



BEATING BURNOUT

STUDENT HOLLIE IS DEVELOPING AN APP TO HELP NURSING STAFF DEAL WITH WORKPLACE STRESS

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

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Cover picture by Warren Page



37,000 sign our safe staffing petition. Will you?

Our petition calling on the government to fix the nursing workforce crisis in England has been signed by more than 37,000 people since our public advertising campaign launch in September. The ad, which features the picture above, has appeared in national newspapers, on digital billboards, online and on social media. It urges the public to fight for nurses.

Members were out in force at the Labour and Conservative party conferences, urging politicians to support the campaign. RCN steward Maggy Heaton went to Manchester to influence the Tories. "It's so important we get out there and demand action from politicians," said Maggy. "With a general election on the cards, they'll all be vying for our votes soon. Now is the time to seek their support for safe staffing."

It takes two minutes to add your name to our petition. Sign it at rcn.org.uk/peoplespeople-magazines

Lack of staff threatens success of Welsh law

We've insisted the Welsh government takes urgent action to address nurse shortages in Wales. This includes increasing opportunities for flexible working and improving access to CPD. We made the recommendations in a new briefing that shows there are an estimated 1,600 nurse vacancies in the NHS in Wales. Helen Whyley, Director of the RCN in Wales, said: "The lack of nursing staff is a real threat to meeting the requirements of the Nurse Staffing Levels (Wales) Act." Download the report from rcn.org.uk/publications (code 007 907)

Legal limbo in England puts patient care at risk

The RCN has published a report outlining the evidence behind its calls for specific legal responsibilities for NHS workforce planning and supply in England.

The report, titled *Standing Up for Patient and Public Safety*, follows the release of recent NHS figures showing there are now a record 43,671 vacant nursing posts in the NHS in England.

We're clear that to address the number of vacancies and tackle the workforce crisis, there must be clarity on workforce roles and responsibilities and that these must be set out clearly in law.

Download the report from rcn.org.uk/publications (code 007 743)



Public back NI nurses as strike ballot nears close

Members working in Health and Social Care (HSC) services in Northern Ireland have only a few days left to decide whether to take industrial action, up to including strike action, over the nurse staffing and pay crisis there. Voting papers must be returned by 6 November. Any agreed action will start within four weeks of that date.

RCN members and staff have been spreading the word in workplaces, with bus adverts raising awareness among the public. A petition demanding the Department of Health acts to resolve the staffing crisis and pay Northern Ireland nurses what they deserve has had more than 19,000 signatures so far. Sign it at tinyurl.com/rcn-ni-petition and find out more at tinyurl.com/rcn-ni-ballot

Shed load of savings



From half-price cinema tickets and bill-busting utility offers to Black Friday deals – visit RCN Xtra if you want more BANG for your buck this November.

Xtra benefits. Xtra easy.
Register now at rcn.org.uk/xtra

Climate change: you can help make health care more sustainable



RCN commits to tackling global warming in partnership with members and health care providers

The RCN has published a statement of how it intends to help tackle the climate change crisis. It stresses the negative consequences of global warming on people's health and says these will be catastrophic if urgent action isn't taken.

The statement says nurses have a duty to protect and promote public health in the face of threats posed by climate change but that the health care sector, as a major contributor to global warming, must also play its part.

Members at RCN Congress in May discussed the climate emergency and how nursing staff can help achieve a low carbon health care economy. Over the next six months the RCN will consult with members and stakeholders to develop a climate change strategy.

This will focus on several approaches including identifying and sharing practical ways in which members can develop sustainable initiatives in their workplaces and lobbying for more sustainable procurement of items used by nursing staff to deliver care.

RCN Professional Lead for Sustainability Rose Gallagher said: "As the largest profession delivering health care, nursing is uniquely placed to advocate, educate and lead action to mitigate the risks associated with global warming. As a profession we can drive changes to help us practice, work and live in more sustainable ways."

The RCN is already taking steps to help nursing staff and their employers reduce avoidable waste through initiatives such as *Glove Awareness Week*. It also supports members to get involved in decisions about procurement, and contribute ideas to making care more sustainable through its *Small Changes, Big Differences* campaign.

"There is some great work happening with members changing practices to help reduce their workplace's carbon footprint, while improving care," added Rose. "We're committed to extending that to help all those involved in health care to reduce the impact on the environment of delivering such care."

Visit rcn.org.uk/publications (code 007878) to download the statement or go to rcn.org.uk/small-changes to get involved.

REMEMBERING LAURIE



Jo Jones

Adult registered nurse and mother of Laurie Jones

Last month my daughter Laurie (pictured above) died after crashing her car on her drive home from a late shift at University Hospital Wales in Cardiff, where she worked as a paediatric nurse.

Laurie was a phenomenal young nurse with a big heart and gentle soul. I've been inundated with messages from her colleagues, all wanting to share with me how passionately she fought for her patients and the warmth her smile brought to the A&E department where she worked. I've also been contacted by the parents of patients Laurie cared for, thankful for the extra lengths she went to. I've learnt that on the night she died Laurie saved a baby boy who had stopped breathing.

Her reflections are a real insight into who she was as a nurse. One of them reveals how she felt when a baby died due to sepsis. Though she was only remotely involved in their care, she admonished herself for not pushing harder for immediate intravenous antibiotics. "I must be aware and accept my limitations as a nurse," she wrote. "Next time I'll express more strongly how sick the child is."

Laurie instinctively knew what to do in an emergency. When her sister had a seizure as a young child, Laurie picked her up, kept calm and sought help. Within the first few weeks of starting her nursing degree course, her lecturer told her she was born to nurse. I'm so proud of the difference she made.

tinyurl.com/rcn-grief-support



What does the RCN mean to you?

“  The RCN is one voice together ”

“  The RCN is professional, supportive and listened to ”


“  The RCN is an excellent, professional organisation ”

“  The RCN is my nursing family ”

“  The RCN provides mentorship and learning ”

“  The RCN is a friend when you're in need ”

“  The RCN is there to support nursing staff ”

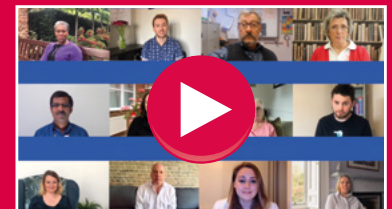
“  The RCN provides a range of resources to help you throughout your career ”

“  The RCN is its members ”

“  The RCN provides the opportunity to be part of what is possible ”

Get involved and together we can achieve more

We've created a film with members explaining what services the RCN offers and what it means to be a member of the RCN. It highlights all the ways you can get involved with the College and how, by working together, we can achieve more. Watch the film at rcn.org.uk/get-involved-video and read more about how to get involved at rcn.org.uk/get-involved



New deal for nursing students?

There are rumours the government is gearing up to introduce a new deal for nursing students in England to boost the number of applications to nursing degree courses. The suggestion – student loan repayment in return for NHS service – is one of two options we suggested and costed a whole year ago. We're asking for at least £1bn per year to be invested into nursing higher education in England to help fix the workforce crisis. Join our fight: rcn.org.uk/peoplespeople-magazines

How to #FundOurFuture nurses

CURRENT SYSTEM	RCN OPTION #1	RCN OPTION #2
Tuition fee loan	Tuition fee grant	Tuition fee loan, wiped after 10 years NHS service
Means-tested maintenance loan	Annual means-tested maintenance grant	Annual non-means-tested maintenance grant
➔ Long-term debt	👍 Debt free	👍 Debt wiped after 10 years
➔ Poor recruitment and retention	👍 Greater incentive to study	👍 Guaranteed NHS job

The big picture



Artists from CreativeConnection sketch the story of what happened at the RCN's recent Black History Month conference in the West Midlands. The event was one of a number held across England in October to showcase and celebrate the contribution of black, Asian and minority ethnic nursing staff.

PATIENT PERSPECTIVE



Michelle says nurses made all the difference when her son was treated in A&E

It was a Friday afternoon when I got a call from the school to say my four-year-old son Max had been in an accident.

I asked the usual questions. Had he been knocked out? (No). Was he bleeding? (Yes). I flew out the door and arrived at the school to find my son clutching gauze to an inch-long gash on the top of his head.

Off to Barry Hospital we went. When we got there, we took a seat in the children's waiting room before being called in by nurse Dean, who was just wonderful with the scared four-year-old and his anxious mama. He checked his head and then sent us for an x-ray. Max was then sent to

see the equally brilliant nurse Linda for stitches (luckily, we got away with glue).

As we were leaving Max got a bravery award from nurse Dean, which he was very proud of. Dean reminded us that he will see us again, whether it's for Max or Leo (Max's twin brother) or both, because kids will be kids!

I can't thank the staff at the hospital enough for looking after us. Even if it was just something minor to everyone else, it was huge to us. Everyone seems to moan about the NHS but here's the proof: the staff are absolutely fantastic!

Max has bounced back. I'm still slightly traumatised, but I know we'll be back a hundred times over the years. I just hope we encounter the likes of nurse Dean and nurse Linda every single time.

MEET THE MEMBER

BEAT THE FLU



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

Name: Victoria Riddle (née Southgate)

Role: Community children's nurse

Describe your job in three words: Rewarding, challenging and caring

Why did you choose the profession? I always wanted to be a nurse. I wrote to a university when I was 15 to ask how to apply.

If you weren't a nurse, what would you be? I think I'd make a good chat show host.

What item can't you do without at work? My diary.

What's the best bit about your job? When you see you've made a difference.

What helps get you through a difficult day at work? The support of colleagues – I am part of a lovely team.

How do you unwind? I enjoy swimming and love a good TV drama.

Who would play you in a film? Lisa Kudrow

What's the best lesson nursing has taught you? That everyone is different and really there's no such thing as "normal".

rcn.org.uk/beat-the-flu



THE VIEW FROM HERE



Hilary Nelson

RCN steward, Forth Valley NHS Board, Scotland

We introduced the RCN's *Rest, Rehydrate, Refuel* (3Rs) initiative into our department to encourage and enable staff to take breaks. Together with my senior charge nurse, we created break buddies and a designated place to store staff water bottles.

Working in intensive care, some nursing staff were reluctant to take breaks as they didn't want to leave their patients. The break buddy system means staff are covered and given the peace of mind that their patient will be cared for. As a result, the culture around breaks has started to change.

We know one of the main reasons nursing staff find it difficult to take breaks is that services are short staffed. That's why it's so important to get managers on board. They can play a pivotal role in demonstrating leadership and prioritising rest breaks. Our senior charge nurse often steps in to allow staff to take breaks during busy periods.

Recently some colleagues told me they're not allowed water bottles in clinical areas. This isn't the case so I'm working with our infection prevention and control team to develop a standard operating procedure and spread the message that staff can, and should, have water bottles at work.

There are lots of resources to help embed the 3Rs campaign in your workplace. The key is to talk to everyone and keep talking.

rcn.org.uk/rest-rehydrate-refuel



What you've been saying

Running challenge thanks

Thank you so much for featuring my unicorn running challenge in the last issue (*RCN Bulletin*, issue 380, page 6). I felt very proud to be included and proud that I had achieved what I set out to do with my running. I contacted some of my former lecturers about it and one has asked me to come back to my university to give a talk about student mental health.

It was an honour to write for the RCN and promote mental health within the nursing profession, particularly with student nurses.

[Katt Gubb by email](#)

Speaking up about suicide

We had several responses to our article by nurse Gemma (*RCN Bulletin*, issue 380, page 9) who faced a fitness to practise investigation after attempting suicide. Here are a couple of them

I suspect there are hundreds of nurses in this position who will not speak to colleagues or managers for fear of the repercussions. The fact the NMC even consider that a nurse in such a fragile position should be subject to the terrifying ordeal that is a fitness to practise investigation is unbelievable, and further emphasises the need for drastic changes to these prehistoric practices that continue to be tolerated within the nursing profession. We need to support our colleagues and friends and ensure that everybody is aware, it's okay not to be okay...even for nurses.

[Julia on Facebook](#)

I have struggled with mental health issues and have been very fortunate to have had huge support from my work family. It has helped so much in my recovery and it's a shame that some colleagues have not had that same support.

[Lucinda on Facebook](#)

QUOTE OF THE MONTH



A lack of staff must not be used as an excuse for denying nurses the breaks they're entitled to

RCN National Officer Kim Sunley on employers' legal duties to ensure nursing staff have proper rest breaks. Find out more at rcn.org.uk/healthy-workplace

FOUR THINGS TO DO IN SEPTEMBER

1. Sign our petition calling on the government to fix the nursing workforce crisis in England: rcn.org.uk/peoplespeople-magazines
2. Get the flu jab to protect yourself and your patients: rcn.org.uk/beat-the-flu
3. Find out the history behind the fight for nursing registration: rcn.org.uk/library-exhibitions/wake-up-slackers
4. Check out *RCN Bulletin*, and our other member magazines, online: rcn.org.uk/magazines

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



We asked our social media followers what they think about treatment for gaming addiction being available on the NHS as the first specialist clinic is launched in London

Either people are treated for mental health issues or they're not. It doesn't matter whether they relate to gaming or anything else. @John110000

In a perfect world, yes. I agree the NHS is meant to be comprehensive, but where funding is already being cut on current essential services and decreased access to drugs, how do we determine what is deemed important on an already stretched health care service?
@comerfordDiana

Health needs are constantly changing and we need to be able to respond to new and emerging health concerns. Although gaming disorder support should not solely be the responsibility

of the NHS, it should be a collaboration with the gaming firms to build preventative measures.
@CharlotteNHSRN

I believe in the NHS founding principles of universal comprehensive health care. All illnesses should be treated. No-one should be denied compassion, care, justice and their dignity. @AmeenKam

As with any obsession, gaming addiction can mentally, emotionally and physically affect millions of children all over the world. Without the right knowledge and understanding of these behaviours, it will definitely stimulate more harm. @trisha_pinuela

Gaming can consume. Why would public health – inclusive of the NHS – not tackle this where it tips into addiction? I think key to this issue is education: defining where that tipping point is. @EmilySm95985979

'A smack is a hit'

As Scotland becomes the first UK country to ban smacking children, RCN member Michelle Moseley reflects on her role as an expert witness in the development of a similar law in Wales

If another adult did something we didn't approve of, we wouldn't hit them to make them understand they'd acted inappropriately.

We need to start applying this same rule to disciplining children. A smack is a hit. Even the term "smack" minimises what a hit is.

The Welsh Government's bill on this issue is so important, but it's not about criminalising parents. It's about educating people and explaining that a smack can escalate. I've seen this happen in my work as a health visitor and as a safeguarding lead nurse.

Attitudes towards smacking have changed in the last couple of decades but there is still a minority of parents who think smacking children is OK. We need to help these people understand alternative ways to discipline children. This proposed legislation in Wales would help us stress the importance of not smacking.

Parenting isn't simple. People do lose their temper, but we can show people that walking away from a potentially difficult situation with a child can make things better. In my work on the Welsh Government Task and Finish Group, we're developing ways to ensure people know about this bill, so parents become educated about new approaches.

I passionately believe that as nursing staff we need to use our experience, knowledge and compassion to be advocates for those who are unable to speak out for themselves.

MESSAGE TO MEMBERS



Dame Donna Kinnair RCN Chief Executive & General Secretary

It's really important for us, as nursing staff, to take care of ourselves, as well as others. We must find time at work to prioritise our basic needs - drink adequate fluids, eat healthily and pass urine. These things are fundamental to us being able to deliver safe care.

Twelve-hour shifts are well known to be of concern. Most of us recognise that our concentration may be less focused after eight hours nursing in a demanding environment – yet little research has been done into this. What we do know is that night shifts can be damaging to health.

A recent *Nursing Notes* survey had stark results. It looked at how safe health care workers felt driving home after a night shift. Of the 2,660 respondents, 73% said they felt unsafe and 58% said this was because they didn't have time to take their break at work.

This is unacceptable. In health care environments, where nursing staff are making important and often safety-critical decisions about patient care, work breaks are a necessity not a luxury.

Fatigue-related errors and accidents are a very real risk for shift workers and the patients they care for. A 20-minute break is the legal minimum for staff working more than six hours and for safety-critical roles, two or more longer breaks are needed. Employers must take this seriously.

rcn.org.uk/healthy-workplace



Beating burnout

As national self-care week approaches, three RCN members share their research, advice and innovations on how to overcome work-related stress and fatigue

Dr Hannah Andrews wrote her PhD thesis on self-care and self-compassion in nursing. She says there must be a change in the profession's culture so staff give themselves permission to prioritise their own health

How many times have you heard flight attendants say: "Put your own oxygen mask on first before assisting others?" It makes complete sense. So why do nursing staff find it difficult to care for themselves before and alongside caring for others?

Understanding that we should direct care and compassion towards ourselves is a challenging idea. We only appear to consider and use self-care as a reactive way of coping. It's not built into our work lives. Patients are always our priority, and while many of us enter the profession to care for others, our needs shouldn't be sacrificed while we offer compassionate care.

Our nursing identity is important here. It's more difficult to access self-care when we find it difficult to have a sense of ourselves outside nursing.

We're also more likely to be able to look after ourselves if we're working in a stable or safe environment, or we feel safe within our work team. Sadly, there are many reasons why a lot of us might feel this is difficult in today's challenging and ever-changing health care environments.

We need to give ourselves permission to proactively care for ourselves, or receive permission from someone else, such as our managers. If we do this, we're

more likely to experience a greater sense of wellbeing and to feel more equipped to manage the difficult emotions that come with our jobs.

This way of thinking needs to be embedded within nursing culture too, with permission to self-care and be self-compassionate being promoted early on in our careers.

“ Our needs don't need to be sacrificed for us to care for others

Newly registered nurses are seriously at risk of early career burnout at a time when we need them most. Therefore a module on self-care in the nursing curriculum and early key messages could help, so learning to look after themselves and being given permission to do so becomes part of their formal education.

The NMC Code places a focus on caring for patients and being well enough to care for patients, but we need policies and procedures in place that state self-care is not only acceptable but essential in a health care environment. Self-care needs to be a formal part of a nurses' duty of care.

We need to know that we matter. Our needs don't need to be sacrificed for us to care for others.

Hannah has contributed to our self-care project and the RCN's Healthy Workplace, Healthy You campaign. Visit rcn.org.uk/healthy-workplace

🕒 Read more about Hannah's research at tinyurl.com/hannah-andrews-self-care

Top tips for self-care

Steph White is an emergency nurse in Kent. It wasn't until she took time off recently that she realised she was suffering from burnout. She shares her advice for looking after yourself

1 Keep it healthy
Exercise, consider your diet and stay hydrated. If you find it difficult to motivate yourself to exercise, do something you'll enjoy that will get you moving – a walk in the park might be as helpful as a gym session. But remember a little bit of what you fancy is OK – just avoid the guilt afterwards.

2 Write down your worries
It can help you formulate a plan to deal with the issues.

3 Get the rest you need
Not always easy but stress can get worse when sleep deprivation takes hold and your motivation will decrease if you feel tired and drained.

4 Approach social media with caution
It's great for keeping up to date but don't worry unnecessarily about everyone else's seemingly fabulous lives. Be happy for them but focus on you.

5 Get some you time
You don't need holiday plans to book

some time off work. Spend time in your home and do something you love that you haven't done for a while.

6 Take a break from negative people
Instead find someone who will be a positive influence, whether they are someone you know personally or a positive role model in the public eye. Help to change your mindset by using positive words in your day-to-day language too.

7 Remember self-care
Work on your self-image. Remember not everything is your fault.

8 Reach out
Open up to a friend, spouse, family member, colleague, union rep, GP, or counsellor. Remember you are not alone.

9 Time for a change?
Ask yourself if it's time to try something new. However much you love your job, it's sometimes good to take time out to get experience in another area and return when you've had a break.

Hollie's anonymous online support for nursing staff



Nursing student Hollie Lawrence (pictured above) explains why she's developing a trauma awareness app for health professionals

We all know it's good to talk about the traumatic situations we're regularly confronted with and thankfully most nurse managers stress the door is open for us to chat. While this is welcome, how we react to trauma differs from person to person and this might not be the best way for all of us to deal with these issues. Many of us are simply not confident enough to always come forward if we've been affected by a situation at work. Speaking out can feel like a big thing to do with some people feeling scared of identifying they have a need.

That's why a trauma awareness app could be so helpful. Staff could remain anonymous but still get speedy access to support for trauma and how best to cope with what they're facing.

I'm now working on developing an app to do this after winning funding and business development mentoring in a university competition. I really hope it proves to be a way to remind people that however they're feeling, they're not alone and their life and views matter.

I've also set up a website and a private Facebook group called ProVent, which already has 850 followers. It's a place for health care staff and students to express, explore

and educate each other about stress-related illness and burnout. It's also a platform for health care-related questions, videos and relevant literature.

I know there's a need for this kind of site because some student nurses have already told me the support they've received from ProVent has helped keep them in nursing.

Hollie is developing the app after winning £5,000 in funding in an Anglia Ruskin University competition. She also won three days of business mentoring in Spain, and a one-year membership of the Future Business Centre by Allia, where she is working with their team to help develop the app.

“

Staff can remain anonymous but still get speedy access to support

Picture by Warren Page

More information

The RCN campaign, *Healthy Workplace, Healthy You*, supports nursing professionals to lead healthy lifestyles so they can maintain both physical and mental wellbeing. Visit rcn.org.uk/healthy-workplace
You can also contact RCN Direct for advice. Visit rcn.org.uk/get-help or call 0345 772 6100.

10 FEATURES

Reducing the risk of harm

RCN safety reps have been keeping members safe in their workplaces for more than four decades, but what does their role involve?

Imagine working in a place with no regard for safety. Where fire exits are blocked, slips and trips occur routinely, assaults against staff are commonplace and equipment is faulty and dangerous.

Despite legislation being in place for many years, there are still a number of health and safety issues in the workplace, including work-related stress and musculoskeletal injuries. Employers need to understand the importance of health and safety. Staff are a valuable asset so protecting them is sensible – and a legal requirement.

A safe working environment doesn't happen by chance. It requires commitment, knowledge, partnership working, plus a lot of hard work. Which is where RCN safety reps come in. Safety reps do remarkable things, sometimes unnoticed, often behind the scenes. But the focus of everything they do is ensuring that members are able to carry out their work without risk of harm to themselves or their patients.

Cath Jones, a neonatal sister at Wrexham Maelor Hospital (pictured below), is an RCN safety rep and the role brings her immense satisfaction.

Rewarding role

“Making sure that members' concerns have been resolved and that you've got a healthy workforce out there – that's the greatest reward,” she says.

Cath works on a wide range of safety issues, from problems with heating to serious incident reviews and the implementation of safe staffing legislation. The historic Nurse Staffing Levels (Wales) Act became law in 2016.

There are also meetings to attend, inspections and assessments to carry out, and various laws and directives to digest and understand. Trade union legislation allows reps to take time off from their substantive post to carry out union duties. Even so, on top of her role in a neonatal baby unit and her

First point of contact

Kim Sunley supports safety reps in her role as an RCN National Officer. She says: “RCN safety reps are a first point of contact for members with safety concerns, such as workplace accidents, or issues with the working environment, including access to moving and handling equipment or responding to violent incidents.

“They work with employers to ensure relevant health and safety legislation is complied with and carry out safety inspections, contribute to risk assessments and alert colleagues to their health and safety obligations and risks. They are a vital part of the RCN's network of workplace representatives.”

“

Making sure you've got a healthy workforce is the greatest reward

work as an RCN steward, isn't all that extra work too much to fit in?

“It is a lot but it's thoroughly rewarding and totally enjoyable,” Cath says. “And the feedback from members is very satisfying.”

She has been a safety rep since 2008 but the training never stops. Cath doesn't need to know about everything of course, but she does need an overview and know who and where to go for advice. RCN officers offer valuable support and close networks mean there is always someone to ask.

Safety reps are also vital cogs in the RCN's campaign work, spreading messages about initiatives such as *Rest, Rehydrate, Refuel* and *Healthy Workplace, Healthy You*.

European Week for Safety and Health at Work, at the end of last month, is a good prompt for members to meet with their RCN safety rep and find out more about what they do to make your workplace safer. You may even be interested in joining them in changing things for the better.

🔗 Find out more about becoming an RCN safety rep at tinyurl.com/ren-safety-reps
Call RCN Direct on 0345 772 6100 if you have concerns about safety in your workplace

Words by Daniel Allen
Picture by Ian Southerin



‘You don’t need to be nervous’

Dee and Tony are CQC inspectors. They’re also registered nurses and RCN members. They explain what their job involves and how they’re on the same side as nursing staff



Dee McEvoy and her colleague Tony Cliffe (pictured above) have been registered nurses and RCN members since the 1980s. They now work full-time as inspectors for the Care Quality Commission (CQC), the independent regulator of all health and social care services in England.

“It’s a challenging and complex role,” says Dee. “Our nursing skills are important because they help us understand the environment being inspected and ensure the care being delivered is safe.”

Each CQC inspector oversees a portfolio of services, usually within a geographical area. “We have to maintain an oversight of these services, monitoring and highlighting any risks, dealing with safeguarding issues and making sure there’s a relevant inspection programme in place,” says Dee.

A lot of work happens behind the scenes before an inspection

takes place, including rigorous planning and the analysis of data and information sent over by the service provider. “We also try to involve an expert by experience. This is either someone who has used the type of service we’re inspecting or who cares for someone who has,” she says.

When the time comes for Dee and Tony to enter a service, they’re mindful of putting the nursing staff they’re visiting at ease. “It’s really important that as inspectors we treat staff with dignity and respect and listen to what they have to say,” says Tony. “We don’t want people to feel pressured by the experience and we don’t want to disrupt patient care. We try our best to work with people, and to work around them, so they can continue with their job.”

“I understand that people might feel nervous but we’re not there to catch anyone out,” reassures Dee. “We’re there to ensure

people receive safe, effective and responsive care. I know that nursing staff want the same for their patients.”

Though staff sometimes don’t want to speak candidly because they’re worried about the repercussions, Dee says names are never used in inspection reports or in feedback to the employer, unless a safeguarding issue has been disclosed. “We want to protect people’s anonymity, so they have the confidence to speak to us,” she says. “If you’re confident, competent and knowledgeable then you don’t need to be nervous,” confirms Tony.

Dee describes the job as satisfying and interesting but all-consuming. “The workload is immense but it’s an incredibly fulfilling job. I feel it really does make a difference. I love inspecting and ensuring people are safe.”

“

We’re not there to catch anyone out

🔍 To find out more about the CQC and the role of inspectors, visit cqc.org.uk

Words by Zara Davies.
Picture by Gareth Harmer

What makes a service outstanding?

The CQC rates services based on five key questions; are they safe, effective, caring, responsive and well-led? Services are rated on each area and given an overall rating too. There are four possible ratings: outstanding, good, requires improvement and inadequate.

Dee says: “For a service to be outstanding, we’re looking for evidence that it’s exceptional and distinct in some way. In adult social care, the difference between good and outstanding would be those creative and innovative measures that staff put in place to ensure the people being cared for in those services have meaningful and enjoyable lives.

“Care must be visibly person-centred and we’re looking for staff to demonstrate an excellent understanding of people’s cultural and social diversity. Services rated outstanding are flexible and responsive to people’s individual needs and their protected characteristics.”

In sickness and in health

Having a medical condition doesn't mean you can't be a great nurse, but it's important to focus on your strengths, while recognising your limitations. We share Ana's story



When Ana Oliveira (pictured above) was diagnosed with muscular dystrophy (MD) it was a huge shock. Her role as a respiratory nurse at Lane Fox Remeo, the UK's first purpose-built weaning and home ventilation centre, was a demanding job, with long shifts. The pain she was now experiencing meant she simply couldn't do the work she needed to.

Ana was frightened. She didn't know what to expect and she was worried she'd lose her job. But Ana had protection under the Equality Act and a forward-thinking and proactive management team. They worked with the RCN to get the best outcome for Ana, the team she worked with, and the patients she cared for.

Ana now works as a respiratory nurse and activities co-ordinator. It's a role that makes best use

of her skills. She does activities with patients, and, as many of her patients also have MD, she can put herself in their shoes and think about what she can do to help them. She also works in the office on patient discharge, unit audits and making improvements.

Thinking outside the box

Ana says it's great to keep working in this new role and advises others in similar situations not to be afraid. "Talk with your manager and get an appointment with occupational health. I didn't know what I could do but they were really helpful and referred me to the Access to Work programme," she says.

"It's important to think outside the box," adds Head of Nursing at Lane Fox Remeo, Michelle Freeman. "Ana has a huge amount of knowledge and we didn't want

“

It's good for everyone to see this isn't the end of Ana's career as a nurse

to lose her, so we looked at her skillset and what Ana could do to support the senior team.

"She's doing a fantastic job in risk assessment, COSH management, audit and more. It's still early days but Ana's new role has made such a difference to supporting everyone in the clinical team. It's good for everyone to see this isn't the end of her career as a nurse."

Securing the best outcome

Ana and Michelle got support from RCN Officer Catherine Garner, who helped them navigate the situation and identify what new opportunities there might be for Ana. "Partnership working is about looking at things from the other point of view," says Catherine.

"The RCN is here to make sure members get the best possible representation and outcome. I'm aware of constraints from a manager's point of view but sometimes we need to look at things in a different way.

"In this case the managers really cared about what was right for Ana. They wanted to make sure whatever situation was suggested was positive and safe for her – it meant having difficult conversations, but it's been a good outcome."

Download
*RCN Peer Support:
Removing Disabling
Barriers at Work*
from [rcn.org.uk/
publications](http://rcn.org.uk/publications)
(code 007 788)

Picture by John Behets

The RCN peer support service is a network for members with lived experience of disability. To join, watch Ana's story, or tell us about adjustments in your workplace visit rcn.org.uk/peersupport

Talking transgender identity

When nurse Michael began receiving questions about gender identity from adults with learning disabilities and autism, he created a booklet to provide the answers

“Over the last couple of years, we’ve had an increasing number of people referred to us who typically have a mild learning disability and either have transitioned or are confused about their gender identity,” says learning disability nurse Michael Fullerton.

As Clinical Director of Achieve Together, an organisation that supports people with learning disabilities and autism, he creates guidance and training on best practice within the specialty. But providing answers to questions about gender wasn’t easy: “We needed to be better informed.”

When Michael approached trans organisations for guidance, he found a similar problem. They were also seeing more people with autism seeking support, but they only had half the answers. Michael combined their expertise, running focus groups to speak to and listen to people with learning disabilities and/or autism who were trans or considering transitioning.

The groups revealed a need for information on everyday issues. From clothing, hairstyles and vocal training, to tips on talking to loved ones, navigating the health system and dealing with discrimination: “We wanted to give advice through the booklet – in terms of your voice, for example, you can go to a voice coach and there’s apps that you can use. We signpost to support organisations as well.”

Michael also discovered how the experience of a trans person with a learning disability or autism can differ from that of other trans people. “There are people

in the hospital system with a gender dysphoria diagnosis, when actually, it’s not a gender dysphoria issue,” he says. “They are frustrated, because no one’s listening to or accepting what they are saying about their gender. That accumulates to them being distressed generally, and they end up with an inappropriate diagnosis.

Enabling open discussions

“I suspect there are many people with more moderate or severe learning disabilities who might prefer to identify as another gender, but can’t express that,” Michael says. “Or we might observe signs, but we either don’t have the skills to pick them up or we ignore them.”

As part of his research, Michael found that support staff working with people with learning disabilities and autism weren’t always prepared for conversations about gender. “The booklet is designed to offer opportunities for

discussions and allow people to express themselves,” Michael says. “So if learning disability nurses are using it to promote those conversations, it allows people to be open and honest about their thoughts and feelings.”

To help make this kind of conversation the norm, Michael’s made sure the booklet is available for free online. It’s now been translated into Dutch too.

Michael’s booklet has had a warm reception. He was nominated for an RCNi Nurse Award earlier this year and has received positive feedback from trans organisations and users. Already, it’s facilitated a family reunion, helping a grandfather to understand and accept his grandchild’s transition.

Michael says: “Support staff who’ve been using it have felt empowered, more informed and better equipped to have conversations with people, without worrying about saying the wrong thing.”



Staff feel better equipped to have conversations without worrying about saying the wrong thing

Download *Transgender: an Easy Read Guide* at tinyurl.com/LDtransguide

Words by Rachael Healy. Pictures from the booklet illustrated by Change



Eye spy a simple solution

When a child was misdiagnosed after receiving dilating eye drops, Ophthalmic Nursing Forum member Caroline McCaffrey designed a way to prevent it happening again

Ophthalmic patients are often given eye drops to dilate their pupils, so the whole eye can be examined, and its health assessed more accurately.

The procedure is painless, but the pupils may still be dilated hours after the drops are administered. In most cases, this isn't a problem. But if the patient with fixed, dilated pupils is seen by a health professional who isn't aware they've been given eye drops, they could be wrongly diagnosed.

When this happened at Sheffield Children's Hospital where Ophthalmic Nursing Forum member Caroline McCaffrey works as a staff nurse in the ophthalmology department, she thought there must be a simple solution.

“

It's a clear, quick way to show if a child has had eye drops



🔗 Find out more about the Ophthalmic Nursing Forum at rcn.org.uk/forums

“Unless someone has seen the documented patient notes about the use of dilating drops, they could be alarmed if the patient has fixed dilated pupils,” she explains. “Also, if someone was involved in an accident after having eye drops, the paramedics might misdiagnose if they didn't know.”

Caroline came up with the idea of bright yellow wristbands clearly labelled with the child's name, and the date and time of eye drops being administered. “I worked with a designer to create the wristbands and we now use them across the whole trust,” she says.

“It's a clear, quick way to show if a child has had eye drops, especially if they are an inpatient and might be undergoing other tests or procedures.”

The wristbands are used for as long as the eyes remain dilated, then they can simply be removed and recycled. They could also be useful in schools, allowing staff to identify why a child might have blurred vision and take precautions to avoid any accidents.

This is especially important if the child's parents don't speak English as their first language. For young adults who've been treated with eye drops, the wristband can help prevent accusations of taking illicit substances.

Caroline hopes other trusts pick up the idea: “It's not a diagnostic tool, but the wristbands are extra insurance to make sure that misdiagnosis can't happen. The wristbands have been really well received by patients and staff alike.”

Memory serves

Members of the Defence Nursing Forum will pay tribute to nurses who have lost their lives in service to the Armed Forces this November. They'll plant remembrance crosses at Westminster Abbey's Field of Remembrance on 7 November and take part in the Remembrance Sunday Parade at the Cenotaph three days later.

Remembrance Day is a time to reflect on the sacrifice of Armed Forces serving personnel and their selfless dedication to their country, says forum Chair Debra Ritsperis.

“It is a great honour to protect and care for sailors, soldiers and airmen and women who put their lives on the line to secure safety and freedom for us all,” she says. “Today, nursing staff are saving lives and returning service personnel to fighting fitness around the world with routine, emergency response and critical care teams in the Middle East, New Zealand, Canada, the US, Cyprus, Europe and the UK. It is important to preserve a day to reflect on the greatness that has gone before, and the ongoing sacrifices made by so many serving personnel and their supportive families.”



IN THE SPOTLIGHT



Bladder and Bowel Forum

Who's the Chair?

Alison Wileman became Chair of the forum in 2016 after spending four years on the steering committee and serving as the forum committee's continence service lead. She says: "I've been a member since I came into the world of bladder and bowel nursing about 20 years ago."

Recent highlights?

To celebrate the modernising of the specialty and reflect a wider scope of conditions, the forum recently changed its name from Continence Care Forum to Bladder and Bowel Forum. "This is in line with national documents and changes in what continence means," Alison says. "It's about healthy bladders and bowels." The forum has also recently released new catheter care guidelines and bowel care guidance. Visit rcn.org.uk/publications to search and download.

What's coming up?

The forum has plans to create webinars that will accompany the updated catheter care guidelines. Members are also hoping to collaborate with the Women's Health and Midwifery forums on a project about bladder and bowel care in childbirth.

Why join?

"There are not many bladder and bowel nurses, so being part of a network is great and very supportive," Alison says. "Continence isn't sexy, it's often forgotten and isn't always on the agenda. The forum raises the profile of bladder and bowel issues, challenges decisions, makes documents and looks at learning needs."

Read more about the Bladder and Bowel Forum at rcn.org.uk/forums

Find them at facebook.com/groups/RCNContinenceCareForum and on Twitter [@RCNContinence](https://twitter.com/RCNContinence)

WHAT I'M THINKING



Jason Warriner Chair, Public Health Forum

At RCN Congress 2019, the Public Health Forum proposed a resolution on violence reduction and prevention following the increase in violent knife crime across the UK. This resolution led to a working group, looking at the potential role and contribution of nursing and midwifery in reducing violent crime and, most importantly, prevent it happening in future.

Across the UK there are numerous projects and schemes utilising the skills of nurses and midwives to undertake research and develop innovative services. The focus of many of these is to prevent people from committing crimes in the first place, reduce the risk of reoffending and support victims of crime.

The working group is made up of many organisations, from the NHS to charity sector, involving nurses who work with children and young people, in criminal justice, public health and those who have experience working with gangs or on violence-reduction projects.

At present we are looking to build a resource of case studies and good practice. If you are a nurse, midwife or health care support worker working in violence reduction and prevention, we would like to hear about your work. We want to share your knowledge and experiences with others and develop best practice.

Email wendy.irwin@rcn.org.uk



Protecting liver health

The Gastrointestinal Nursing Forum has been central to the creation of a new publication called *Caring for People with Liver Disease*.

Liver disease is the fifth most common cause of death in the UK, and this framework offers updated professional standards for nursing staff, including guidance around liver transplantation.

Michelle Clayton, forum steering committee member, says: "All nurses, regardless of clinical background, have the skills and talents to integrate liver health into their area of practice, as a healthy liver is essential in maintaining a healthy life."

Download the updated professional standards at rcn.org.uk/publications (code 007 733).

Future of fertility

The Fertility Nursing Forum has teamed up with the British Infertility Counselling Association to offer workshops on the advances in reproductive technology that could help patients preserve their fertility. For many young people and adults with life-limiting conditions, treatment could affect their ability to have children. The interactive workshop will equip nurses and midwives to inform and support patients and their families.

The workshop will take place at RCN Wales, 15 November, 9.45am–2.30pm. For more information contact nicola.mills@rcn.org.uk

Find out more about fertility preservation in our *RCN Bulletin* online feature: tinyurl.com/rcn-bulletin-fertility

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

Developing practice in orthopaedics and fracture trauma

10 December

RCN HQ

20 Cavendish Square

London W1G 0RN

This five-hour workshop aims to enhance and update skills for nursing professionals working in this specialty. Counting towards CPD for revalidation, this event from the RCN Society of Orthopaedic and Trauma Nursing (SOTN), includes two expert speakers and three practice-focused workshops.

Sonya Clarke, Chair of the SOTN says: "Our aim is to provide delegates with

an opportunity to further develop their professional knowledge and clinical skills while reflecting on their existing practice and career goals.

"The event provides a space to network with nursing colleagues in similar roles, meet new people, and learn about other areas of the specialty. It always proves popular with delegates."

The workshops include an update for skills and knowledge in casting; caring for a patient with a potential spinal injury; and the latest guidance on tissue viability.

📞 Call 02920 546 460 to book or visit rcn.org.uk/SOTN19 to find out more.



Sunderland

Independent sector network meeting and lunch

4 December

RCN Northern regional office
2nd Floor Avalon House
St Catherine's Court
Sunderland Enterprise Park
Sunderland SR5 3XJ

Celebrate the festive season with other members working in the Northern region's independent sector with lunch and an opportunity to join the networking group. The network is for members working outside the NHS and aims to provide a supportive environment to discuss issues and share ideas.

📞 Book a place on 02920 546 460 quoting event number 894 or visit tinyurl.com/rcn-northern-event

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Bouncing back from the bad days

Life coach and former nurse Mandy Day-Calder talks about tapping into your inner strength to overcome workplace challenges and develop resilience

Like many of you, operating at 100 miles per hour is my norm when juggling work-life priorities. But I then find it hard to switch off when on a break, and my inability to unwind can lead to feelings of guilt and frustration.

For me, talking about how I am feeling helps. I also make a conscious effort to focus on what I need to do to “boost” myself. Instead of beating myself up, I focus on what has helped in the past and what I can take control of to increase my confidence.

The lyrics in the song *Soulmate* by US singer Lizzo include a line about being your own soulmate – this is exactly what all of us need to do to find our way through the difficult times, both in and out of work.

Take charge of your responses

It is easy to blame systems or other people for how you are feeling, but only you can take charge of your emotional response to situations. This doesn't mean issues such as constant under-staffing aren't stressful, of course they are. But you can't magic extra nurses out of thin air or find a solution to the NHS budget. What you can do is take charge of your own responses by tapping into your inner strength and resilience.

The Nursing and Midwifery Council standards of proficiency for registered nurses recognise resilience as a quality needed by



nurses, especially in areas of accountability, safety and care quality.

The standards state that at the point of registration, the nurse will be able to “acknowledge the need to accept and manage uncertainty and demonstrate an understanding of strategies that develop resilience in self and others”.

Find out more

Emotional strength will be explored at the RCNi Nursing and Careers Jobs Fair in Leicester on 5 November where a session on building resilience will be one of many practical workshops. Visit careersandjobsfair.com/leicester



You may have to dig deep to find ways to manage your emotions

Resilience is the ability to bounce back from the bad days, learn from experience and reflect on and put into practice what enables you to cope. But, as with other skills in your nursing toolkit, it's important to remember that resilience can be developed, and that it's perfectly normal to have days, even weeks, where you feel less resilient.

Nurses' working lives are demanding and all-consuming, and you deserve to unwind and forget about it all when you are on a break. But switching off can be hard work, and you may have to dig deep to find ways to manage your emotions.

One of the things I love about the activities I do is how much I learn about myself by meeting my fears head on. In my dog agility club, my trainer talks about metaphorically putting on our “big girl (or boy) pants” and being brave and challenging ourselves.

We are often far stronger and more capable than we give ourselves credit for. So, next time you walk on to your shift, imagine wearing your confident pants – how would you feel and what would you do differently?

Ask yourself what you can do to feel more confident. What will enable you to cope on a day-to-day basis and what do you need to get rid of? Ultimately, you need to determine what is stopping you from being your own soulmate and what you might do to address this.

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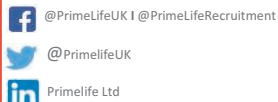
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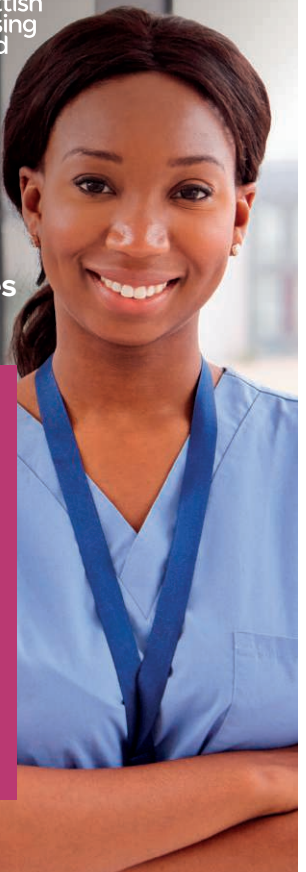
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LloydsPharmacy
Clinical Homecare



Our newly developed Preceptorship Programme which offers newly qualified nurses, or nurses returning to practice after a break, a 6-month training programme to build skills, knowledge and confidence. During this period, an experienced practitioner, your preceptor, is at hand to support and encourage your development as an independent professional, so you can refine your skills, values and behaviours. Every week is meticulously planned and tailored to focus on your individual needs. Get access to world-class clinical training by shadowing experienced nurses and having 1:1 sessions with your Practice Educator. After the programme, you'll join LloydsPharmacy as a fully qualified Clinical Homecare Nurse.

Requirements & Benefits

- We'll provide you with the skills and training that you need to be an exceptional Homecare Nurse, but ultimately it will be down to you to put in the hard work to get to this stage, so you will need to be highly motivated, committed and passionate about community nursing.
- You will need a full UK driving license, along with basic IT skills and a commitment to continuous professional development.
- In return, we offer a salary starting from £27,000 per annum and benefits package, including a fully expensed company car, NMC fees paid, personal pension plan and a flexible schedule that does not involve any night shifts! You will also receive unprecedented support as well as continuous training and development opportunities.



If you would like to be part of our Preceptorship Programme, please visit our website below to learn more and apply! Make sure to follow us on our social media channels too!



mckessonjobs.uk/qualified-nurses

@MCKJobsUK



FORENSIC CUSTODY HEALTHCARE PROFESSIONAL

Greater Manchester Police Custody
£34,000 per annum

42 Hours per week (part time considered)

24-hour service delivered as day and night shifts 6.45 – 7.00
(15 min handover). Rolling shift pattern of 4 on 4 off.

This role would suit HCPs with experience in A&E, Emergency Care, Walk in Centres, Primary Care settings including GP practices, MAU and substance misuse.

The role includes:

- Assessment & care of detainees, victims and staff in custody suites.
- Forensic sampling, including road traffic offence bloods.
- Mental health and substance misuse assessments.
- Providing substance misuse therapies whilst in custody.
- Healthcare promotion, brief interventions & self-harm reduction.
- Signposting to support the reduction of re-offending.
- Working collaboratively with Liaison and Diversion colleagues to identify wider vulnerabilities.

To join our team and deliver the exceptional every-day, please apply.

Qualifications

Essential to the role:

- Must have Right to Work in the UK
- Have been continuously resident in the UK for the previous 3 years, with no more than 3 months spent overseas at any one time.
- Full UK driving licence.
- Registered Paramedic or Registered General Nurse or Dual qualified RGN / RMN with a minimum of 3 years post-qualifying experience.
- Active PIN & full membership of the HCPC (Paramedic), or NMC (RGN) with no restriction on practice.
- Ability to work autonomously and within a multidisciplinary team.
- Strong decision-making skills
- Willingness to develop skill set with forensic training
- Flexibility to move across sites as required

In return for your dedication and commitment we offer:

- Accredited Foundation course with CPD from Teesside University.
- Structured career paths
- Further education specific to forensics.
- Ongoing comprehensive annual training schedule.
- Mitie Group benefits package including pension schemes, private medical cover, share schemes and discount scheme with 1000's of offers available from retailers, leisure and utilities companies.

To apply:

Either email your up to date CV to cc.recruitment@mitie.com or click on the following link – <https://smrtr.io/3xHZ5>



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



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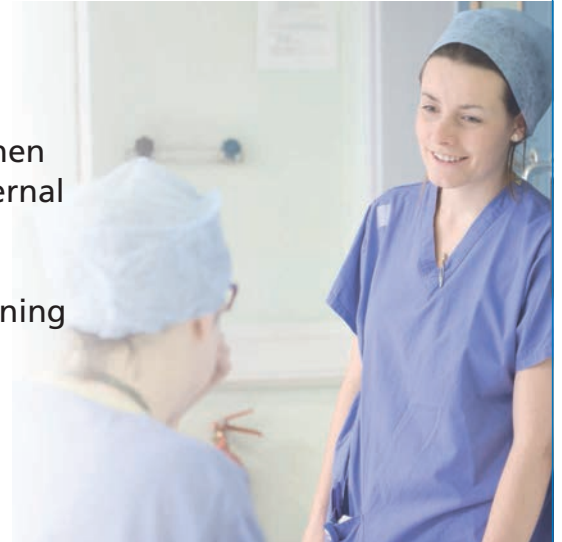


Queen Victoria Hospital
NHS Foundation Trust

Queen Victoria Hospital is a specialist hospital providing care in reconstructive, maxillofacial and corneoplastic surgery along with specialist burns care

We are currently recruiting band 5 nurses to work across the trust.

You will have access to a wide range of opportunities when you are part of our team such as: access to trust and external providers post registration training and support; critical incident simulation training; individualised professional competency based development plan; preceptorship training programme; tailored career progression opportunities; return to practice support; rotations through specialties and departments and working within a supportive multidisciplinary team.



To apply for one of our roles please go to <http://jobs.qvh.nhs.uk/job/v2067507> and to find out more about the work we do here at Queen Victoria Hospital please visit our website www.qvh.nhs.uk/about-us/work-with-us/

Staff Nurses Band 5

£24,214 - £30,112 per annum Trustwide



Portsmouth Hospitals
NHS Trust

Portsmouth Hospitals NHS Trust is one of the UK's largest acute hospital trusts, offering care to more than 675,000 people across the region. We're currently looking for newly qualified and NMC-Registered Band 5 Nurses to join our dedicated teams in the following areas:

- Surgery
- Head & Neck
- Haematology & Oncology
- Radiology
- Renal & Transplantation
- Medicine, including elderly care, acute, high dependency and stroke
- Urgent Care

We offer you:

- a choice of placements
- a tailored induction & training programme
- a rotation programme
- relocation support (dependent on criteria)
- excellent sport & leisure facilities
- nursery rated 'outstanding' by Ofsted
- full NHS benefits, including pension

We have full-time and part-time opportunities, and we'll aim to accommodate your needs so you can advance your skills, gain extensive experience and enjoy a better and more fulfilling work/life balance.

Portsmouth is a bustling historic city with excellent schools, plentiful sport, retail and leisure facilities plus affordable housing. So, take the next step – and get in touch today.



Feel **Valued**
Grow your **Career**
Make a **Difference**

Working together To drive excellence in care for our patients and communities

For full details of the posts available and to apply, please visit www.jobs.nhs.uk
Closing date for applications: 6 January 2020.
Ref: 192-GEN-SN-39

RESPIRATORY NURSE ADVISORS

LONDON | BELFAST | NOTTINGHAM | MANCHESTER
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Excellent Salary | Car | Benefits

We require registered nurses to work on an exciting Secondary Care, Respiratory joint working project.

The ideal candidates must have excellent IT skills and exceptional planning and organisation capabilities. It is also necessary to have a proven track record as an effective team player, possess excellent interpersonal skills and the ability to work in a self-reliant way.

Asthma Diploma is required for this role.

PLEASE CONTACT CHASE ON 0131 553 6644
OR APPLY ONLINE AT WWW.CHASEPEOPLE.COM

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Offering:

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- School assistance for family

Requirements:

- Nursing Master's degree

Interviews - 16th Nov 2019 in the UK



for more information, contact:
eamonn.mullen@cplhealthcare.com
+353 87 094 5454

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Benefits:

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- Excellent location in Melbourne

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Or visit rcnbulletinjobs.co.uk

NURSING

YOUR PASSPORT TO THE WORLD

A Career That Offers You The Opportunity To Work And Travel At The Same Time Opportunities In Exotic Locations

TAKE YOUR CAREER TO THE NEXT LEVEL

Abu Dhabi & Al Ain

- ICU Nurses, OR (transplant, Cardiac & Neuro), Midwives & Nurse Practitioners, OR Manager & ICU Manager
- Paediatric & PICU Nurses, Health Visitor with antenatal & postnatal exp (from 0 – 5 years of age)

**Degree in Nursing and minimum 2 years exp is essential for the above locations.*

Jeddah & Riyadh

- ADON Cardiac & Maternal/Child, Ambulatory Care & ER,
- **Nurse Managers** for Haemodialysis, OR, VIP, Med/Surg & Critical Care Services,
- **Clinical Educator, CQI & PS Facilitator, Vascular Access Nurse Specialist**
- **Staff Nurses** for ALL Specialities (Except Mental Health)

DAMMAM

New hospital opening **mid-2020**. We will need nursing leaders/managers for ICU, Med/Surg, Emergency, Cardiac, OR & Informatics.

**Min 2 – 3 years exp required for all of the above and Degree in Nursing for Management positions as minimum.*

To explore what we have to offer e-mail your CV to

✉ Geraldine at: geraldine.mctigue@ccmrecruitment.com OR
Deirdre at: deirdre.odriscoll@ccmrecruitment.com

☎ UK Free Phone: 0800 279 6149 or Ireland Phone: +353 (0)1 8366092



VACANCY FOR DIABETIC NURSE SPECIALIST (NON-MEDICAL PRESCRIBER)

The Gibraltar Health Authority invites applications from suitably qualified persons for the post of Diabetic Nurse Specialist (DNS). Applicants must, by virtue of their citizenship or residence status, be entitled to take up employment in Gibraltar.

Candidates should hold the relevant qualifications and experience in Diabetes Nursing with good organisational and interpersonal skills, and a minimum of 2 years post qualified experience.

Salary, according to experience ranges from: £42,439; £43,949; £46,128; £47,473; £48,980 and £50,658 per annum, plus allowances.

Relocation assistance is provided and Economy flights from the UK to Gibraltar return are payable in full. Rented accommodation is subsidised.

Prospective candidates are advised to contact Ms Suzanne Romero on Tel. 20072266 extension 3299 or email: suzanne.romero@gha.gi for an informal discussion on the duties and responsibilities of the post.

Application packs are available from the Public Service Human Resources Department on the following email address: - maddie.zammit@gibraltar.gov.gi

Application Forms must be scanned and sent via email to - maddie.zammit@gibraltar.gov.gi no later than 1:00pm on Wednesday 20th November 2019

REHABILITATION CASE MANAGER



Locations: Various Locations across England and Wales

We are a multi award winning UK wide Rehabilitation Case Management Company. We are an organically grown, independently owned business with a transparent vision and integrated values.

We are looking to recruit a registered professional with a background in areas such as brain injury, neurological and/or complex orthopaedic conditions. Rehabilitation Case Management experience is not essential as a full and comprehensive induction will be provided. You will need to be innovative, flexible, have first class communication and interpersonal skills, confident to work independently and as part of a multidisciplinary team and align with our company values.

This is an exciting opportunity to utilise your clinical skills and experience, in a commercial environment to help our clients reach their rehabilitation goals. You will be assessing clients who have sustained injuries of a complex nature with complex health and social care needs. You will be navigating and managing clients through their rehabilitation journey, addressing their needs, through development of collaborative rehabilitation programmes in conjunction with a variety of treating healthcare professionals and communication with all stakeholders.

Our Rehabilitation Managers work from their own home base but travel regularly to meet their clients. They meet as a team at every opportunity and have regular training events to ensure they continue to develop both individually and as a team.

Competitive salary, car allowance and multiple training opportunities including CPD accredited training.

To find out more please email your CV along with a contact number to recruitment@proclaim-care.co.uk or call 01698 892 585.



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We're recruiting for Australia



Pendruccombe House Care Home

In Launceston Cornwall is looking to recruit a Manager for our 52 bedded home, which caters for elderly residents with general nursing needs. The home has a good reputation and CQC track record. We are looking for a Manager with a proven track record of maintaining standards and ensuring CQC compliance. The role is full time with a salary negotiable dependant on experience.

Required skills and qualifications:

- Experience as a Nursing Home Manager/Deputy
- Excellent knowledge of CQC requirements
- RGN/RMN
- Level 5 Diploma in Leadership for Health & Social Care

Please send a detailed CV to pendruccombe@btconnect.com

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Learn more and apply www.derby.ac.uk/rcn





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Supplier to

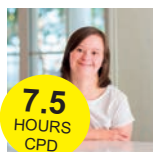


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Safeguarding Adults Level 3 (1 Day) **NEW!**

ONLY £75
+VAT

£90 (inc of VAT)



7.5
HOURS
CPD

- ✓ Fulfill your duty of care
- ✓ Refresh Safeguarding Adults best practice
- ✓ Certificate valid for 3 years

LONDON COURSES:- NOV 5th, 26th DEC 2nd

BIRMINGHAM COURSES:- NOV 6th DEC 18th

MANCHESTER COURSES:- NOV 27th DEC 5th

Course Content Includes: -

Abuse definition + patterns, Vulnerability, Adults at Risk, Types of Harm, Witnesses, CQC Reporting

Breakaway Training (1 Day) **NEW!**

ONLY £75
+VAT

£90 (inc of VAT)



7.5
HOURS
CPD

- ✓ Refresh common breakaway techniques
- ✓ Protect yourself from physical assault
- ✓ Break away from aggressive situations

LONDON COURSES:- NOV 26th DEC 21st

BIRMINGHAM COURSES:- NOV 27th DEC 18th

MANCHESTER COURSES:- NOV 21st DEC 4th

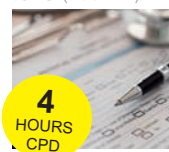
Course Content Includes: -

Causes of attack, warning + danger signs, challenging behaviour, verbal de-escalation, disengagement skills

Clinical Record Keeping (½ Day)

ONLY £65
+VAT

£78 (inc of VAT)



4
HOURS
CPD

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

LONDON COURSES:- NOV 30th DEC 28th JAN 6th

Course Content Includes: -

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

Safeguarding Children Level 3 (1 Day)

ONLY £95
+VAT

£114 (inc of VAT)



7.5
HOURS
CPD

- ✓ Delivered by a qualified Safeguarding Expert
- ✓ Aligned to the 'Skills for Health' guidelines
- ✓ Certificate valid for 3 years

LONDON COURSES:- NOV 4th, 16th DEC 3rd, 7th

Course Content Includes: -

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

Medication Administration (½ Day)

ONLY £65
+VAT

£78 (inc of VAT)



4
HOURS
CPD

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

LONDON COURSES:- NOV 6th, 20th DEC 4th, 18th

BIRMINGHAM COURSES:- NOV 5th DEC 3rd

BRISTOL COURSES:- NOV 14th DEC 19th

MANCHESTER COURSES:- NOV 26th DEC 17th

Course Content Includes: -

8 R's of Medication Administration, Prescriptions, Errors, Storing + Disposing, Contra Indications

Venepuncture + Cannulation (1 Day)

ONLY £95
+VAT

£114 (inc of VAT)



6.5
HOURS
CPD

- ✓ Refresh most commonly practised invasive procedure
- ✓ Theory + simulation learning
- ✓ Includes latest compliance changes + legislation

LONDON COURSES:- NOV 9th, 15th, 23rd DEC 3rd

BIRMINGHAM COURSES:- NOV 13th DEC 4th

MANCHESTER COURSES:- NOV 14th DEC 11th

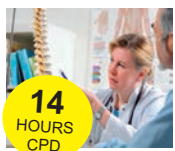
Course Content Includes: -

Practicalities of the Procedure, Equipment, Anatomy + Physiology, Complications, Infection

People Moving & Handling Train the Trainer – Level 3 (2 Day)

ONLY £395
+VAT

£474 (inc of VAT)



14
HOURS
CPD

- ✓ Train key staff to deliver Moving + Handling Training
- ✓ Accredited by The Association of First Aiders
- ✓ Expert training materials provided

LONDON COURSES:- NOV 11th - 12th

BIRMINGHAM COURSES:- NOV 27th - 28th

MANCHESTER COURSES:- NOV 12th - 13th

Course Content Includes: -

Teaching Methods, Law + ACOPS Guidance, Controversial Techniques, Safe Lifting Techniques

Mental Health Awareness (1 Day)

ONLY £75
+VAT

£90 (inc of VAT)



7
HOURS
CPD

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

LONDON COURSES:- NOV 18th DEC 12th JAN 7th

MANCHESTER COURSES:- NOV 12th DEC 10th

Course Content Includes: -

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

Dementia Awareness (1 Day)

ONLY £75
+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:- NOV 29th NOV 13th DEC 11th

BIRMINGHAM COURSES:- NOV 8th DEC 20th

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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- PMVA 1 Day
- PMVA 3 Day

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NOV - 1st, 9th, 14th, 23rd, 25th

LONDON KENSINGTON
NOV - 2nd, 5th, 6th, 9th, 12th, 13th, 16th, 19th, 20th, 23rd, 27th, 30th

LONDON EUSTON
NOV - 1st, 2nd, 8th, 9th, 11th, 15th, 16th, 18th, 22nd, 23rd, 25th, 29th

LONDON VICTORIA
NOV - 2nd, 5th, 7th, 9th, 12th, 14th, 16th, 19th, 21st, 23rd, 26th, 28th

LONDON STRATFORD
NOV - 1st, 2nd, 5th, 6th, 7th, 8th, 9th, 11th, 12th, 13th, 14th, 15th, 16th, 18th, 19th, 20th, 21st, 22nd, 23rd, 25th, 26th, 27th, 28th, 29th, 30th

LONDON WATERLOO
NOV - 1st, 2nd, 5th, 8th, 9th, 12th, 15th, 16th, 19th, 22nd, 23rd, 26th

CROYDON
NOV - 5th, 6th, 13th, 19th

READING
NOV - 7th, 13th, 14th, 18th, 19th

LUTON
NOV - 6th, 13th, 27th

OXFORD
NOV - 4th, 18th

BIRMINGHAM
NOV - 1st, 2nd, 4th, 6th, 7th, 9th, 11th, 12th, 14th, 15th, 16th, 18th, 21st, 22nd, 23rd, 25th, 29th, 30th

COVENTRY
NOV - 13th, 27th

LEICESTER
NOV - 13th, 20th

BRISTOL
NOV - 5th, 7th, 12th, 19th, 21st, 25th, 26th, 28th

CARDIFF
NOV - 6th, 7th, 13th, 20th

EXETER
NOV - 7th, 14th, 28th

PLYMOUTH
NOV - 14th, 28th

SOUTHAMPTON
NOV - 7th, 12th, 29th

PORTSMOUTH
NOV - 6th, 12th, 14th, 20th, 22nd

BOURNEMOUTH
NOV - 14th, 18th

BRIGHTON
NOV - 5th, 19th, 20th

MAIDSTONE
NOV - 3rd, 10th, 17th, 18th, 24th, 31st

MILTON KEYNES
NOV - 5th, 12th, 19th, 26th

COLCHESTER
NOV - 4th, 18th, 23rd

CHELMSFORD
NOV - 13th, 27th

HUNTINGDON
NOV - 1st, 8th, 22nd, 29th

NORWICH
NOV - 5th, 18th

NORTHAMPTON
NOV - 5th, 12th, 19th, 26th

PETERBOROUGH
NOV - 20th, 27th

DERBY
NOV - 6th, 20th

NOTTINGHAM
NOV - 8th, 29th, 22nd

SHEFFIELD
NOV - 7th, 14th, 21st, 28th

LEEDS
NOV - 2nd, 6th, 8th, 13th, 16th, 20th, 22nd, 27th, 29th, 30th

LIVERPOOL
NOV - 4th, 18th

MANCHESTER
NOV - 1st, 2nd, 4th, 5th, 6th, 7th, 8th, 9th, 11th, 15th, 16th, 18th, 19th, 22nd, 23rd, 25th, 28th, 29th, 30th

BRADFORD
NOV - 5th, 26th

PRESTON
NOV - 5th, 6th

NEWCASTLE
NOV - 13th, 27th

HULL
NOV - 6th, 20th

GLASGOW
NOV - 5th, 19th

EDINBURGH
NOV - 18th

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The RCNi Nurse Awards 2020 are now open for entries

We are delighted to announce that
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nursing practice across the UK

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Visit
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**RCNi NURSE
AWARDS**

On behalf of the Royal College of Nursing