

the answer

Harrogate to China: RCN students' global reach

When things go wrong:


Reporting problems
with a medical device

Global nurse:

A community
role in China



Royal College
of Nursing



The new, improved RCN student roadshow is coming to a car park near you!

We've loved meeting so many of you over the last two years via our all-day-conference roadshows. There's been laughter – and tears (really) – and some fantastic information sharing. We've told you what we can offer and how we can support you. And you've told us about your issues and how you need us to help.

Our brand-new look will mean that all of the above will continue but we'll get to meet many more of you and you'll need to do less travelling to find us. So from November keep your eyes peeled for the first ever RCN Students Bus.

We'll be visiting universities and hospitals around the UK in a bright red, fully converted, double-decker London bus. It will come complete with seminar room, cyber café, publications and very friendly staff, all to show you what we can offer and how you can utilise the RCN throughout your studies.

Keep an eye out and give us a shout if you spot us. You might even get a prize for doing so.

Editorial



Welcome to the summer edition of *The Answer* magazine, your quarterly update on the work of the Association of Nursing Students and the Royal College of Nursing.

At Congress this year I was privileged to hear image consultant Billy Dixon speak. He said that the secret to good interpersonal skills is to make other people feel important, to remove yourself from the spotlight and replace the “me” and “mine” with the “you” and “yours”. A tall order

from a page that features my face, my name and my words. So I am dedicating this editorial to thanking you, the people who make students such a dynamic and influential voice within the RCN.

This is our first issue since Congress 2009 and I would like to take this opportunity to thank all of you who attended both Congress and Students’ Day for making such a massive impact. Your input and involvement ensured that the RCN clearly heard the student voice.

In this issue you will find a report on Congress and a round-up of news from around the UK including the RCN Mental Health Conference in Edinburgh and the East Midlands meeting with a local MP.

Also included is news of a system of networking for people who deliver care to older people, our continuing series on global nursing, this time featuring community care in China, and the regional round-ups from your executive committee.

Finally, do you have a burning desire to write about a student nurse issue, or have you been to a meeting, conference or study day or experienced something in university or on placement that other students might benefit from hearing about? If so, please put pen to paper, or keys to computer, and submit something for the next issue.

I wish everyone a wonderful and relaxing summer.

Stuart Young
Consultant Editor
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the answer

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Chance to learn at mental health event

ANS rep for London, Jennifer Luchoomum, attended the RCN’s mental health conference and exhibition in Edinburgh in March, and the experience raised some really interesting issues for her.

The conference was attended by more than 140 mental health professionals, some from as far away as Japan, presenting their research and networking. “I learnt about practice in other parts of the country, and how adaptable mental health nurses have to be – adapting interventions to fit not only their patients but to the service structures in which they work,” Jennifer said.

“One example was a liaison service run by two mental health nurses covering eight hospitals. Having done a liaison placement in a large London teaching hospital, I realised that my experience in a nurse-led team of eight psychiatric liaison nurses was very different from the kind of service provided in rural areas. I reflected on what had been challenging on my placement, and what it might have been like visiting a different hospital every day.”

Jennifer enjoyed a presentation on ‘remission’ as part of the recovery process: “I’ve not learned much about this before, although the term ‘recovery’ is often used. I will be following

up the references cited, and think about how remission as a concept may be useful to some of my patients.

“At a session on caring for patients with borderline personality disorder, I realised I’m not very familiar with the literature on the philosophical and political implications of such a diagnosis, and the role that mental health nurses have played in contributing to the stigmatisation of some patients. Maybe this is an uncomfortable area for me. I can now reflect on the ways we react to this patient group and theorise about it, and how these attitudes can be unhelpful and negative.

“I also heard about several initiatives to improve services for patients in acute wards and learned about modified early warning scores that are being developed for mental health settings. I need to work hard to ensure that my physical health care skills are up to date; this seems to be an area where mental health nurses need to improve. I am determined that in the future I will provide the best, holistic care that I can for my patients.”

Newly qualified nurses speak up

To talk about the experiences of newly qualified nurses, the RCN hosted a world café event earlier this year. Nurses from all four UK countries, and from as far apart as Benbecula and Penzance, took part, telling us about their perception of the qualification process, their experience of preceptorship, and what more the RCN could do to support members at this pivotal point in their careers.

The positives of being qualified came out strongly: a sense of autonomy, of confidence and of pride. But participants’ experience of preceptorship was very mixed and this information will be fed into the preceptorship working group led by the Nursing and Midwifery Council.

What would newly qualified nurses like to see from the RCN? Ideas included more information on preceptorship; practical information for the newly qualified and those mentoring them, and a publication featuring ‘dos and don’ts’ and the RCN support available; work with universities, employers and the NMC to provide clearer guidelines; more promotion of the RCN Learning Zone and an online RCN chatroom specifically for newly qualified nurses.

The RCN’s student team is using information from the event as the starting point for a new piece of work. Watch this space for progress.



Escape on a budget

Did you know that as an RCN member you can benefit from all sorts of discounted treats? From shopping vouchers to days out to hotel deals, crunch the credit crunch and treat yourself to a discounted holiday or evening out this summer!

Visit www.rcn.org.uk/discounts and you can save 10 per cent online by clicking on the Superbreak link, where you can book a whole selection of leisure breaks, themed weekends, concerts and theatre shows.

By purchasing leisure vouchers from the website, you can save 10 per cent at a whole range of theme parks and leisure attractions. Click on the links on the Welcome page and follow the instructions to make sure you get the best deal.

And – coming soon – a 6 per cent discount with Thomas Cook on their complete range of holidays and partner holidays (this excludes anything booked online).

Finally, we have online links to both “Play and Stay” and “Show and Stay” packages, which offer a 7.5 per cent discount on the price of admission to a number of theme parks with hotel stay included, or tickets to a show with overnight stay in a nearby hotel. We also offer a 10 per cent online discount for a range of holiday cottages up and down the country via a link at: www.cottagestayuk.co.uk



Get active, win funding

Dame Betty Kershaw explains why she has set up an award for student activists

In 1981 I became responsible for professional development and training in a large school of nursing. It served hospitals delivering care across a variety of settings and it was then that I first realised how difficult it was for recently qualified nurses to access courses and conferences.

Almost 30 years on and things have not improved; in fact, the situation has worsened. So last year I began to explore if we could develop an undergraduate award here at the RCN.

I have been involved with the education groups at the RCN for many years, and have always been impressed by the commitment of those who chose to be activists.

So we created an Activist Award, or indeed 'Awards' since the funding available each year means it is more likely to be shared between two or three applicants than given to one. It is open to ANS activists within three years of registration who can apply for funding to support any CPD activity other than that which should be funded by the commissioners (for example, a mentorship module) or the employer (for example, mandatory updating). Someone will need to verify your activist role and your RCN membership must not have lapsed. It is not a competition; merely a form to fill in, a few words on why you want the money and a commitment to write a short report on how you have used the funding to improve patient care.

Final details of the Award and how it will be managed are being agreed and information will soon be available on both the RCN Awards site and the ANS website.



RCN students played a significant part in Congress 2009. On day two of the event, they posed questions to Prime Minister Gordon Brown and Conservative Leader David Cameron.

Putting the pressure on MPs

Phil Schneider, your ANS rep from the East Midlands, along with two fellow students, shared their experiences of being student nurses with Phil's MP, Mark Simmonds, back in March.

Nursing diploma students Kelly Hammerton and Christina Smith, studying at the University of Nottingham, told Mr Simmonds of the challenges they face in pursuing their ambition to become fully fledged registered nurses – and the sacrifices they have been forced to consider. They also told him that student nurses in Lincolnshire are struggling to continue their training in the face of mounting financial pressures.

The RCN is currently campaigning for the introduction of a non-means-tested NHS bursary of £12,000 a year for all pre-registration nursing students. A survey of RCN student members in December 2008 revealed that almost three-quarters have had to get a second job so they can afford to study and nearly half have considered leaving their course altogether.

Mr Simmonds pledged to feed the students' experiences into the development of policy by the Conservative party's shadow health ministerial team.

He said: "It's vital that nurses come into and stay in the professions since they are an essential part of the delivery of good quality health care to patients. The current economic situation is undoubtedly tough, with less revenue coming in to the Exchequer to be able to make nurse training more financially appealing to students, but I am very keen to look at ways to address the issues the students have raised."

Phil Schneider said: "We're very grateful for the opportunity to discuss these issues with Mr Simmonds. The financial difficulties that student nurses face are bound to be worrying for them personally, but what's just as alarming is the risk of more and more nurses dropping out of their studies prematurely because they can't afford to make ends meet."

He added: "We must keep student nurses in training because they are tomorrow's workforce and critical to the delivery of high quality patient care in the future."

Want to find out what your local ANS representative has been up to? Check the regional round-ups on pages 12-13.



ICN 2009 in South Africa

As we went to press, this year's International Council of Nurses (ICN) Congress was about to get underway, from 27 June to 4 July, in Durban, South Africa. Naomi Baker, Chair of the RCN's Association of Nursing Students, will be there to represent your interests.

ICN Congress is held every two years in a different location around the world. The ICN's role encompasses regulation, professional practice and socio-economic welfare in nursing, and through the Congress it aims to showcase the role of nursing as a profession in promoting health and well-being among all nations.

"The current worldwide economic climate will weigh heavily on discussions at ICN Congress," said Naomi. "Within the UK alone, the downturn has had a major effect on health care, and I suspect there is a similar situation in other countries."

She added: "There are several network sessions at ICN Congress, and I'll be attending the one focusing on student issues. Look out for my report in the autumn issue of *The Answer*."

Share your experiences and improve older people's care



The Connect in Care network aims to support improved quality of care for older people in Scotland, by supporting staff in care homes, hospitals and community settings to collaborate more effectively, using a Scotland-wide network that is free to join. Student nurses are a key part of the network.

Through the network, students who are interested in caring for older people can access resources (including a free DVD, *Who cares?*), find out about events and training, and join the discussion area where almost 200 members share and exchange learning and experiences.

The Connect in Care initiative, funded by NHS Education for Scotland and NHS Quality Improvement Scotland, in partnership with the Care Commission, provides a safe forum to share useful and constructive experiences.

On the Connect in Care website, you can read about experiences of other students during their placements with older people. Sharing these stories is an important part of the network, and Connect in Care would particularly like to hear about good practice that you have seen in Scotland and would like to share. Book tokens of £10 each are on offer to encourage you to send in your experiences of a placement with older people. For example, what about a moment when you felt like giving up, but then got some helpful and timely advice or encouragement to keep you on track?

Have a look at some of the experiences featured on the website in the Placement Stories section, and see if you can help others by contributing your own story.

By joining Connect in Care you can:

- find out what's going on locally and nationally, in terms of resources and good practice
- network with other members to share knowledge, problems and solutions
- participate in a discussion forum with a multi-professional membership, to ask for advice, or share your experience online with other staff and student nurses
- understand other people's roles and work environments better
- access creative learning resources to help promote the values of relationship-based care.

To join the network follow the instructions at www.connect-in-care.net

To submit your story, click on the website and find the Learning Experiences section, or email your experience to: cic@ed.ac.uk

Or you can send hard copy to: Alison Forbes, Project Co-ordinator, Connect in Care, Centre for Research in Families & Relationships, University of Edinburgh, 23 Buccleuch Place, Edinburgh EH8 9LN. Telephone: 0131 651 1940.



RCN forums – a valuable resource for nursing students

RCN forums are a fantastic vehicle for getting your voice heard and enhancing your professional development. They are made up of groups of RCN members working in a similar nursing specialty or with like interests. By joining a forum you will be able to get involved in the excellent work they do, including holding leading-edge events, producing clinical guidance and influencing the future of health and social care.

You can tap into the wealth of member expertise in the forum area on the Discussion Zone and network with members who work at all levels. You can also get involved by contributing articles to the forum's electronic newsletter and the online forum community.

For information on the 41 forums go to www.rcn.org.uk/forums
Call RCN Direct to join a forum: 0345 772 6100.



Imagine you are eating your favourite meal. It's the one thing you've looked forward to all day: the taste, the texture; enjoying it at the perfect temperature, savouring every mouthful. Now imagine someone else has your plate and is stirring up your meal, which has been blended and looks unrecognisable. You can't move your arms, so this person will feed you instead, and you are unable to communicate, verbally or otherwise, what you want. Are you looking forward to eating this meal now?

One lunchtime, early on in my placement on a continuing care ward for older people, I fed a patient with severe dementia. He was mute and immobile. When a meal was served, he would open and close his mouth to show that he was ready to eat and would continue this action throughout the meal.

For me, I'd had to think about how to carry out person-centred care, rather than how to rush through just another 'task'. People with dementia will stand a greater chance of maintaining a sense of self when treated in this way. What is important is that the patient gets the most they can out of the meal, rather than me getting the task done quickly and moving on.

However, I felt I was being judged by other staff, because I was taking too long and there were a lot of patients to be fed on this ward. I considered this, but made a conscious decision not to let others' opinions affect the way I fed people in future. If fed too quickly, patients often seemed distressed, and some would cough the food back, or shout out – which could be the cue for the feeder to whisk the food away.



The most important meal of the day

Mental health nursing student Lindsey Walker reflects on the apparently simple process of giving an older patient his food

I checked the food was not too hot so it didn't burn him, and I had to put the spoon in at the right moment to match the opening and closing motion of his mouth. I realised the tablespoon I'd been given was scraping the sides of his mouth, so I changed to a teaspoon, which appeared to be more comfortable. I didn't rush him to eat as it would be uncomfortable and he might get indigestion, but I didn't want the food to get cold either.

I sat down beside the patient so that I didn't tower over him and make him feel intimidated, and so he would keep his chin pointing downwards rather than upwards – an easier position in which to swallow. It also meant I could maintain eye contact, to establish trust. Perhaps I should have talked to him more, but once I'd given him information about his meal, it was hard to think of things to say. I've tried to improve on this skill with patients since then. He couldn't smile or tell me what he preferred, but I tried to judge from his giving me lots of eye contact and eating steadily that he was happy with what I was doing. I think he enjoyed his dinner, as he looked satisfied and fell asleep soon afterwards.

I felt worried that I wasn't acting according to the patient's preferences because he couldn't express any. It is a vulnerable position to be in. However, I considered his needs and abilities, and checked his medical notes, which detailed the speech and language therapist's assessment of his ability to chew and swallow. I also drew on my studies in caring for people with dementia. I tried to ensure that this man received food that met his nutritional needs, given in a manner that allowed him to enjoy it. I felt I had cared for him as best as I possibly could.

It is tiring to pay this much attention to the details, but the reason I went into nursing was to make a difference to situations like this; to people like these. The experience taught me that working with people who are dependent upon you to meet all their needs is tough, not only in a physical sense but in a psychological one, too.



Lindsey Walker is a third year student at Birmingham City University.

Congress

The greatest days

Stuart Young reflects on a momentous week for the ANS and the RCN at Congress 2009.

Sunday

Congress 2009 opened with the Take That theme tune, *Greatest Day* – “Today this could be the greatest day of our lives” – a challenging song to be played to our profession as even before Congress we will all have experienced days that could be described as the “greatest”: the staff nurse who has taken charge of an arrest for the first time, a student nurse who has taken out their first drain or a health care assistant completing an NVQ module.

So the title sequence set Congress 2009 a high bar to reach. But reach it, it did.

This was my first time at Congress and what an historic one for me to attend. The opening ceremony on Sunday night saw six dedicated nurses receive RCN Fellowships, two distinguished medical professionals receive RCN Honorary Fellowships, six Awards of Merit given for outstanding service to the RCN and four awards presented to RCN Representatives of the Year. The highlight of the evening for students, however, was the announcement of a new annual award for student activists starting next year. It will be sponsored by Professor Dame Betty Kershaw FRCN (see page 5).

There was a buzz around the evening regional receptions that someone politically important might be addressing Congress the following day and we were invited to submit questions that we would like to see put to members of the Labour and Conservative parties.

Monday

Monday morning saw history made as for the first time in the RCN’s 93-year history a serving Prime Minister took to the stage to address RCN Congress. Gordon Brown spoke passionately about the role of nursing and thanked all nurses for their hard work and dedication. He took pre-written questions including one from our competition winner, Kathryn Tolfrey, on student financial support. As he left he shook the hands of many delegates.

After that amazing experience the whole of Congress felt electric; even if you did not agree with Gordon Brown’s policies or politics, no-one could deny the genuine and heartfelt thanks that the Prime Minister had just given to every single nursing professional in the country – at our Congress!

After coffee, there was a second extraordinary experience as David Cameron, leader of the Conservatives, addressed us, talking about the recent loss of his son Ivan, the impact nurses have had on his family and the debt of gratitude both he and the nation owe to all nurses. He too took questions and our ANS Chair Naomi Baker asked what his party would do about student nursing attrition rates if it formed the next government. You can watch webcasts of these sessions at www.rcn.org.uk/congress.

I am really proud that students got to ask questions of both political leaders. Subsequently there were many items on television and in the national and nursing press, and you may have seen that many of these included comments from and pictures of students in their pink t-shirts. We really proved that we have a voice and are willing to use it to bring attention to student issues.

The day concluded with the first resolution of Congress. It was proposed by the ANS and concerned the need for England to have a standardised uniform following the example of the Celtic countries. We pointed out that the differences in uniform can be confusing because a staff nurse uniform in one hospital could be a domestic’s uniform in another. The resolution was seconded by the Practice Education forum and I would like to take this opportunity to thank them for supporting us.

Then followed the debate and a nervously awaited vote: it is really difficult to sit and listen to a debate on something you have worked so hard on and feel passionately about, knowing that having presented your argument and summarised everyone’s comments the RCN’s voting members have the final say. The vote was passed with 76.9% in favour.

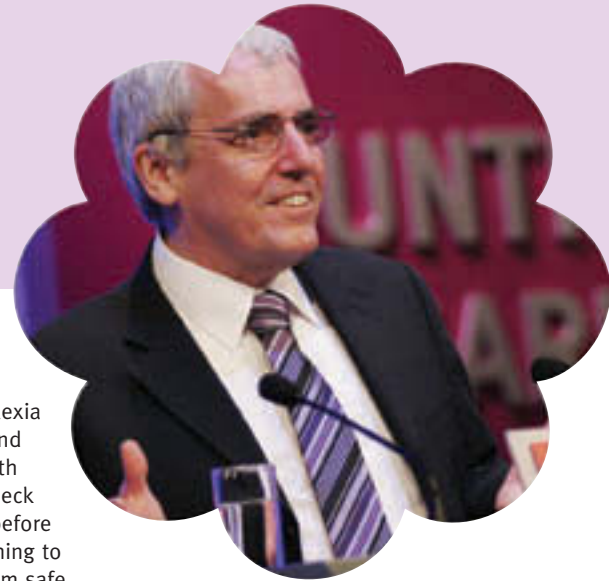
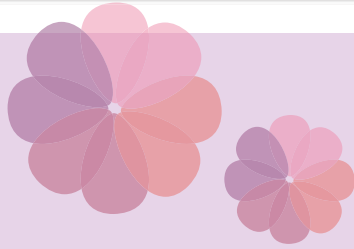
Tuesday

An army of 1,100 students invaded for our Students’ Day entitled “Who Cares? We Do!”, which took place in the beautiful Royal Hall. The conference kicked off with a passionate talk from our Student Adviser Gill Robertson on “Being proud to be a nurse”, and ended with an hilarious personal effectiveness workshop from image consultant Billy Dixon.

During lunch, students had the opportunity to go around the RCN exhibition with its stalls advertising new products, new services, and support for nurses from the RCN, NHS and Nursing and Midwifery Council, as well as career opportunities both here and abroad.

The afternoon session of Students’ Day was chaired by a volunteer from students in the auditorium, and on behalf of the ANS Executive





Committee and RCN students staff I would like to thank Andrew Nelson for his professional chairing of the session. During this session we had an address from Health Minister Ann Keen, in which she said that looking after the nurse is key to looking after the patient. She also took a number of questions from the floor. Meanwhile, the rest of Congress celebrated International Nurses' Day in style.

Debates included one on cardiac screening for young people, which Saffron Brown seconded on behalf of the ANS. Other debates covered the ISA and its current make-up, and the role of HR in the multi-disciplinary team, a job we often overlook but which is essential for effective staffing levels and therefore effective patient care.

That evening the student army invaded the Majestic Hotel, and we had a fantastic reception with music provided by MiXit, a fully inclusive band that set the evening off with a bang. This was followed by an evening meal and a live performance by The Defenders. We managed to get to bed around 1am.

Wednesday

The morning saw Congress turning the red light to green, with a debate on the protection of, and health access for, sex workers. The debate resulted in Congress voting for Council to make the appropriate recommendations to the UK Government to allow up to four sex workers to work together legally before requiring a licence.

The morning continued with a heart-warming and touching speech from Sir Michael Parkinson. His passion for the dignity and respect we as professionals need to give to our patients and their relatives, using his own experiences of the NHS, shows us all what an impact we can make on people's lives. It certainly gave everyone real food for thought.

The afternoon was dedicated to fringe events and there were many to choose from. I attended one on digital communications. RCN Deputy President Bobbie Chadwick gave a personal reflection on how she came to face the research and information technology that is integral to professional development. The benefits to all members of the re-launched RCN Learning Zone were also explained.

In the evening the ANS co-hosted the Monica Baly Memorial Lecture with the History of Nursing forum. The lecture explored student nurse education over the last hundred years, and all those present found it to be a great asset to their understanding of how our profession has been shaped. It also highlighted issues with uniforms that have been around as long as nurses have. The resolution passed on Monday is clearly a good step towards helping improve professional image.

Thursday

The last day of Congress focused on debates, and they proved as ground-breaking, interesting and thought-provoking as on the first day. A discussion on dyslexia was seconded by Susan Tivy-Ward from the



ANS who shared her personal experience of dyslexia and how nurses and student nurses with dyslexia check, check and check again before they commit anything to paper, making them safe, effective and proficient practitioners.

Congress debated assistant practitioners, waste management and the representation of minorities on RCN Council, to name a few of the issues discussed, and all debates had a great amount of input from the floor including many students. As a first-time speaker this was the most nerve-racking experience I have ever been through, but it was also the most rewarding as I gave my thoughts on the debate and influenced a vote of Congress.

It was shocking to me just how many fewer members and voting members were in the hall for the last day. We can all change this by influencing our branch voting members to be at Congress for all voting sessions, or by being one of those members of the branch to vote at Congress. We students are one tenth of the RCN membership so we really should have one tenth of the voting seats, but this can only be achieved by us all getting involved at the grassroots level. So I would like to issue a challenge: let's all try to get one voting member from every branch to be a student next year. Do you think we can do it?

The theme for Congress 2009 was "Counting on Care", and as I boarded my train home I reflected on a week in my life I will never forget. It was the greatest week of my life and as a student nurse I now feel truly part of not only the best profession in the world but the strongest caring family – the RCN.

I look forward to Bournemouth in 2010 (25-29 April) and hope to see many of you there.

Stuart Young
Association of Nursing Students
Executive Member for the West Midlands
Consultant Editor – *The Answer*

To read more student reflections on Congress 2009 visit:
www.rcn.org.uk/development/students/haveyoursay/reflections_from_congress_2009.



global nurse



SHANGHAI, CHINA



A community role in China

Tanya Beresford travelled all the way to China for her placement, helping children learn about health and improving her understanding of working in the community at the same time.



Taking advantage of the unique opportunity to work anywhere in the world during my four-week elective, I decided to combine my desire to help a charity with a personal interest in international aid and development. I decided on China, where I thought that my skills in speaking Mandarin would be useful. After nearly a year of organisation and numerous emails (it can be surprisingly difficult to volunteer your services as a student nurse!), I discovered a charity based in Shanghai which is involved in projects ranging from children's welfare to care of older people, and which was keen to use my nursing experience.

I arrived nervously in Shanghai with only a vague notion of the tasks in which I could be involved. The charity's programme director explained that one of my assignments was to set up a health promotion programme in a school for children of migrant workers. This rural-to-urban migratory population is widely known in China to have little official support, suffering marginalisation from society. Levels of education, health and hygiene are low, with access to medical care limited as costs are often beyond families' financial means. The school itself was incredibly basic - not much more than a two-level building with five classrooms of battered desks, chairs and a blackboard.

There was no heating or air conditioning, despite the extremes of weather Shanghai can experience. Each class consisted of up to 70 children with ages ranging from nine to 14 years.

Health promotion was admittedly not something that I had been greatly interested in before, although an essential aspect of nursing. Initially, I was panic-stricken at the idea of teaching children from a background and culture entirely unfamiliar to me, not to mention contending with the language barrier - my Mandarin isn't that good! However, I quickly came to realise the value of this often overlooked aspect of nursing, particularly in societies where there is little health information of the sort that would be considered the norm in more developed countries. Schools are important arenas for health promotion, as large numbers of people can be reached over several years. If health awareness begins at a young age, hopefully it will trickle through society as the children grow up, thereby improving standards for the whole community.

I decided to use the nursing process as a framework to plan the health promotion programme: it was essential to ensure that any activity was pertinent to the children's current situation, was age-appropriate and easily understood. I

compiled a questionnaire that was distributed through the school to ascertain the children's current health awareness levels, health habits and home situation, so that I could decide what subjects would be relevant. From the data compiled, I decided to teach classes on oral hygiene, basic health and hygiene tips (many children did not understand the importance of washing their hands after using the toilet or brushing their teeth twice a day, for example) and basic first aid.

I taught classes in an interactive style that made the subject both fun and interesting. In China, many schools traditionally teach using rote learning, so this was a new approach for the children. At first they sat quietly and listened, but by the last day they were jumping up and down with their hands outstretched to answer questions! We had a lot of fun during the first aid class, where the children lined up to put each other in the recovery position in the playground. Their parents were peering through the gates wondering what on earth they were doing!

In the final class, the children drew their own health promotion posters to display around the school - both a fun activity and reminder of what they had learned. The posters brightened up the classrooms. It was fantastic to see how interested the children were in their classmates' posters, and how proudly they stuck their own contributions up on the wall.

Understanding the importance of health promotion as part of a nurse's role was certainly a new discovery for me. Nursing is increasingly moving towards catering for local health needs, working in a community setting and in nurse-led clinics, so my placement gave me an insight into this area. I also understood the need to modify teaching for the target audience; for instance, during the class on oral health, I asked the children how many used dental floss. When none of them replied, I soon established that they had never seen, or even heard of, dental floss. This was a very valuable lesson.

We also had a great deal of laughter. When I asked the children what types of teeth people have, answers ranged from 'sharp teeth' to 'smelly teeth'! Several were unconcerned about bad oral hygiene leading to tooth decay, because they claimed you could just buy fake teeth if that happened. True, but hardly conducive to good health.

Although I was in my second year of nurse training and very 'green' in that respect, it was wonderful to be able to use the skills I'd already learned during the course; indeed, I ran a practical hand-washing session after hearing about diarrhoea outbreaks in the school. I hope this skill, which I learned during the first few weeks of nursing, will help improve the health of

the children and their families. The school did not provide soap in the lavatories either, so I arranged with the charity to provide a permanent supply. We also worked on compiling a health promotion brochure to distribute to the children.

“Understanding the importance of health promotion as part of a nurse’s role was certainly a new discovery for me”

After my initial uncertainty about my role and purpose, I received a very positive response. The headmaster told me that the children had asked why they did not have more health promotion classes, having thoroughly enjoyed them. I felt that by providing some health education, I was making a difference to these children's lives, even if only a marginal or temporary one. The charity saw the pilot health promotion programme as very beneficial and plans to introduce similar programmes into other migrant family schools in the area.

I learned a great deal during the elective, including a holistic approach to health promotion, the importance of communication and experience of working in the community – something which is often overlooked as so much of nursing is carried out in hospitals. This will undoubtedly influence my practice. The elective was hard work and it was very sad to see the conditions in which the children were living, but at the same time it was such a joy and privilege to work with them and see their lovely smiles. My only regret is that the elective was not longer.

Tanya Beresford is a nursing student at City University, London.



THE CHINESE FLAG

regional round-ups

East Midlands round-up



Phil Schneider

What a busy couple of months it's been since my last update. We had our student roadshow at the Trent Bridge cricket ground in Nottingham – an educational and inspiring day, even emotional at times. It was great to meet so many of you. A big hello to all the new student information officers (SIOs) we signed up on the day.

As part of the ANS committee's action plan on poverty I chaired a meeting locally in Boston with students from Nottingham University and the Conservative MP for Boston/Skegness Mark Simmonds. The meeting lasted an hour with some encouraging debate between both parties, and Mr Simmonds promising to take back to Westminster some of the region's concerns, including attrition rates and child care. Read more in the news pages.

Another part of our action plan concerns diversity, and with summer here we have three Pride events to look forward to in our region. We need volunteers to assist with these events, so if you would like to help please email me for more details.

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London round-up



Jennifer Luchoomun

In the London region, student information officers have been busy as usual. At the last SIO meeting we were honoured that our Regional Director, Bernell Bussue, attended, along with Pamela Nelson and Stephen Awosunle from RCN London Region. We met as usual at the Royal Festival Hall on the South Bank, but we had to contend with the wind and buskers outside, and inside the venue was busy with merry-makers. Now that attendance of SIOs is into double figures, we'll probably pick a different venue for our 'informal' meetings, and be a bit more formal in future.

A few students from the London region went to Harrogate for RCN Congress, supported by the ANS and the London region. Locally, we are always keen for ideas for seminars and mini-conferences in the London region.

I'm forging links with local RCN branches to encourage students to get more involved at a local level. I've attended the Bethlem and Maudsley branch meeting and plan to attend Lewisham and North Southwark and Bexley and Bromley meetings. I'd encourage you to find out about your local branch meetings and get involved. It's a great way to meet RCN members local to you, and to network.

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North West round-up



Emma Gilchrist

Thank you to those who attended the North West regional student roadshow – I heard it was a fantastic day and am so glad so many of you made it! Unfortunately I was tied down with

essays and exams, as I'm sure a lot of you were too. I can't wait to talk to you and tell you all about Congress for those of you who couldn't attend.

Don't forget, you can contact me with any queries or concerns and I will be happy to help you as best I can. I apologise if anyone failed to reach me via email, as my address was published incorrectly – but don't worry, here it is again. I will reply!

Jump on your experiences and challenges, learn something new every day and don't forget to have a good time when you can!

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Northern round-up



Saffron Brown

Huge thanks to all you Northerners who made it to RCN Congress. The student vibe was great and we really got our voice heard in vast numbers. We are on the lookout for more student information officers (SIOs) and would love to have one in every cohort. Paul, the student member of the region Board, and I meet regularly with the SIOs to gain an insight into the issues affecting you, things you want to see changed and things you are enjoying. The ANS appreciates the efforts of the SIOs and if you feel you could do it, even if you can only spare a small amount of time, please get in touch.

Our region is full of innovative students going on adventurous electives to assist in research. If you'd like to write a piece about what you've been doing, we'd love to hear from you. There is advice on the website or just drop me an email.

Over the next few months I will be working a lot in my role as Vice President of the European Nursing Students Association (ENSA). At the AGM representatives from many European countries will be discussing changes in nursing education – and the effects of the recession. As well as learning from European colleagues, I am proud to represent the UK, where nursing is an advancing and innovative profession.

All the best to those of you who are just qualifying. I hope your nursing career is full of enjoyment and endless opportunities for development.

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South East round-up



Leighann Veitch

The South East has been busy recruiting new student information officers and spreading the word on everything the RCN can offer you as students. So if you feel like you are missing out, or just want to find out more, please do get in touch. Regrettably we had to announce the cancellation of our regional student roadshow, but don't despair! We're working hard to bring the RCN to your doorstep in the very near future.

As the South East region undergoes some changes in geographical area and some

branches are joined up, I'll endeavour to keep you updated and will work together with the local RCN reps to provide the best support for all you students out there in practice. We're here to help.

leighannveitch@hotmail.com

South West round-up



Janine Stokoe

My name is Janine Stokoe and I am your new representative for the South West. I am 36, married with five-year-old twins and live in Yeovil, Somerset. I served in the Royal Navy for 14 years in the medical/dental branch, reaching the rank of chief petty officer. I spent two years teaching and assessing NVQ in Health and Social Care, and am now a third-year student in adult nursing at Plymouth University, but study locally in Taunton.

I have been helping to support my colleagues on my course as a student representative for two years and have made some changes to enhance the course – the biggest change being better communications between staff and students. This encouraged me to become a student information officer: being able to provide information and signpost is a fundamental part of nursing.

My area of interest is cardiology and I've been very lucky to have had very good placements. I have recently applied for a job and on completing my nurse training will start my preceptorship with a cardiac care unit in September 2009.

janinestokoe@hotmail.com

Wales round-up



Claire Evans and Sarah Evans

A warm welcome to our new members who

started their course in March and to our new student information officers. We now have 15 SIOs across Wales, which is fantastic. I would also like to welcome Helen Whyte to her post as Regional Student Officer for Wales. Helen is very passionate about what student nurses think and is supporting us to truly fulfil our role as your ANS Executive Committee members.

In spring we had two major RCN conferences in Cardiff: research and ehealth. Both were well attended by students from across the UK and those I have spoken to enjoyed themselves immensely. It was also great to see so many students turn up on Students' Day at Congress.

This will be my last round-up for *The Answer*, as my term on the ANS Committee finishes this July. I have really enjoyed working on behalf of students across Wales. A big thank you to Gill, Laura and Claire – it's been great working with you. I encourage any aspiring activists to run for my seat on the committee.

In the meantime do not hesitate to contact us:

Claire: evansclaire84@hotmail.com

Sarah: Hsu71c@bangor.ac.uk

West Midlands round-up



Stuart Young

It was great to meet and to see so many of you from the West Midlands at Students' Day at Congress. We had a fantastic day and could not have done it without all of your support and input. A big thank you to Rachel Done and Joanna Greensill for all your help and support.

Back in June, we had a terrific conference on adult branch nursing run by BCU entitled *The Future is Bright, the Future is Adult Nursing*. The RCN, the NMC and many more were in attendance.

In the region, we are continuing to campaign on increasing our bursary, and are getting involved with the national debate on uniforms that the ANS started at Congress. Perhaps you would like to get involved. You could become a student information officer and if you have something you would like to raise, please get in touch.

If you need anything please do contact me; I am here for you. Enjoy the break in August.

swayoung@googlemail.com

Northern Ireland round-up



Gillian Larmour and Darren McMenamin

Following another very successful Congress, and especially Students' Day, we would like to encourage more students in Northern Ireland to become involved with the RCN. It was fantastic to meet Joanne Starkey, a competition winner, who was funded to attend with us.

We would love more of you to become student information officers. The role is a great opportunity to help raise issues your colleagues may have and also to support Northern Ireland students. To find out more about becoming an SIO, please see the student section of the RCN website.

One item for the ANS Executive Committee on the strategy action plan for this year is "tackling diversity". This involves promoting equality for all. We in Northern Ireland are keen to see what the issues regarding diversity are – so please get in touch with any experiences (positive or negative) that you have had during placements or in university. We are keen to ensure that all Northern Ireland students are treated fairly and equally.

We would also like to hear from all of you about your issues, problems or comments, or what you'd like to see in the next edition of *The Answer*.

Darren: darren.ans@googlemail.com

Gillian: g.larmour36@hotmail.co.uk

Scotland round-up



Karen Winchcombe and Charlotte Taylor

Summer is upon us and along with the good weather has come the stress of exams. We would like to congratulate all the students

who graduated in the spring and wish them well in their forthcoming careers. To those who are still studying, hang in there and keep up the good work. There is a light at the end of the tunnel!

If you are interested in becoming a student information officer and getting more involved with the RCN, please email us for details. It's a great opportunity and looks fantastic on your CV. Scotland is such a vast area and we really need SIOs in every university to facilitate communication between students.

For advice and information on any issue, please get in touch.

Karen: karensmob@supanet.com

Charlotte: charlotte.taylor@ggc.scot.nhs.uk

Yorkshire and The Humber round-up



Damian Ronksley

Most of our time and energy recently was spent preparing for this year's Congress – held in our very own Harrogate! I hope you all had a fabulous time.

I'm sure I will have hassled many of you over the week to consider becoming student information officers, so it would be wrong of me to miss an opportunity now. It really does look good on your CV, and the updates you receive will inform you of developments in the nursing world. So for further information and the nomination form, please go to: www.rcn.org.uk/development/students/getinvolved

For those of you moving house soon, please remember to update your personal details on myRCN (www.rcn.org.uk/myrcn) so that we can keep in touch with you. Speaking of addresses, we are now happily installed in our new regional office at Bond Court in the centre of Leeds.

Finally, I would like to take this opportunity to congratulate all of you in the region who have qualified recently, and to those of you with exams and assessments over the next few weeks; I wish you the best of luck!

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Eastern round-up



Susan Tivy-Ward

Wow, what a busy few months for the Eastern region.

First, we had "Into the real world: what to expect in the first few months". This was a lecture for third-year students held in April at University Campus Suffolk. The lecturer was Gary Kirwan, RCN Employment Relations Adviser. We had a very positive reaction, with feedback from students stating that the lecture was "brilliant" and a "very important session at this stage of our training".

Second, how fantastic was Congress? We managed to get a coach from the Eastern region and 49 students had a very enjoyable and exhausting day. Well done, great to see you all there – you all made a difference.

Finally, congratulations to all those third-year students – you're nearly there. A qualified nurse – how wonderfully scary is that!

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RCN Council report



The last full council meeting took place a fortnight before

Congress with a further meeting held at Congress. One of the focal points of the first meeting was the Margaret Haywood case and the role of the RCN in this issue. Peter Carter briefed Council on the matter and outlined the organisation's stance. A joint report from the Nursing Development Committee and Public Policy Committee was then delivered to Council as they had met together in March to look at a range of issues that were of interest to both of them. Jason Warriner then went on to present a report on behalf of the Agenda committee on preparations for Congress and Rod Thomson, Vice Chair of Congress, was present for this item. Votes were carried on the format of the next annual report on risk policy and management, and Council received a progress report from Stacey Hunter, Chair of the Forums Governance Group, on the forum transition project.

The Council meeting at Congress was brief but important. It gave Council the opportunity to review the programme for the week and it was then that we learned that Congress was to be addressed by the Prime Minister, Gordon Brown, and the Conservative Party Leader, David Cameron. It was hoped that these visits would be well received by members and generate huge media interest and they certainly did, helping to make Congress 2009 the most memorable to date.

Naomi Baker, Chair of the Association of Nursing Students

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Harvey Morgan,

Student Member of Council

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When things go wrong

Chris Earl, Nursing Adviser at the Medicines and Healthcare Products Regulatory Agency (MHRA), describes what happens when practitioners, manufacturers or members of the public report problems with a medical device or its instructions for use.

The MHRA's Adverse Incident Centre (AIC) is the first point of contact when you report an incident involving a medical device. So what happens after a report is received by the AIC?

Step 1 – Acknowledgment

When AIC receives your adverse incident report, our first task is to enter the incident details onto our Adverse Incident Tracking System (AITS). By the following working day, we will have sent you an acknowledgement letter confirming that we have received your report.

Step 2 - Assessment

Once entered onto AITS, the incident details are available to the MHRA Device Technology & Safety Division's specialist units, which complete a risk assessment to determine the appropriate level of MHRA action.

Step 3 - Investigation

Where the risk assessment process confirms that an investigation is appropriate, the specialist unit will take this forward in one of two ways:

- **in-depth investigations** usually follow reports of incidents that have led to death, serious injury or deterioration in health (or the potential for such). They are led by one of the agency's medical device specialists. Such investigations may involve contact with the device user and manufacturer, a visit to the site of the incident, and testing of the device involved. It is these investigations that typically lead the agency to issue a Medical Device Alert
- **standard investigations** usually follow incidents where there is a minor injury or no injury. Generally, we pursue these reports with the device manufacturer. An MHRA medical device specialist will monitor progress and critically review the manufacturer's investigation and report.

If an incident does not fall within the MHRA's remit – for example, if it does not refer to a medical device as defined in the Medical Device Directives - the incident report will be

transferred to another organisation, such as Department of Health Estates & Facilities, Trading Standards or the Health & Safety Executive.

Step 4 - Conclusion

When the investigation is complete, we will write to you to let you know the outcome and to provide an opportunity for you to comment on the conclusions reached.

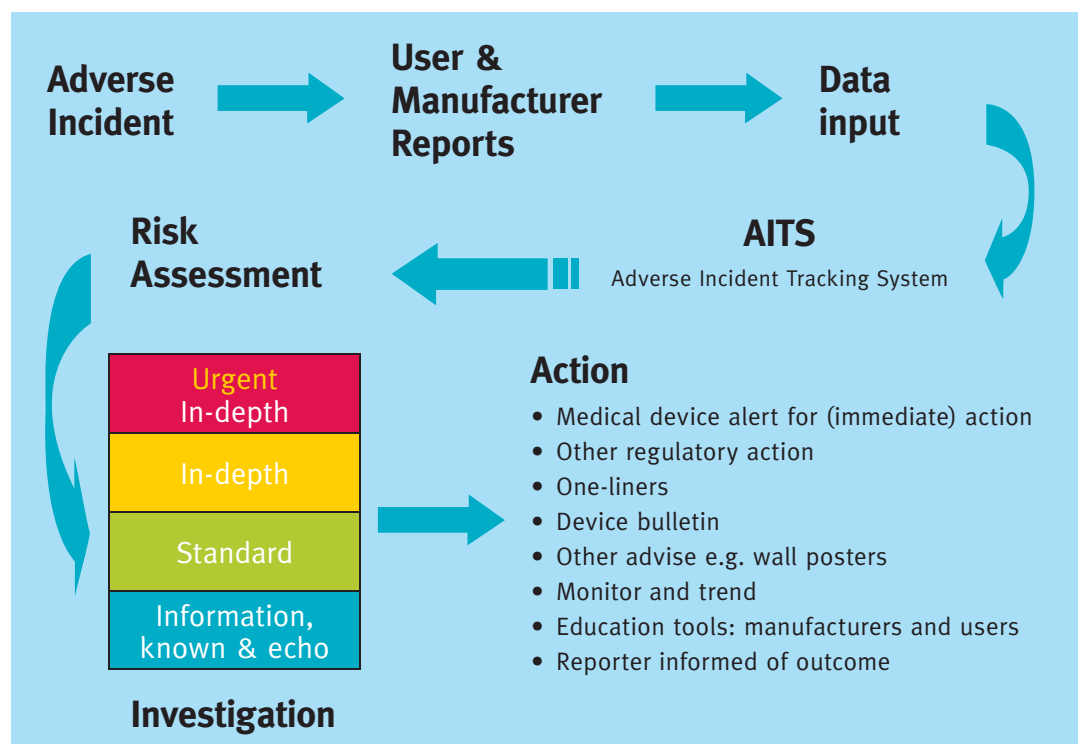
The time we take to complete an investigation will vary according to the nature and complexity of each specific incident, but at present, 50 per cent of standard incident investigations are concluded within 15 weeks, and 50 per cent of in-depth investigations within 31 weeks.

There is lots more information about the MHRA's role and on incident reporting on the agency's online learning pages, accessed via its website at: www.mhra.gov.uk.

If you have any questions about reporting incidents or the investigation process, don't hesitate to contact the Adverse Incident Centre: aic@mhra.gsi.gov.uk or the clinical team on 020 7084 3128 and we will help you in any way we can.

Chris Earl's earlier article on the role of the MHRA appeared in the Autumn 2008 issue of *The Answer*.

Figure 1: MHRA's adverse incident investigation process



The problem with bursaries



Hannah Moat Giddings, an ANS student information officer, gives a personal view of the NHS Bursary system.

Nursing our future, published by the RCN in 2008, said: “Today’s nursing students face many challenges – which may be financial, personal or relate to their studies”.

But in terms of financial challenges, are nursing students better off than most other students in the UK? Surely they should feel lucky; they will exit the university system with little or no debt to their name. But there is a common misconception about NHS bursaries for undergraduate nursing students; unfortunately, life is never as simple as appearances would suggest.

The NHS Business Services Authority website (www.nhsbsa.nhs.uk) states that students who receive the highest bursary available – those living outside the parental home in London – will get a bursary of £7,629 per year, while students living in their parental home will receive £1,098 a year less, or £91.50 per month. What is not said is that students receiving the full NHS bursary will not be able to receive any kind of student loan or grant on top of the bursary.

So completely self-funded nursing students paying full rent and living costs in central London will apparently only spend £91.50 more each month than those living with their parents. Surely this must be a miscalculation. It would be naive in any case to believe that anyone could live in London on £7,629 per year, particularly in this turbulent economic climate.

The average nursing student in the UK will do between two and six months’ placement in a hospital each year. During this time, students do the same shifts as qualified nurses and will undertake most of the same tasks, as well as extras usually undertaken by health care assistants. The rest of the year will be spent in lectures, often from 9am to 5pm, five days a week. On top of this, nursing students are expected to complete at least two essays and two exams each year, several group presentation projects and approximately 100 hours of extra study per two weeks spent in university.

For the lucky few who receive help from parents, the bursary will probably be just about enough for an extremely basic standard of

living. For those who don’t, their time is spent trying to scrape the pennies together for public transport to university or placements, or trying to make minimal food last as long as possible. This can be extremely hard to juggle while you are undertaking 12.5 hour shifts – and according to the RCN (2008), 83 per cent of nursing students end up working extra shifts in order to raise enough money to scrape by. The RCN says 71 per cent of students continue to work throughout the entire course.

Surely the young student nurses caring for the most vulnerable members of society should not be put in the position where the only choice is to work an extra full-time job alongside their 37.5 to 50 hours per week as a student nurse in hospital. This has adverse consequences, not only for students but for patients as well.

According to *RCN Bulletin* (October 2008): “The RCN has called on the government to introduce a non-means-tested bursary of £12,000 for student nurses to ensure that fees and spiralling living costs do not stop students from completing their courses.”

The RCN’s 2008 student survey highlights the scale of the problem: “Four in ten (44 per cent) nursing students responding to the survey had considered leaving their nursing course”; and “By far the most common reason for considering leaving was for financial reasons, with 62 per cent of students reporting financial debts from less than £1,500 to more than £10,000.”

According to *The Guardian*, England is facing a “critical shortage of nurses and midwives due to funding cuts”. If the government is going to get back in line with the country’s need for nurses and midwives, ministers are going to have to sit up and listen to student nurses.

Hannah Moat Giddings is a student at London South Bank University

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