year combined. Sepsis is more common than heart attacks and, Tom believes, should be treated with the same level of seriousness.

“When you’re dealing with a patient with sepsis, it’s like you’re dealing with someone on fire. If you don’t get to them fast and apply everything you’ve got to fix that situation, they’re going to die. If you’re not sure what’s wrong with the person you’re treating, you must ask whether it could be sepsis. Have confidence to stand up to your seniors and advocate for the person in your care.”

Nursing staff must speak up

In Tom’s case, a student nurse was concerned about his condition and feared sepsis, but didn’t have the courage of their convictions to call a consultant. That lack of confidence proved catastrophic.

“Please, please do your bit to speak up and raise awareness,” says Tom’s wife Nic. “Flood your work area with posters. Make everyone know what sepsis is and does. We don’t need new medical research to get a cure for sepsis. We know how to cure it, but we must improve awareness. Speedy recognition and treatment is key.”

Tom, Nic, and Pippa also want to see more support in the community for survivors of sepsis and their families.

“When Tom was discharged from hospital, a huge amount of co-ordination was needed to address his medical needs,” says Nic. “There were drugs he needed, he had a tracheostomy and lots of dressings for his amputated limbs. He needed surgeries for three years afterwards.

“Then there’s the psychological side of it, all the damage that was done to him, as well as me as his carer looking after a newborn and a young child. We had so many



Pictured left to right: Pippa, Tom and Nic

ongoing needs – that continue to this day – but I ended up doing all that co-ordination, because once we were home there was no support. That’s as true of sepsis now as it was almost 20 years ago.

“So there’s this dirty great hole in community nursing and we’re determined to highlight how complex sepsis is and how its effects persist. Conditions like stroke, dementia, HIV and cancer all have integrated care pathways and yet with sepsis, you go into the community and disappear.”

Clinician Pippa agrees: “New guidelines for the NHS in England are helping to speed up the diagnosis of sepsis in acute settings. But the truth about sepsis is that it starts and ends in the community. There really must be greater focus on both detecting blood poisoning in the community and supporting survivors of it when they return home.”

Finding strength

But surviving sepsis takes its toll. For many thousands of people, like Tom, they’re living with extreme outcomes, such as amputations and follow-up surgery. The impact on mental health is huge. Twenty years on from getting sepsis, Tom hasn’t had a single session of counselling.

“

We’re determined to highlight how complex sepsis is and how its effects persist

“It’s alright. I’m alright. Beating sepsis, coping with the aftermath and trying to earn enough for my family has been the challenge of my life,” he says. “It can be a very brutal and difficult lifestyle but we’ve come through it. We’ve survived and I’m proud of what we’ve achieved.

“I look back at myself at 38, earning lots of money, running a film business together, living in a beautiful house and it would be easy to say we lost everything. But we’ve still got our marriage, we’ve still got our children, we’re all still together and that’s worth an awful lot. I remind myself of that every day. It inspires me and keeps me going.”

So Tom, Nic and Pippa’s message is one of resilience, of making it through the toughest of times and coming out the other side with more strength. They spoke to members at RCN Congress on this topic with the aim of protecting nursing staff working under enormous pressure. “Otherwise, nurses and their patients will not be safe,” insists Pippa.

Spotting the signs of sepsis

Sepsis, also known as blood poisoning, is the immune system’s overreaction to an infection or injury. Normally our immune system fights infection but sometimes, for reasons we don’t yet understand, it attacks our body’s own organs and tissues.

Please escalate concerns about adult patients if they’re showing any of these signs:

- slurred speech or confusion
- extreme shivering or muscle pain
- passing no urine (in a day)
- severe breathlessness
- they say they feel like they’re going to die
- skin mottled or discoloured.

Information courtesy of the UK Sepsis Trust: sepsistrust.org

80,000

Calls received by the RCN Direct member advice helpline. Dial **0345 772 6100**

6,000

Counselling sessions provided free of charge to members
rcn.org.uk/counselling

60,000

Full text articles downloaded from the RCN online library
rcn.org.uk/library

3,300

Enquiries about RCN library services responded to
rcn.org.uk/library

22%

More NMC cases resulted in no sanction when nurses had RCN representation when reaching the formal hearing stage
rcn.org.uk/get-help/legal-help

107

Employment tribunal claims issued by RCN legal services
rcn.org.uk/get-help/legal-help

1,250

Members given legal support with NMC cases
rcn.org.uk/get-help/legal-help

ARE YOU MAKING THE MOST OF YOUR MEMBERSHIP?

Members at our recent AGM in Liverpool got the lowdown on services the RCN provided last year. Here's a snapshot of how we supported members

190,000

Members part of the RCN's specialist nursing forums
rcn.org.uk/forums

£1.9 million

Compensation recovered through employment tribunal claims
rcn.org.uk/get-help/legal-help

16,000

eBooks were accessed from the RCN library
rcn.org.uk/library

93%

Of members said they were satisfied with RCN legal services after using them
rcn.org.uk/get-help/legal-help

16,500

Member employment cases handled by RCN reps or officers
rcn.org.uk/get-help

600

Members received immigration advice
rcn.org.uk/immigration

1,400

Members and non-members sought hardship support through the RCN Foundation's Lamplight Support Service
www.rcnfoundation.org.uk

£5.5 million

Compensation recovered for members through personal injury claims
rcn.org.uk/personal-injury

35

Specialist nursing forums available for members to join
rcn.org.uk/forums

320

Members got expert advice on debt, benefits and housing
rcn.org.uk/welfare

300,000

Hits on the RCN careers service website
rcn.org.uk/careers

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Mindful moments on the move

New mindfulness tools from the Nursing in Justice and Forensic Health Care Forum could help you live in the moment, reduce stress and improve patient care

“Nobody should be damaged by the work they do, whether that’s physical or psychological,” says Annette Duff, Vice-Chair of the RCN Nursing in Justice and Forensic Health Care Forum, who works as a consultant nurse in secure settings.

Annette has practised mindfulness for around 10 years. She finds it improves her mental wellbeing and helps her get the most from work and home life. She collaborated with a mindfulness facilitator, Fran Cognetti, to create an eight-week course for nurses working in secure settings. The results were positive.

“People said they felt more grounded and less anxious,” says Annette. “They felt they were calmer in the moment and that risks were reduced because they noticed more. They found an ability

to leave work at work, rather than take it home with them.”

It became clear that nursing staff everywhere could benefit from mindfulness. Annette, along with Forum Chair Jessica Davidson and RCN Professional Lead Ann Norman, secured £10,000 in sponsorship from LV for the forum to establish the *Time and Space* project to make mindfulness accessible to all members.

Being present in the moment to provide better care

They created six short films, each linked to a stage in the working day: waking up, the journey to work, arriving at work, leaving work, the journey home and arriving at home. Each film encourages you to check in with yourself, making an effort to notice what’s happening

in that moment and do a calming breathing exercise. They’re online, so you can watch them whenever and wherever’s convenient.

“It’s helping people to separate home and work, being able to put down home and be very present in the moment at work,” says Annette. “When you’re present in the moment and you’re not worrying about the past or future, you provide better patient care.”

There’s also an introductory video and a leaflet for team leaders, encouraging them to share the six main films with their nursing staff.

Annette says: “Every nurse needs this.”

Watch the videos now at:
rcn.org.uk/mindfulness

“

It helps people separate home and work

Words by Rachael Healy

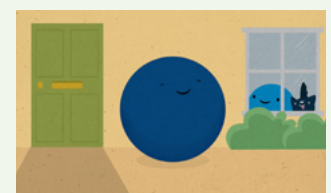
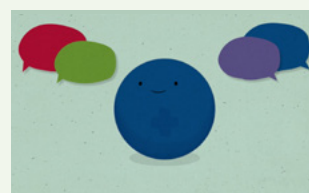
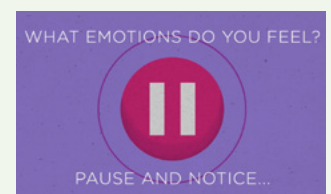
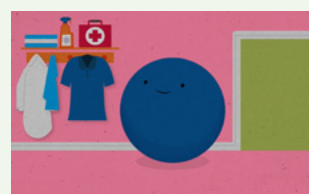
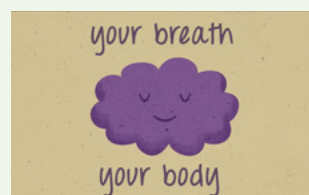
Images taken from the mindfulness tools

Six steps to mindfulness

Get a taste for the tools with these six simple steps.

- 1 Connect to your senses to bring you into the moment – notice what you can see, hear, smell and feel.
- 2 Take three mindful breaths, focusing on how it feels when you breathe in and out deeply.
- 3 Be aware of your body, how it feels and any movements you’re making.
- 4 Notice the emotions you’re feeling. Pause to name them, without judging or criticising yourself.

- 5 Notice the type of thoughts in your mind, rather than specific thoughts. Name the types – are they memories, worries, past conversations or future plans?
- 6 Find somewhere to sit or stand to do a three-step breathing practice:
 - Awareness: notice how your body feels and what you’re thinking.
 - Your breath: become aware of which parts of your body move when you breathe in and out and how this feels.
 - Expanding: breathe deeply so it feels like each breath fills your whole body.



IN THE SPOTLIGHT



Rheumatology Nursing Forum

Who's the Chair?

Louise Parker has been Chair of the Rheumatology Nursing Forum since 2016, following four years on the forum's committee. "I really enjoyed my experience as a committee member and thought it was an exciting opportunity to get involved with RCN work in a professional capacity," says Louise.

Recent highlights?

Guideline documents on methotrexate and biologics have been created by the forum to support members and are available on its RCN webpage. "We're also very excited that we've managed to get our yearly rheumatology workshops back up and running," says Louise. These practical workshops address gaps in the clinical and professional skills that the rheumatology nursing community needs: "The programme is informed purely by our forum

members." The next rheumatology nursing workshop is on 28 June at RCN HQ in London.

What's coming up?

The forum has had a project approved to create a national rheumatology competency framework for specialist nurses. Members are working hard to complete it by late 2019 or early 2020.

Why join?

Louise says: "It's a really cohesive and fun group. The Facebook page has transformed it and made it much more accessible – if you post something, you'll get loads of replies and helpful information back. Particularly for people who are quite new to rheumatology, it can provide mutual support."

Find out more about the Rheumatology Nursing Forum at rcn.org.uk/forums or find them at facebook.com/groups/RCNRheumatologyNursingForum and on Twitter [@RCNrheumforum](https://twitter.com/RCNrheumforum).

THE VIEW FROM HERE



Debra Ritsperis Chair of the Defence Nursing Forum

Armed Forces Day on 29 June celebrates the work of British Armed Forces personnel. It's a chance to recognise the extraordinary contributions of past and present serving personnel who are busy promoting peace, delivering aid, tackling drug smugglers, providing security and fighting terrorism.

The Defence Nursing Forum seeks to support members in the British Armed Forces as they deal with the unique health care needs of this community. It's important that these nurses are represented by our RCN forum, giving them balance and focus as they work in areas outside the NHS.

The forum's practical support takes many forms. We create publications and share these online – the most recent gives guidance to people new to nursing in the armed forces. Forum workshops help nurses understand the rehabilitation and mental health provision available to serving personnel and veterans.

Meanwhile, two recent forum initiatives showcase the range and experiences of defence nurses. An oral history project recorded the voices of nurses deployed in operations in Iraq and Afghanistan, and we collaborated with the RCN History of Nursing Society to deliver an exhibition on nursing in World War One for centenary celebrations. We'll continue to speak up for defence nursing staff – on Armed Forces Day and every other day of the year.

rcn.org.uk/forums



Lead your forum into the future

Fancy becoming a forum committee member? Applications have just opened for positions starting on 1 January 2020. If you'd like to get more involved in forum work, submit your CV and a short statement via the online application. The statement should share your experience

of the forum's specialist area, what you hope the forum will achieve in the next four years, and what you can do to make that happen. The deadline is 26 July. Discover the vacancies and submit your application at: tinyurl.com/rcn-forum-appointments

Sexual health careers tool launches

The RCN Public Health Forum has created a new resource highlighting the training and qualifications needed by nursing staff working in sexual health. "We sought the expertise of experienced sexual health nurses to help us create this useful tool," says Su Everett, Senior Lecturer in Sexual Health at Middlesex University. "We wanted to provide nurses with the information they need to pursue successful careers in sexual health nursing, whether

that is in genito-urinary medicine, sexual and reproductive health, psychosexual counselling, abortion services or HIV."

Funded by Health Education England, the tool sits alongside a new publication, *Sexual and Reproductive Health*, which explains the routes into this area of nursing. Download the guide at rcn.org.uk/publications (code 007 502) and explore the tool at rcn.org.uk/sexualhealtheducationdirectory

16 EVENTS

For details of more events visit the region and country pages of the RCN website or go to rcn.org.uk/events

London

RCN school nurses conference and exhibition

21 August

RCN HQ
20 Cavendish Square
London W1G 0RN



Don't miss the unrivalled learning opportunity to attend the UK's definitive school nursing conference, developed specifically for members working in this vital specialty. The day will provide updates on best practice and innovations for school nurses as well as practical advice on core issues.

Interactive workshops will cover topics including managing diabetes, responding to sports injuries, recognising mental health problems early and child protection in practice. There will also be talks on building resilience in schools and making sure you're compliant with

regulations relating to confidentiality, consent and record-keeping.

Chair of the RCN Children and Young People's Staying Healthy Forum Suzanne Watts says: "This conference offers something for all nurses working in independent and state schools, no matter their level of experience or expertise. The programme is flexible and provides a

choice of sessions so members can tailor learning to meet their needs."

As well as gaining seven hours of CPD, those attending will benefit from meeting other colleagues working in this often isolated field of practice.

🔗 Visit rcn.org.uk/schoolnurses19 or call 02920 546 460 to book.



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‘I knew oncology was my passion’

Julie Duncan has a fascinating role overseeing clinical trials with patients who have gastrointestinal cancer and lymphoma. She explains how her career has progressed



What does your job involve?

I'm Lead Gastrointestinal and Lymphoma Research Nurse at Royal Marsden NHS Foundation Trust. I manage a large team of research nurses, specimen co-ordinators and assistant practitioners across the hospital's two sites, in Chelsea and Sutton, London.

I split my time between the two teams, ensuring we deliver high-quality care to all patients who embark on clinical trials in the gastrointestinal (GI) and lymphoma unit. I'm responsible for developing the staff, and work trust-wide on service development in research.

At least once a week I work clinically in a dedicated research clinic for GI and lymphoma patients, assessing toxicities, completing holistic needs assessments and providing support

to the trial patients. This enables me to identify areas of the service we can expand or improve on.

Why did you become a nurse?

I travelled for a couple of years throughout south east Asia. I saw a lot of impoverished countries. It made me want a career where I could care for people when they most need it. I looked into various health care professions and decided nursing was the one for me.

Why did you choose to specialise?

My grandmother died of lung cancer and, unfortunately, the care she received was suboptimal and distressing for our family. The experience inspired me to complete a student placement on a mixed oncology ward, where my mentor and all of the nurses were dedicated and inspirational. They cared for the patients the way you would care for your own family members.

I completed my final elective placement in oncology and have been in various roles throughout my career in different specialties, but all in cancer care.

What do you enjoy most about your role?

The opportunities to develop a dynamic and forward-thinking team across two sites; work with a team of research professionals; and be involved in ground-breaking

research studies that could become the gold standard in treatment options for patients with GI cancer and lymphoma.

What are the challenges for cancer nursing practice in the 21st century?

Ensuring that we keep up to date with, and well-informed about, the fast-moving world of cancer research.

This could be challenging because new cancer drugs and research protocols are always being developed. For example, there is a wide range of genomic testing being undertaken on patients' blood and tissues to identify treatments that could benefit them.

Cancer nurses need to be able to discuss the translational aspects of these trials as well as the potential side effects of novel treatments with their patients. It can be challenging to retain all of this information because, as the gold standard treatments evolve and improve through further research, it is constantly being developed.

What advice would you give a newly qualified nurse in your field?

If you know the area you would like to specialise in after qualifying, go for it. Many people advised me to try different specialties, but I knew oncology was my passion and I have never looked back.



If you know the area you would like to specialise in after qualifying, go for it



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Meet Zoë, Senior Staff Nurse

North Bristol NHS Trust

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We are keen to promote from within the Spire network, so if you are looking for a long-term career with advancement opportunities you will find them at Spire. There has never been a better time to join us. Get in touch today to find out how Spire can support your career choices.

Visit our stands at these upcoming events;

British Anaesthetic and Recovery Nurses Association annual summer conference in Greenwich, London

Fri 7 June

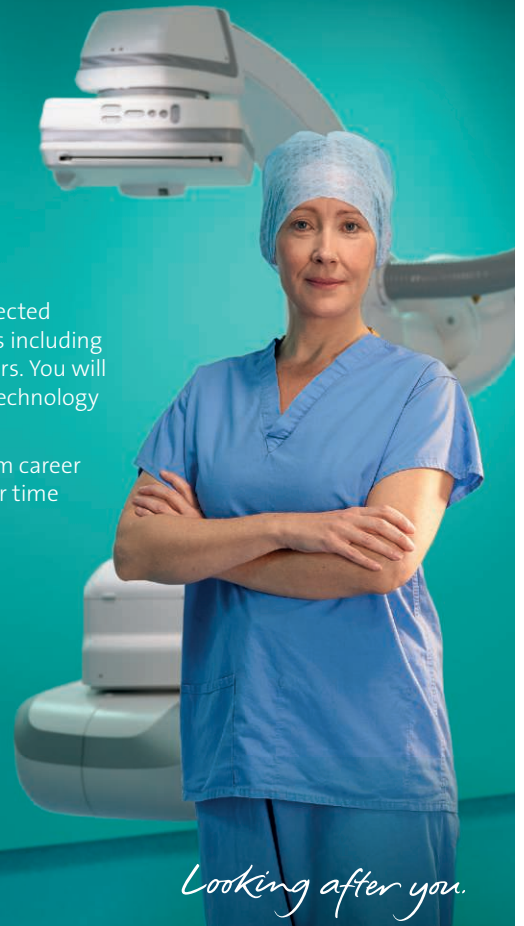
Nursing Times Careers Live event in Victoria, London

Sat 8 June

For more information contact our recruitment team at:

recruitment@spirehealthcare.com

www.spirelookingafteryou.co.uk



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Career opportunities with HCA Healthcare UK

If you're a nurse specialising in Cancer Care, Paediatrics or General nursing, a career with HCA gives you the opportunity to hone your skills as part of a world-class facility – discover more by coming along to meet us:

Thursday 6th June: Cancer Care

Friday 14th June: Paediatrics

Friday 28th June: General nursing

Because we know your time is precious, we've developed a **half-day assessment** to ensure that you will only need to come and meet us once. While you're here, you'll be able to learn more about our **flexible, full-time and annualised hours** opportunities and explore one of our **London** facilities.

We invest heavily every year in the development of our nurses, so whether you are enrolling on a leadership course, attending a seminar, or being one of the first in the UK to utilise new equipment, **your knowledge and skills will continue to advance**. You will also enjoy a diverse range of lifestyle, health and personal benefits that are completely flexible.

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www.consultuscare.com/care-jobs/live-in-nursing-jobs/



about nursing

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North and West Division

Dunbar Hospital, Thurso

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Staff Nurses – Band 6 and Band 5

Band 6: 2.0WTE plus Band 5: 1.0WTE + 1 year Fixed Term Contract

Band 6 £30,401 - £38,046/Band 5 £24,670 - £30,742

Are you looking for a change, a challenge, and a breath of fresh air? An exciting opportunity has arisen for experienced, motivated and enthusiastic Band 6 and Band 5 Staff Nurses to join our team in driving forward the re-design of the Dunbar Hospital. The vision is for the Hospital to become a transitional unit with close links to the West Caithness Integrated team, Riverbank & Princes Street GP practice's, Caithness General and Raigmore Hospital, and includes developing more day case services such as ambulatory care.

We have a number of permanent positions available which can be worked full or part-time, rotational day/night duty contracts, including 12 hour shift patterns. Job share candidates are also welcomed. Caithness is a beautiful part of Scotland which offers an excellent quality of life in a rural setting. It has plentiful outdoor pursuits, affordable housing, low crime rates and a strong sense of community. Relocation packages will also be offered to the successful candidates.

The Dunbar Hospital has 4 GP led beds, 2 palliative care beds, a Minor Injuries Unit, Primary Care Emergency Centre and Outpatient Department Clinics so a minor injuries qualification or relevant experience is essential for the band 6 posts. An independent extended and supplementary nurse prescribing qualification is also desirable for our Band 6 Staff Nurses although we would welcome enquires from nurses looking for a development opportunity.

We are seeking to recruit enthusiastic and knowledgeable Registered Band 5 Nurses to join the team, covering the Wards at Dunbar Hospital, Thurso. You may on occasions be required to assist in the Minor Injuries Unit and at Outpatient Department Clinics.

If you feel you have the skills, enthusiasm and motivation to help drive exciting developments forward and to provide the best care for the local population then please get in contact.

Informal enquiries would be welcomed by Lynda Gunn and Iain McHardy, Senior Charge Nurses, Dunbar Hospital, Thurso, Tel: 01847 893263.

Application forms/full information packs are available (quoting Job Ref: 015/19.20ES1 (Band 5) posts and Job Ref 016/19.20ES1 (Band 6) posts) from the HR Services Team, Caithness General Hospital, Wick, KW1 5NS by emailing: northarea.recruitment@nhs.net or telephone: 01955 880403.

Find out more about Caithness at: <http://investcaithness.com> – <https://vimeo.com/171301581> – www.venture-north.co.uk www.northcoast500.com – www.caithness.org

Closing date for completed applications: 12 noon on Wednesday 12th June 2019.

Short-listed applicants will normally be contacted by email, unless otherwise stated.

Please check your emails regularly, including your junk/spam folder.



www.nhshighland.scot.nhs.uk



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For more information please contact Elisha on 07803 200 155 or email elisha.holligan@bupa.com



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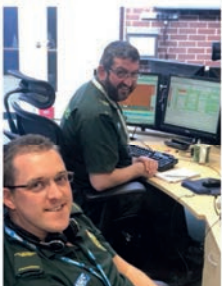
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We are recruiting for specialist clinicians to work in our Emergency Clinical Advice & Triage Centre, triaging patients and working as part of our clinical team to get patients the right care they need. We have roles available in Bedford, Chelmsford and Norwich and also offer a relocation package.

Please visit our website
www.eastamb.nhs.uk for more information

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Opportunity to work remotely from Sussex, Surrey & Hampshire or surrounding counties or be based in our offices in Welwyn Garden City.

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Student Nurses, Newly Qualified and Experienced Registered Nurses



Weston General Hospital is the smallest Trust in the UK - but that doesn't make us any less ambitious. We've made big changes to our senior management team, creating a new and exciting vision for the future of Weston's services.

At Weston General Hospital, you're more than just an employee. As an integral part of our small team; we're keen to see you flourish and grow in confidence, nurturing your ambitions and helping develop your career with a sea view.

We have a wide range of nursing opportunities within our newly reformed Trust. With a comprehensive induction programme, we offer flexible working hours to suit your lifestyle. For Newly Qualified Nurses we provide an early increment payment after the first 6 months of service.

If you would like more information about the positions available please visit www.westonnursing.co.uk



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As a Mobile Screening Nurse you will complete the local health checks on behalf of one of the UK's leading insurance providers, working alongside one of the market leaders of bespoke health screening.

Health checks take place on a mobile ad-hoc basis, allowing to arrange appointments around your existing commitments and manage your own diary.

You must have access to transport, with training and competency in venepuncture.

This is a fantastic opportunity to be part of our expanding team and undertake some rewarding work in a role that offers flexible working and competitive remuneration.



Contact us with your CV at:
jointheteam@squarehealth.com

School Nurse (part-time)

Required from September 2019

An exciting opportunity has arisen for an experienced paediatric Nurse to join our healthcare team.

For further details and to apply, please visit www.thepilgrims-school.co.uk/vacancies

Enquiries: recruit@pilgrims-school.co.uk

Closing date: Thursday 13 June 2109

Interview date: Thursday 20 June 2019

The Pilgrims' School is a registered charity providing exceptional Pre-Preparatory and Preparatory education, and is committed to safeguarding and promoting the welfare of children. Applicants must be willing to undergo child protection screening appropriate to the post, including checks with past employers and the Disclosure and Barring Service. The Pilgrims' School is an equal opportunities employer.



Senior Resuscitation Officer: Regional Lead for the South East (Part Time 0.5 WTE)

We are looking to recruit a Senior Resuscitation Officer into the position as Regional Lead for the South East of England.

Experience as a band 7 resuscitation officer and instructor status in ALS & EPALS is essential. You will have oversight of all activities occurring within the region; liaising with key stakeholders and responsibility for a range of key performance indicators.



Email: dan.purnell@atoetrainingandsolutions.co.uk
or Telephone: 0800 112 3205

DHU Health Care is a 'not-for-profit' CIC providing Urgent Care Services in Derbyshire, Leicestershire & Northamptonshire including Home Visiting, Community Nursing and Urgent Care Centres. DHU also provide the NHS 111 telephone service across the East Midlands.

We employ a range of GP's, ANP's, HCAs, Clinical Advisors & Dental Nurses. DHU believe that patients deserve good quality treatment in a caring and safe environment. Working in partnership with the NHS and other organisations, we are a leading provider of healthcare, with a well-established and quality portfolio of services. We are committed to providing the best possible patient care in the right way, by the right people, in the right place, at the right time to ultimately improve the health and wellbeing of our patients 24 hours a day, 365 days of the year.

Please contact us regarding our current opportunities:

HR: 0300 1000 410 (Option 2)/human.resources@dhuhealthcare.nhs.uk

NHS111 HR: 0300 1000 410 (Option1) dhu111eastmidlands.

humanresources@dhuhealthcare.nhs.uk

CHILD HEALTH



TPN Paediatric Homecare Nurse

This is an exciting opportunity to join the Gastroenterology, Hepatology and Nutrition multidisciplinary team at Alder Hey Children's NHS Foundation Trust.

We are looking for a forward thinking, enthusiastic nurse with excellent organisational skills who can take on the demanding but rewarding home TPN Nurse role at Alder Hey Children's Hospital.

You should ideally have experience of training others, discharge planning and have excellent communication skills and be able to cope in sometimes stressful situations. If you think this is you then come and join our team where you will be welcomed and supported in your new role.

For further information or an informal chat please contact **David Aylward (Gastroenterology Clinical Nurse Manager)** on 0151 252 5190 or email david.aylward@alderhey.nhs.uk or **Sharon Irving (Home PN Nurse)** 0151 293 3547 or email sharon.irving@alderhey.nhs.uk

If you wish to apply for the post please submit an application via NHS Jobs under job reference number 411-MEDICINE-2019-53919 - *previous applicants need not apply*



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Programme now available online



Join us to learn about the exciting developments in nursing research. Hear how leading opinion formers and nurse researchers use evidence and cutting edge methodologies to improve nursing practice and meet future challenges.

Programme themes include patient safety; mental health; workforce; safe staffing; dementia; patient use of mobile applications, methods and much more.

Confirmed keynote speakers:

Professor Hugh P McKenna, Dean of Medical School Development at Ulster University

Angela Tod, Professor of Older People and Care in the School of Nursing and Midwifery at the University of Sheffield

Linda H Aiken, Claire Fagin Professor of Nursing, Professor of Sociology, Director of Center for Health Outcomes and Policy Research, and Senior Fellow of the Leonard Davis Institute of Health Economics at the University of Pennsylvania, Philadelphia

Tue 3 - Thu 5 September 2019

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Whether you're an experienced nurse or starting out in your career, our Northampton site is the perfect place to advance your career while turning lives around. Set in beautiful grounds, the site is a teaching hospital with its own academic centre and 15 Practice Units. You will be empowered to grow as a nurse within a team delivering world-class holistic care. It's an opportunity well worth moving for - we offer relocation support of up to £2,500 to come to a region offering both affordable housing and a great quality of life.



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You will take your experience to the next level on complex cases achieving excellent outcomes through specialised, evidence-based treatments and education programmes. The breadth of Units here provide opportunities to specialise within the services and patient groups that most interest you - with a clear career pathway to follow. Many of our senior leaders and managers started their careers as nurses within the Charity. There are excellent benefits and shift enhancements of 30% extra on Saturday and nights, and 60% on Sunday.

Newly Qualified Nurses c. £29,000 (incl. shift enhancements)

Your career journey will start with a supportive preceptorship programme and continues with roles in different Practice Units to broaden your experience. You can then specialise in a service of your interest, including outpatient, inpatient and rehabilitative care or support services such as nutrition, social work or behavioural health. We also offer a full DBT programme, and opportunities to attend events, weekly CPD and wide range of training.

To find out more and apply visit www.stah.org/careers or contact our nurse recruitment team at nurses@standrew.co.uk or call 01604 616844.



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We have developed a new national rehabilitative service in mental health and are inviting applications for permanent full-time positions as:

Mental Health Nurses

This is an exciting opportunity for an experienced and newly qualified Mental Health Nurse to play an integral and active role in a committed Multidisciplinary Team, supporting the development of our Specialised Mental Health Rehabilitation and Continuing Care Services.

What you will need:

- Be a Registered Mental Health Nurse (with Nursing & Midwifery Board of Ireland or with eligibility to register);
- Possess post registration nursing experience in adult, rehabilitation or community-based mental health services;
- Have established clinical experience or an interest in the areas of mental health rehabilitation, serious and enduring mental health conditions.

We will support you:

By offering a competitive package inclusive of support for relocation and further professional development.

Join Our Team Today!

To apply or for further information, please contact HR on
+35314950021 or Email: hr@bloomfield.ie
Closing date for applications is **30th June 2019**

Bloomfield Health Services, Stocking Lane, Rathfarnham, Dublin 16, Ireland

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Our vision is simple, we help our patients have their best day, every day.



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Delivering through a patient centric approach, coupled with the introduction of user friendly technology, we provide clear visibility of the patient's adherence and persistence, resulting in improved outcomes. All this contributes to supporting our customers to identify interventions which enables patients to rediscover 'their normal' and have their best day every day.

We currently have specialist chemotherapy positions available nationwide.

Benefits for all roles

- Company car or car allowance up to £4250
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- Online benefits portal with discounts from holidays to high street shops
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- NMC fees paid for
- 25 days' annual leave plus bank holidays
- Weekend and evening enhancements
- London weighting allowance (where applicable)

Essential: All roles advertised will either be community based or involve an element of community based nursing, so a full UK driver's license or equivalent is essential.

Growing our own talent

We have developed our own SACT training programme with Birmingham City University to grow our own talent. The degree level course is open to all Home IV Nurses at Healthcare at Home, giving them the opportunity to gain a university accredited chemotherapy qualification and progress their career.



For more information and for all our latest opportunities please visit us at www.hah.co.uk/careers, send your CV direct to recruitment@hah.co.uk or call us on 01283 506555.

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Elevate your Nursing career in Australia



Cpl Healthcare is recruiting experienced nurses and midwives for our client Northern Beaches Hospital in Australia.

Located in beautiful Frenchs Forest north of Sydney, this is great opportunity to develop your nursing career abroad.

Opportunities available in; Theatre, Medical and Surgical, ICU & CCU, Mental Health, Oncology & Dialysis, Emergency & Midwifery.

Some of the benefits you can expect:

- TSS 482 Working Sponsorship Visa available
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- Generous relocation package
- Full assistance with AHPRA registration and visa processing
- Be part of one of the largest Hospital Groups in Australia
- Work within a new Model of Healthcare

If you are interested in this opportunity and would like an opportunity for a skype interview email: eamonn.mullen@cplhealthcare.com or call +353 87 0945454 www.cplhealthcare.com

WEEKLY SKYPE INTERVIEWS



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Quality Care

METHODIST HOMES FOR THE AGED MAISON L'AUMONE (GUERNSEY) CARE MANAGER

We are seeking to appoint a Care Manager to assist our Care Director and lead our committed team in the day to day running of Maison L'Aumone, a purpose built 41 bedded residential home. The successful candidate needs to be an RGN/RMN and possess NVQ Level 5 Leadership & Management in Health & Social Care or be willing to undertake the award.

Applicants will need to adopt a person-centred ethos and be able to demonstrate strong leadership qualities.

For further information, please contact Hazel Robins on 01481 259935 or email hazel.robins@mhagsy.co.uk

Middle East Opportunities in Dubai, Abu Dhabi & Saudi Arabia

OHR Recruitment, based in the UK is assisting key clients in the Middle East – some positions offer face to face interviews in the UK and Ireland – meet the CNO!

Full Time Positions with generous packages, including:

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- NICU – Dubai and Abu Dhabi – 3yrs experience (other applications will be considered) Speciality Certificate (ENB 405 or equivalent)
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- Paediatrics
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- Operating Theatre Nurses
- Midwives
- PICU

Applications to: www.ohrrecruitment.com/job/1691/ or contact OHR Recruitment: info@OHRrecruitment.com – quoting J1691



ICU Career Opportunity in Dublin

We are seeking a **Clinical Nurse Manager 2 for ICU**. As a key member of the senior management team, the CNM 2 in ICU will demonstrate managerial and leadership skills and facilitate effective communication with colleagues in the hospital. The position requires a strategic approach to the development of services and structures, embracing continuous quality improvement and the management of changes necessary to achieve organisational objectives.



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www.hermitageclinic.ie

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BIRMINGHAM COURSES:- JUN 18th JUL 16th

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- ✓ Refresh common breakaway techniques
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BIRMINGHAM COURSES:- JUN 17th JUL 10th

MANCHESTER COURSES:- JUN 27th JUL 22nd

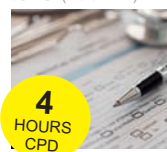
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- ✓ Perfect your Clinical Record Keeping skills
- ✓ Avoid unnecessary negligence claims
- ✓ Best practice for clinical evidence

LONDON COURSES:- JUN 26th JUL 27th AUG 17th

MANCHESTER COURSES:- JUN 18th JUL 3rd

Course Content Includes: -

Codes + Standards, Ethical Considerations, Caldicott Report, Counter Fraud, Common Errors

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£114 (inc of VAT)



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LONDON COURSES:- JUN 22nd JUL 8th, 20th

Course Content Includes: -

Signs + Symptoms of child maltreatment, Responding to concerns, Reporting Strategies

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+VAT**

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HOURS
CPD**

- ✓ Deliver, store + dispose of Medication safely
- ✓ Uphold user/ patient dignity
- ✓ Includes relevant and up to date legislation

LONDON COURSES:- JUN 5th, 19th JUL 17th, 24th

BIRMINGHAM COURSES:- JUN 11th JUL 9th

BRISTOL COURSES:- JUN 27th JUL 11th AUG 8th

MANCHESTER COURSES:- JUN 25th JUL 23rd

Course Content Includes: -

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LONDON COURSES:- JUN 8th, 18th JUL 6th, 23rd

BIRMINGHAM COURSES:- JUN 26th JUL 10th

MANCHESTER COURSES:- JUN 19th JUL 24th

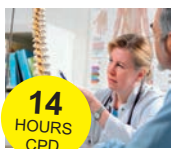
Course Content Includes: -

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LONDON COURSES:- JUN 12th - 13th

BIRMINGHAM COURSES:- JUN 12th - 13th

MANCHESTER COURSES:- JUN 11th - 12th

Course Content Includes: -

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Mental Health Awareness (1 Day)

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£75
+VAT**

£90 (inc of VAT)



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HOURS
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- ✓ Identify signs, triggers and effects of Mental Health
- ✓ Understand causes, symptoms + treatment
- ✓ Provide high standard of support for patients

LONDON COURSES:- JUN 1st JUL 4th AUG 28th

MANCHESTER COURSES:- JUN 22nd JUL 9th

Course Content Includes: -

Types + Causes, Support + Referrals, Discrimination + Stigma, Treatment + Medication

Dementia Awareness (1 Day)

**ONLY
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+VAT**

£90 (inc of VAT)



**7.5
HOURS
CPD**

- ✓ Expand your existing knowledge of Dementia
- ✓ Reinforce confidence when caring for Dementia patients
- ✓ Refresh Dementia care best practice

LONDON COURSES:- JUN 10th JUL 9th AUG 6th

BIRMINGHAM COURSES:- JUN 7th JUL 12th

Course Content Includes: -

Anatomy of the Brain, Types of Dementia, Symptoms + Behaviours, Early Diagnosis

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7
HOURS
CPD



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JUN - 4th, 18th

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JUN - 5th, 12th, 19th, 26th

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JUN - 3rd, 17th

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JUN - 1st, 3rd, 4th, 6th, 8th, 10th, 14th, 15th, 17th, 19th, 20th, 22nd, 24th, 25th, 27th, 28th, 29th

COVENTRY

JUN - 14th, 26th

LEICESTER

JUN - 12th, 26th

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JUN - 4th, 11th, 18th, 25th, 28th

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JUN - 10th, 19th

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JUN - 3rd, 17th

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JUN - 14th, 26th

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JUN - 7th, 17th, 28th

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JUN - 6th, 13th, 20th, 27th

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LIVERPOOL

JUN - 3rd, 17th

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BRADFORD

JUN - 4th, 18th

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