



SCREENING ON THE STREETS

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

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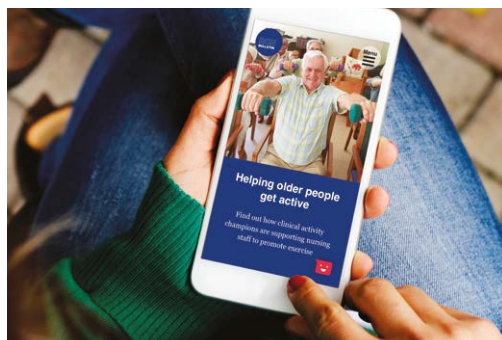


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Will you go green?

Most members recycle their copy of *RCN Bulletin* once they've read it. You can go the extra mile to reduce paper waste by cancelling your print subscription at rcn.org.uk/myrcn. We'll still send you a digital copy by email, and you can access *RCN Bulletin* online (pictured above) any time at rcn.org.uk/bulletin

Goodbye, Sally

Sally Jones, former RCN Regional Secretary for the West of England, has died. Sally helped organise a demonstration opposing NHS spending cuts in 1988 and used a sabbatical in the early 1990s to research HIV/AIDS nursing in Uganda. Sally also deputised for RCN General Secretary Christine Hancock before retiring in 1995. Our heartfelt condolences go out to Sally's family and friends.

Have your say on the future of RCN membership

We want your views on proposals to update our membership categories and subscription plans. It follows a consultation last year when members told us we need to make our structures and processes more inclusive of the whole nursing profession.

The proposals include moving to a single membership to replace our current categories which are dictated by the role nursing staff hold. This single membership wouldn't mean all members pay the same fees.

We're asking you to answer five questions about the proposals by midnight on 1 April. Find out more at tinyurl.com/rcn-membership-con

RCN submits pre-budget asks for nursing

We've written to the Treasury ahead of the budget on 11 March outlining what investment is needed to tackle nursing workforce shortages across the UK. This will be the new UK government's first budget and will set out how it intends to raise and spend money.

The chancellor, Rishi Sunak, has announced his intention to use the budget to deliver the promises made to voters ahead of December's general election. This included a pledge to increase the number of nurses by 50,000 in the next five years.

We've set out a number of asks in our submission to the Treasury. They include sufficient funding for an above inflation pay rise for nursing staff, full tuition fee support for nursing students in England and exemption of all nursing staff from the immigration health surcharge.

Meanwhile, we've welcomed the announcement of £5.8m in the draft Scottish budget to support implementation of the new safe staffing law there. We've said there needs to be a continued long-term focus on tackling nursing shortages though, and that the success of the law relies on sufficient funding for health and care providers to meet their legal duties in a sustainable way.

Let's party!



Help us celebrate Florence Nightingale's 200th birthday by joining the UK's Biggest Nursing Party on 12 May. Request a free party pack, filled with materials to help you hold your own party, from rcn.org.uk/nursesday when our order form goes live later this month.

NI members accept offer for pay parity and safe staffing

Nursing staff in Northern Ireland have voted to accept proposals to restore pay parity with the NHS in England. They've also said yes to a series of measures to improve safe staffing. It follows recent strike action, which saw members stand on picket lines for the first time in the RCN's history.

Pat Cullen, Director of the RCN in Northern Ireland, said: "The past few months have been among the most turbulent and pressurised that nurses have ever seen. It was unprecedented for RCN members to go on strike, but we knew it was the right thing to do for our patients.

"We now need to see the measures that have been agreed implemented in full. Safe staffing was the central part of our dispute and for the sake of those who use the service, and those who work in it, we must get this right. It may take some time to resolve this crisis but the sooner we begin, the sooner this will happen. We can't afford to wait one more day. Work must start urgently on safe nurse staffing legislation which will ensure we never find ourselves in this position again."

Watch this space for Guernsey ballot result

As *RCN Bulletin* went to press, votes were being counted in the industrial action ballot of members in Guernsey. They want pay parity with other public sector workers on the island and might also go on strike. See rcn.org.uk/south-east for latest news.

Get the lowdown on coronavirus

We've created online info to help members get to grips with the management of coronavirus (COVID-19). The webpage brings together useful resources and is constantly updated. Visit tinyurl.com/rcn-coronavirus and see page 9 for specific employment advice.

We take safe staffing call to number 10



We've handed in petitions with more than 220,000 signatures calling for the government to take urgent action to fix the nursing workforce crisis in England

The petitions are part of our campaign for a law to guarantee safe nurse staffing levels in England. It comes as the NHS in England has record nurse vacancies, which recently topped 44,000.

Nursing associate Kevin Morley went to Downing Street to hand in the petitions. He said: "Now is the time to bring all nursing staff together to hold the government to account. The number of signatures shows there is a need for change. We must have safe staffing in place to look after our patients in hospitals, the community and nursing homes."

Lesley Cain, who has received treatment for cancer and who signed one of the petitions, joined RCN members in handing them in to the prime minister. She said: "As somebody who has needed the help of the NHS, I have nothing but praise for the care I received. The nurses were there for me every step of the way. It was clear

though that they were under the most incredible pressure. I feel it is time for the government to demonstrate real action before it is too late. We must start to care for those who care for us."

Nurse Danielle Tiplady added: "I'm witnessing on a day-to-day basis the impact nursing shortages are having. Urgent action is needed."

RCN England Director Mike Adams said: "The voices of nursing staff and the public could not be clearer – resolving the nursing workforce shortage in England must be the highest priority for the government. We need there to be a legal responsibility to ensure there are enough nurses now and for the future to provide safe and effective care to all patients."

Visit rcn.org.uk/safestaffing/england to find out how you can get involved in the crucial next stage of our campaign.

Members set to debate crucial clinical issues at RCN Congress in Liverpool



Assisted dying, hospital nutrition and transgender care are among the topics on the agenda at the UK's biggest nursing conference and exhibition this June

Discussions about the safety of nursing staff and patients

“

The issues that emerge shape the work of the RCN

will take centre-stage at RCN Congress with members considering the effects of unpredictable shift patterns and whether the RCN should be lobbying all governments across the UK to take action to end “corridor care” (see page 8).

Delegates will also debate the implications and opportunities for NHS staff following the introduction of mental health first aiders in the workplace, and how patients and staff who are affected by demonstrations outside abortion clinics can be supported.

A number of important issues for the RCN will be discussed too, including whether the College should establish an England country board, the impact of our staffing for safe and effective care campaign, and the role and purpose of RCN Congress. Chair of the event BJ Waltho

said: “A huge range of topics will be debated in Liverpool. The agenda demonstrates the different issues members deal with in their work and how strongly they feel about them being discussed on a national scale.

“The issues emerging from Congress each year are vital in shaping the work of the RCN.

“We look forward to hearing from voices from all sides of the debates so that we continue to ensure the views and experiences of our members are heard.”

RCN Congress 2020 takes place at the ACC in Liverpool from Sunday 7 to Thursday 11 June.

Details, including booking information, the full agenda and how to submit emergency agenda items, are available at rcn.org.uk/congress

Jess finally gets marathon record after scrubs storm

Almost a year since running the London marathon in the fastest time wearing a nurse's uniform, member Jess Anderson has had her achievement officially recognised.

Jess was initially told she couldn't claim the title, as she wasn't wearing a dress for the race, but Guinness World Records (GWR) revised its rules amidst a Twitter storm about #WhatNursesWear.

Nurses tweeted selfies in their uniforms in support of Jess, showing the guidelines the original decision was based on were outdated. Those rules said a nurse's uniform must

include a blue or white dress, a pinafore apron and a traditional nurse's cap.

Jess completed the course in three hours, eight minutes and 22 seconds wearing scrubs.

She said: “The interest in my story was certainly unexpected but the response was so supportive and I'm happy GWR took notice.

“Ultimately, the controversy means this topic got some much-needed attention and I'm proud to have been able to represent our profession in such a positive way.”



The big picture



RCN Northern Ireland Director Pat Cullen (right) hugs a member on a picket line in Belfast. Our historic strike action led to an offer to restore pay parity and address staffing issues, which members accepted last month. Find out more at tinyurl.com/rcn-ni-ballot-result

MEET THE MEMBER



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

Name: Lorraine McLauchlan
Job title: Activities co-ordinator for people with learning disabilities.

How long have you been nursing? 37 years. I was 17 when I started on 19 January 1983.

How did you get where you are now? I started off working in the care of older people and was drawn to learning disability nursing after caring for family members.

If you weren't a nursing support worker, what would you be? An archery professional. I won medals when I was younger.

What item can't you do without at work? A radio for back-up support.

What's the best bit about your job? Working on a one-to-one basis with clients and seeing their positive facial expressions at the end of the day.

And the worst? Staffing levels.

How do you unwind? Taking the dog out for a walk or a meal and a glass of wine with my husband.

What's the best lesson nursing has taught you? Everyone has their own qualities, and no-one is better than you.

rcn.org.uk/myrcn



PATIENT PERSPECTIVE



As we enter Ovarian Cancer Awareness Month, RCN member Sharon talks about her long battle to get a diagnosis

As a clinical nurse specialist who has been diagnosed with stage 3 ovarian cancer, I'm committed to raising awareness of this deadly disease. My story is unfortunately very common for women with late stage ovarian cancer. I first went to my GP with symptoms of bloating, abdominal pain, tiredness, respiratory symptoms and urinary urgency in January 2017. My GP referred me to a specialist, and I was dismissed several times.

Early diagnosis is the most important factor in treating ovarian cancer. Had I been diagnosed early on at stage 2, I would have had a 90% chance of surviving the next three to five years. Due to my late diagnosis this has been

reduced to 50%. The hardest part is that despite presenting for over nine months this was never picked up. If I hadn't arranged for my own ultrasound scan (privately, as I felt I had no choice) I might not be alive today.

Women presenting with symptoms need to feel listened to and given support and advice as well as directed to an ovarian cancer charity at the earliest opportunity. Fortunately, awareness is growing. The World Ovarian Cancer Coalition is developing the first Global Ovarian Cancer Charter to drive the changes required to transform survival and wellbeing.

Nursing professionals can make a huge impact on early detection by familiarising themselves with the signs and symptoms and providing speedy access to appropriate clinical pathways. Visit www.ovacome.org.uk and targetovariancancer.org.uk

THE VIEW FROM HERE



Kim Scott
RCN Bulletin Editor

There are big changes ahead for *RCN Bulletin*. After listening to your views, we're making improvements to our website and creating a new, more practical, quarterly print issue. This will happen from September, so the last monthly print issue will be in June.

We're doing this for for a number of reasons, but first and foremost because it's what you've said you want. In our most recent member survey, 40% of respondents said they'd like to receive *RCN Bulletin* quarterly, compared to just 15% who said they'd like to continue receiving it monthly.

It also means we'll be moving with the times. Attitudes towards print publications are changing, which is why we created *RCN Bulletin* online two years ago. So, we'll be improving our website, adding news articles, opinion pieces, videos and podcasts, as well as better showcasing *RCN Bulletin* job adverts.

The changes also provide an opportunity to improve the print issue. Though you'll still recognise *RCN Bulletin*, it's our plan to make the content more practical, with articles that provide advice on workplace, clinical and wellbeing issues.

We'll be involving members in shaping the changes, too, creating a readers' panel to guide decisions. More details on that will come soon, but in the meantime please email me to find out more or express an interest in getting involved.

bulletin@rcn.org.uk



What you've been saying

Care home career has huge potential

There is definitely a need to work on the way care homes and the roles within them are perceived by the public, within the health and care system, and within nursing – especially with student nurses. Much work is already underway, but we need a joined-up approach at all levels.

Fiona on Twitter

Working in a nursing home can offer huge potential for nursing progression – managing multimorbidity, polypharmacy, deprescribing – all such complex and interesting interventions. Maybe advertising wider opportunities is the key.

Shona on Twitter

Improving support for sexual assault victims

The work that Jess is doing in Scotland is so important (*RCN Bulletin*, issue 384,

p9). In my trust in Belfast, we don't even have rape kits and if a victim comes to us, we have to send them to the specialist sexual assault referral centre in a different trust, which can be quite disruptive and off-putting. Also, in Northern Ireland, some communities are very distrustful of the police and so increasing nurse involvement could help encourage people to come forward.

Jennifer on Twitter

New exhibition is one to care about

The RCN Library exhibition *Who Cares? A History of Emotions in Nursing* is excellent to view in person. It's extremely thought-provoking and interactive, showing the history of nursing and how far it's come as a profession, the challenges it's faced and how they've been overcome, and the challenges we face today. If you're visiting London, it's well worth a trip.

Erica on Facebook

QUOTE OF THE MONTH

“The staff here are so impressive. So many of them are younger than me and they're so calm and so passionate about what they do.”

TV presenter Stacey Dooley on the nursing staff she met at Springfield University Hospital during the filming of her recent documentary *On the Psych Ward*

FOUR THINGS TO DO IN MARCH

1. Book your free place at the UK's largest nursing conference and exhibition: rcn.org.uk/congress
2. Become an RCN e-campaigner to help make sure safe staffing is enshrined in law in England: rcn.org.uk/safestaffing/england
3. Answer five questions about RCN membership proposals. Visit tinyurl.com/rcn-membership-con
4. Go green and opt out of receiving your print issue of *RCN Bulletin*. You can still stay informed with our online content: rcn.org.uk/go-green

HOT TOPIC



This month we asked our Twitter followers for their views on 'sleep pods' currently being trialled by doctors and nurses in some hospitals

Safe staffing levels and break rooms would be much preferred! I've worked on lots of wards that don't have a staff room at all, and there's no chance of a "sleep in a pod" when you can't take your break due to understaffing. [@AalijahBee](#)

I fully support them. I truly believe we need to look after our staff. Sleep = patient safety. [@cko1973](#)

They are amazing if you get the time to go and use them. We have several in our trust and have found they have relieved stress and revitalised staff. However, due to individual roles and job demands, they can't always be accessed. As duty

manager I find it hard to step away and relax. [@Nurse_Sherralea](#)

Seems like a bit of a publicity stunt. More staff and improved working conditions would be better. I don't know any nurse who would have time to go for a nap – we don't even have time to go to the toilet some days. [@MrsK78](#)

A great idea if used in conjunction with safe staffing levels. Rest periods have been shown to have huge benefits to wellbeing. It's time to take better care of our staff. [@lisanolan145](#)

What irritates me the most is considering nurses as an after-thought. No-one consulted us about our views on rest, and no-one asked us to trial the pods. We're an irrelevant add-on. That should worry nurses much more than whether they'll actually use a pod or not. [@Cahill_Lou](#)

MESSAGE TO MEMBERS



Dame Donna Kinnair RCN Chief Executive & General Secretary

No matter how busy and stressful my days are now, the emotional side of working with patients remains with me. The physical exhaustion fades but you always remember how you felt providing care in that moment.

I'm the first to remind people about the intellectual rigour and skills involved in modern nursing but we also have high levels of emotional intelligence and compassion in our work. This no doubt adds to our fatigue and stress, but it's important that we demonstrate empathy. At times we will shed tears for those we have cared for or worked alongside. The powerful mix of clinical technique and human connection is the best of nursing and perhaps our greatest strength.

This adds power to our voice. When each and every one of us in nursing speaks with politicians, policymakers or members of the public, we can debate the science of our role but also recount the personal testimonies, plights and concerns for those in our care. In this International Year of the Nurse and Midwife, and when we are commemorating Florence Nightingale's 200th birthday, it is timely to remember her work in giving a voice to injured soldiers.

To see people, not patients – complex lives, not just symptoms – and speak up for them is obviously not new. But having the confidence to advocate without fear of retribution is something the RCN is here to help you do.

tinyurl.com/rcn-year-of-nurse



Stopping delirium before it starts

Vicky MacRae explains some of the initiatives she's helped introduce as a delirium nurse for NHS Ayrshire and Arran

Imagine a future for older people in hospital where early mobilisation with access to co-ordinated activities, music therapy and a quiet, naturally lit environment is standard. It sounds simple, but we know we could prevent numerous episodes of delirium by providing such standards within acute hospitals.

A big part of my job is to promote early identification and management of delirium in older patients. Developing delirium can be life changing for many with risks of reduced mobility, cognitive decline and sometimes admission to long-term-care facilities.

Where I work, many improvements have been made to tackle delirium – toolkits to assist with early identification, robust educational programmes and the development of frailty pathways in both medicine and pre-operative assessment.

However, we also want to address the environment and recognise the importance of making small changes to the areas where our older people stay.

One of our care of the elderly wards has dedicated two rooms to address these needs. Patients now have access to a dining room specifically designed for older people with attractive china and tablecloths, wall clocks and calendars. By providing meals at a table rather than a bedside tray the nutrition of patients has improved hugely.

Through training and promotion of the work already done we hope to continue to raise awareness of delirium and the impact the environment can have.

Everyone has a part to play in helping patients feel more comfortable and settled in our hospitals. Let's help to stop delirium before it starts.

World Delirium Awareness Day is on 11 March. Visit idelirium.org

8 FEATURES

‘Corridor care is unsafe, undignified and unacceptable’

Our survey of emergency nursing staff in England reveals the difficulties of providing care to patients in cramped and unsuitable locations. Join our safe staffing campaign to show ministers and NHS leaders we need action



“Dignity is the first thing patients are stripped of when queueing for care in a dark cold corridor, closely followed by safety.”

“It’s only a matter of time before an innocent life is lost, or a nurse is taken to court for failing to provide impossible care.”

“It’s not uncommon to have up to 20 patients on the corridor at any one time. The nurse-to-patient ratio and corridor care is unsafe, undignified and unacceptable.”

This is corridor care in 2020. This is how treatment is being delivered to NHS patients waiting to be seen in A&E, and to those who have been judged sick enough to admit to hospital but for whom a bed cannot be found.

These shocking accounts are just the tip of the iceberg. Hundreds of our members surveyed say that providing care to hospital patients in corridors and other cramped and unsuitable non-clinical areas has become normal.

In fact, a new survey of our Emergency Care Association members in England shows almost three-quarters of respondents provide corridor care on a daily basis.

Nursing staff are being put under intolerable pressure, with 90% of respondents saying the safety of patients is being compromised.

Nursing patients in corridors has become such a regular occurrence, nearly half of nursing staff responding to our survey told us the term “corridor nursing” is formally used in their workplace. An additional 40% of respondents say it is used informally.

System-wide issues

The unacceptable consequences of providing care in corridors include difficulty in administering urgent intravenous antibiotics, a lack of privacy and dignity, and increased distress in patients, particularly those with mental health problems.

“

This is not what we came into nursing for

David Smith, Chair of the RCN Emergency Care Association, was the driving force behind the survey. He wanted to highlight the specific challenges faced by nursing staff working in emergency care settings.

“This is not what we came into nursing for,” he says. “It’s not just undignified for patients, it’s also often unsafe.”

He says the survey responses show how demoralised nursing staff feel about working in these conditions and fears this could deter people from embarking on this unique and rewarding career.

But it’s not only about A&E departments. Corridor care is symptomatic of huge, system-wide issues. More people are coming to A&E because they can’t get an appointment with their GP and this is happening alongside the problems in the hospital itself, such as delayed discharge or delayed implementation of social care packages.

David adds: “We need more staff not just in emergency departments, but also on hospital wards so that more beds can be opened, and in the community so that patients can be saved from going to hospital in the first place.”

Our campaign for safe nurse staffing calls for urgent investment in the nursing workforce. Get involved at rcn.org.uk/safestaffing

Find out more about the survey at tinyurl.com/rcn-corridor-care. Join our Emergency Care Association at rcn.org.uk/forums

Words by Sharon Palfrey

Coronavirus: what you need to know

Find out how to protect yourself, what to do if you think you've been exposed and what you should expect from your employer

What is coronavirus?

In late December 2019 a new (novel) coronavirus was identified in China causing severe respiratory disease including pneumonia. The World Health Organization (WHO) has advised that the virus responsible is named severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) and the disease it causes COVID-19. It originated in Wuhan, Hubei province, China. The source of the infection has been linked to a seafood market in Wuhan.

How serious is it?

Coronaviruses are a common family of viruses and one of the main causes of the ordinary cold. In general, for four out of five people who have COVID-19, symptoms will be mild, and recovery will occur without the need for GP or hospital treatment. Symptoms of COVID-19 include fever and a cough that can potentially progress to pneumonia characterised by shortness of breath and breathing difficulties. It is currently estimated that 1-2% of people with the infection will die, often as a consequence of pre-existing comorbidities such as chronic lung disease, diabetes or heart disease.

Is there a vaccine?

As a newly identified virus there is currently no human immunity to it and no vaccine is available to prevent infection. As a viral infection, antibiotics are not an effective treatment.

What can I do about it?

Nursing staff should familiarise themselves with their local policies on emergency

planning, infection prevention and control and other relevant guidance in addition to any national guidance issued by the Department of Health and Social Care and the relevant UK public health agencies. We are in a fast-moving evolving situation and as with any new strain of virus, the guidance is being updated frequently so it's important you look at our latest information online at tinyurl.com/ren-coronavirus

What should I do if I feel anxious about possible risk of exposure?

You may have concerns about possible exposure to coronavirus in your workplace or in your personal life, for example after travel. For work-related concerns, contact your local infection prevention control lead, follow their advice and alert your manager. For other queries in England, contact NHS 111 for advice. In Wales, call 0845 46 47. In Scotland, phone your GP or NHS 24 on 111 out of hours. If you are in Northern Ireland, call 0300 200 7885.

How can I protect myself at work?

Your employer should be carrying out risk assessments and putting measures in place to eliminate or minimise the risk of exposure by following current public health guidelines on the provision and use of personal protective equipment (PPE). You should also be given information and training on the risks of exposure and how to minimise your risk. If you're required to use an FFP3 mask, face fit testing should be undertaken. As the UK is not currently in an outbreak situation, not all health care workers are required to use masks or undertake face fit testing – this is currently

confined to those most likely to have contact with people who meet the criteria for screening after travel, or those caring for confirmed cases. Make sure you follow workplace guidelines and safety procedures and practice good hand hygiene.

What other safeguards should my employer be putting in place?

Rest breaks are very important, even more so at times like this, as fatigue can lead to mistakes and increase the risk of infection. The duty is on your employer to ensure staff can take regular breaks and monitor working hours to prevent the onset of mental and physical fatigue.

What about confidentiality?

Organisations should have systems in place for keeping the details of staff involved in caring for patients with suspected or confirmed COVID-19 confidential. Employees should also respect each other's confidentiality and take care not to inadvertently share information when using social media, for example. Where staff are suspected or confirmed to have contracted COVID-19, their personal details should be treated as confidential, as they would be for any other patient.

What if I have concerns about how it's being handled in my workplace?

Refer to the RCN's raising concerns guidance at rcn.org.uk/raisingconcerns and speak to your line manager. You can also call RCN Direct for advice on 0345 772 6100.

10 FEATURES

Screening on the streets

Yasmin works on a mobile health van seeking out and treating homeless people with TB



“

Some of the people we see have nobody in their lives they can rely on. I can be that person

“Tuberculosis isn’t sexy. It isn’t high on the political agenda. It’s perceived to be a deadly infection from the past, but it continues to be a serious public health problem and is especially concentrated in some of our most vulnerable communities.”

Yasmin Appleby is speaking from experience. As a clinical nurse specialist on the UK’s only mobile health van that actively screens people for tuberculosis (TB), she’s spent the past 11 years finding and treating those who would have otherwise gone undetected.

“The people we see are facing extreme exclusion and have problems using our NHS. They’re rough sleepers, homeless hostel residents, sofa surfers and undocumented migrants. They’ve often had a major tragedy in their lives that’s led them to develop drug and alcohol problems and they’ve fallen out of the system.”

It’s the job of the Find&Treat team to go to places where homeless and vulnerable people gather, such as day centres, soup kitchens and churches, educate them about TB and invite them onto the van for a chest X-ray. From the results of this, alongside history taking and a sputum sample, the team can tell instantly whether a person has TB and can begin a programme of tailored treatment and support.

“TB is curable and can be effectively controlled so long as cases are found early and patients can complete treatment,” says Yasmin.

With homeless people, however, both crucial factors prove challenging. The symptoms of TB – weight loss, sweating at night, lethargy and a persistent cough – are masked by other health issues experienced by people who live on the street. Adherence to treatment, which consists of a minimum of

six months daily medication, is particularly tricky for those with no permanent home.

Support to rely on

This is where Yasmin comes in. She actively case manages the people found to have TB and adapts her support to make sure they take their antibiotics.

“I’m there to hold their hand through what can be a pretty scary and daunting time,” she says. “Some of our people have nobody in their lives they can rely on. I can be that person.”

“I don’t treat TB, I treat people. So, I’ll go out to where they are, I’ll accompany them to their appointments, and I’ll try to make their treatment journey as smooth as possible.

“It’s no good diagnosing someone with TB, giving them a big bag of

🕒 Yasmin is one member whose work we’re showcasing as part of our celebrations for International Year of the Nurse and Midwife. Visit tinyurl.com/find-and-treat to find out more about the Find&Treat service provided by University College London Hospitals NHS Foundation Trust

Words by Kim Scott and Nick Spears.
Pictures by Gareth Harmer

pills and putting them back where I found them. I need to help change things, so I look at people holistically, see what put them on the street in the first place and try to fix some of those problems.”

Innovative treatment monitoring

For some, that can mean negotiating access to a hostel where they can stay for the duration of their treatment. For others, it results in them being given a smartphone with a video supported care app so they can record themselves taking treatment, send it back to a centralised system and seek virtual advice on any health concerns they have.

This strategy was considered hugely risky at the start, but since its introduction two years ago, very few people have abused having the phones, instead enjoying the contact such technology gives them and thriving on the responsibility of reporting their adherence to medication.

It's helped the success of the service, which has supported 84% of people found with TB to complete treatment within 12 months. That's higher than the proportion of cases who complete TB treatment nationally.

But it's not just TB that the Find&Treat team is detecting. “When people come onto the van for a health check and X-ray, we can open a whole can of worms,” says Yasmin. During a standard three-hour session, where up to 50 people are seen, a whole range of health issues can be unearthed. Lung cancer, breast cancer and chronic obstructive pulmonary disease (COPD) to name a few.



The Find&Treat team provides immunisations against influenza, pneumococcal pneumonia and Hepatitis B and also tests for Hepatitis C, which it has a 90% success rate of curing following treatment. It comprises two nurses, two radiographers, two outreach workers and a driver. It operates in every London borough but also tours the UK on a circuit as well as being regularly called upon to support the control of TB outbreaks nationally.

Is nursing crucial to its success? Absolutely, insists Yasmin. “This is a nurse-led service that was initiated by a nurse. Just saying I'm a nurse breaks down barriers. People have trust in me in a way they don't feel able to build with other health services. I love my job – it's utterly relentless, but it allows me to help people who have lived their whole lives on the edge. There is something very special about being in a position to do that.”

What is TB and how is it spread?

TB is an infectious illness caused by airborne bacteria. It can cause serious health problems and death if not treated early. But it is curable.

It is spread from one person to another through the air. When a person with TB breathes, coughs or sneezes, droplets containing the bacteria are released into the air.

Most people who breathe in TB bacteria do not become unwell as their immune systems are strong enough to clear TB completely or hold it in a latent state.

Homeless people are at particular risk of TB. They're more likely to be exposed to TB bacteria in hostel accommodation or settings where they gather to sleep or socialise.

The immune stresses associated with homelessness – such as rough sleeping, cold, poor nutrition and drink or drug abuse – make it more likely that someone exposed to TB will go on to develop the illness.

Information from tbalert.org

THE VIEW FROM HERE



Adrian 'Bean' Noctor Outreach worker

I've been working with the Find&Treat team for just over a year. It's my job to speak with homeless people, explain what we do and encourage them to come to the van.

I've been homeless and a druggie. It gives you a sort of telepathy that medical people just haven't got. The people we work with instantly know that I understand. It's weird. They can just tell that I've been where they are. Authority figures get ignored. There's this mistrust that doesn't exist with me. So, people will listen, and it gives us that chance to get them screened. If they then need to be referred to other services, I'll go with them, be there to support them and make sure they turn up.

My job is crucial. It's helping people turn their lives around and stop the spread of some pretty nasty diseases. When we find a case of TB on here, we can help get that person housed while on treatment. Sometimes that's all it takes to get someone out of a situation they thought would continue. Giving them that daily attention, it makes them feel the huge corporate machine cares about them and it makes a difference.

These people who are homeless have often either been in care or been abused in some way. They should be treated as vulnerable adults. If a homeless person kicks off, it may be because they're traumatised and they're displaying behaviour that's a symptom of their circumstance.

tinyurl.com/find-and-treat



12 FEATURES



How to shine in interviews

Preparation is key to a successful interview. Plan well, do your research, and the job could be yours, says RCN careers coach Julie Watkins

Research your future employer and familiarise yourself with the values of the trust or organisation where you want to work. Values can include embracing change, respect and dignity, improving lives and being open and honest.

Demonstrate enthusiasm

Tell the employer if you've taken the time to arrange an informal visit. Let them know what impressed you and don't be afraid to let your passion shine through. Employers are keen to know what aspects of care you're interested in and why you want to work for them.

Prepare your answers

Use the person specification, job description, company values and your application form. Carefully read the essential criteria for the role and check what the employer will be assessing at interview – this is usually marked on the person specification.

Find examples

Think about your experience and training and find examples you can use to demonstrate you meet the job requirements.

Think about questions you may be asked

Why are you interested in this role? What's your understanding of the job? These are just some examples of opening questions. Take a look at our sample interview questions at tinyurl.com/rcn-sample-interview-questions to make sure you're prepared.

Practice

Write down what you want to say and practise reading it out loud. The STAR technique (situation, target, action, result) is a good model to make sure your answers are concise, relevant and structured.

Seek support

You can get more information and advice at tinyurl.com/rcn-interviews. And, if you'd like one-to-one support, you can book an appointment to speak with an RCN careers coach. Visit tinyurl.com/rcn-coaching to find out more.

TOP TIP: Include something about the values of the organisation in your answer to the opening question. It will help the employer get an instant feel of how you'll fit in.

Whatever the outcome there's more to do

You got the job...

In all the excitement make sure you protect yourself:

- get confirmation in writing before resigning from your current role
- clarify the terms and conditions
- make sure you receive a contract.

You weren't successful this time...

- **Take time to reflect on your performance.** Was there anything you could do differently next time? Write down the questions you were asked to help you prepare for your next interview.
- **Get feedback.** This can really help improve your performance at your next interview. Ask direct questions: Which two questions did I score the lowest on? Or which two questions could I have answered better? Getting these answers will allow you to prepare or research these areas further.
- **Be kind to yourself.** Remember you can't control other candidates' performances.

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Eyes wide open

Sandy's pivotal role in developments to detect, diagnose and treat eye disease has led to her being awarded an MBE for her services to nursing and eye research



“Working in ophthalmic nursing, you build connections with people every day,” says Sandy Taylor, a senior ophthalmic research sister at Liverpool Foundation Trust and member of the RCN Ophthalmic Nursing Forum. “Our job is to look at someone’s face, quite literally into their eyes, so there’s an instant connection with your patient. And that’s what nursing is all about, isn’t it?”

Sandy fell into ophthalmic nursing by “happy accident” after the neurology course she was signed up to was postponed. “It was only supposed to be for six months, but here I am 34 years later. I’ve always loved nursing, but this particular path found me because I said yes to the opportunities open to me.”

Among a long list of nursing achievements, Sandy was instrumental in the creation of Liverpool Foundation Trust’s

Clinical Eye Research Centre. The first trial Sandy was involved with there in 1999 changed the face of wet age-related macular degeneration (AMD) forever.

Better vision

“People can now have the latest treatment for wet AMD, which involves injections in the eye and helps preserve and improve vision so they can maintain some independence,” says Sandy, who was the first nurse practitioner at St Paul’s Eye Unit to administer the new treatment when her team pioneered it in the UK.

Since that first trial, the centre has overseen 85 more, with 20 focused on tackling sight-loss related diseases.

“It’s amazing to think our research started in one room and now there’s a whole centre,” she says.

“

This particular path found me because I said yes to the opportunities open to me



📄 Join the RCN Ophthalmic Nursing Forum at [rcn.org.uk/forums](https://www.rcn.org.uk/forums). Download *The Nature, Scope and Value of Ophthalmic Nursing* at [rcn.org.uk/publications](https://www.rcn.org.uk/publications) (code 005816).

Words by Sophie Goode. Pictures by Jerry Sharp

Sandy has also used her knowledge to benefit other RCN members by helping develop a practice module and framework for ophthalmic nurses while serving on the forum committee. “Going to RCN headquarters and feeling part of something was exciting for me,” she says. “You get the sense it’s where things happen, where change takes place.”

Putting patients first

Now semi-retired, Sandy’s most recent career highlight was receiving an MBE for her services to nursing and eye research. “It feels incredible to get recognition for something you love,” she says. “When you do a job every day, you don’t think people notice, but small things make a big difference. The award is principally about putting patients first in everything we do.”

And it is patients who have always been Sandy’s main inspiration. “People fear blindness more than death, but my patients amaze me – they’re so stoical,” she says. “When I do the injections, I imagine what the patient would want me to say if they were a member of my family. How we talk to people, how we look after people – these are the things that matter most.”

Did you know?

Age-related macular degeneration (AMD) is the most common form of macular disease and is the leading cause of sight loss in the UK, affecting over 600,000 people. Wet AMD develops when abnormal blood vessels grow into the macula – the part of the retina at the back of the eye. Find out more at [macularsociety.org](https://www.macularsociety.org)

IN THE SPOTLIGHT



District and Community Nursing Forum

Who's the chair?

Julie Green has been the forum's chair since 2016 and spent a year on the steering committee before that. She's worked in primary and secondary care, including as a district nursing sister. She is now Dean of Education at Keele University's School of Nursing and Midwifery.

Recent highlights?

The forum recently added "community" to its name to better reflect its membership. Julie and team have brought many agenda items and events to RCN Congress – a 2017 resolution calling for all district nurse caseload holders to have the specialist practitioner qualification aimed to increase awareness of the importance of the qualification.

What's coming up?

Many district and community nurses

deal with challenging work situations on their own, so this year the forum is focusing on mental health support for members working in the specialty. The forum hopes to run a joint event with the Mental Health Forum at RCN Congress 2020. The committee is also planning a survey to uncover the pressures on district and community services.

Why join?

Julie says: "The forum is very committed to advancing district nursing. The specialty has seen reduced levels of investment in recent years, so raising its profile is important. It's also a great way to stay up to date with best practice, liaise with colleagues and ask for advice – especially on our Facebook page."

Join the forum at rcn.org.uk/forums

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

WHAT I'M THINKING



Carrie Locker GP Nursing Forum

It's often assumed that the senior clinicians within primary care networks (PCNs) must be GPs. However, nurses are senior clinicians too, and we offer a valuable perspective that is sometimes overlooked.

I challenged this thinking and now, as well as working as an advanced nurse practitioner in general practice, I am also a board member for Burnley East Primary Care Network. I wanted to join the network in order to direct the care given to local patients and drive change at a more strategic level.

I recently completed an MSc in Healthcare Leadership (from the NHS Leadership Academy) which has helped me to develop the knowledge and skills I need to undertake this influential strategic role.

My GP partners at the practice supported me in establishing this role and trust me to represent them at the meetings. The PCN members are very supportive too, which helps. I have the devolved responsibility to make decisions and vote on the GPs' behalf.

I would urge and encourage other nurses to sit on their PCN boards, because nurses can make great leaders. We have a lot to offer, bringing a unique perspective that helps the whole team think outside the box – and the more diverse a team is, the more innovative and creative it can be.

tinyurl.com/rcn-gpnf



Game tackles dementia myths

A new online game is challenging stereotypes and stigma surrounding dementia. Dr Gary Mitchell, nursing lecturer at Queen's University Belfast (QUB) and member of the RCN Older People's Forum, worked with researchers including Dr Gillian Carter and Professor Christine Brown Wilson, QUB nursing students, people with dementia, charity Dementia NI and Focus Games Ltd to create the Dementia Awareness Game.

"People with dementia often feel disempowered and can find it difficult to maintain independence following diagnosis," Gary says. "The game tries to get people thinking about dementia differently."

Gary and the team co-designed the game with people who have dementia,

tackling the most common myths about their condition head-on. Questions inform players that dementia is an invisible illness and just because someone lives with the disease it doesn't mean they can't do things like drive, manage money, or have romantic relationships.

The game was designed to improve public perception of dementia but is also useful for family caregivers, nursing staff and students.

"Health care professionals often see people at the late stages of dementia," Gary says.

"It can be easy to forget that there are different stages. The game is saying: please don't assume that if a person lives with dementia that they are unable to maintain independence and actively contribute to their own life and care."

Play the free game at dementiagame.com

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

Health challenges facing care leavers

27 April
RCN HQ
20 Cavendish Square
London W1G 0RN

This event provides an opportunity for nurses working with looked after children (LAC) to discuss ideas for improving services for young people leaving care. It will consider the health challenges facing care leavers, and the national and regional changes that have an impact on nurses' ability to provide effective support.

There will be a wide range of speakers, including care leavers who have transitioned into adult services, who will cover emotive issues relevant to this vulnerable group.

Karen Hughes, Chair of the RCN LAC Nurse Community, says: "We're passionate about using this event to influence change and make sure we're working to the best of our practice to advocate for improved health provision for care leavers."



By attending, you'll be able to share your experiences, debate national issues and ensure the voice of nursing is heard to help shape the agenda for the care of young people.

📍 To book visit rcn.org.uk/LAC20 or call 02920 546 460.

London

Clinical research nursing

3 July
RCN HQ
20 Cavendish Square
London W1G 0RN

Book before 29 March to take advantage of an early-bird discount for this conference aimed at nursing staff and midwives interested in nursing research.

Organised by a sub-committee of the RCN Research Society, the event will be a mix of plenary and concurrent sessions covering topics such as raising the clinical research



nurse voice and sharing best research practice. It will include a panel discussion on whether nursing research can truly be embedded in an under-pressure NHS.

📍 For more information, visit rcn.org.uk/crn20 or call 02920 546 460.

Cardiff

Diabetes management

23 April
RCN Wales, Ty Maeth
King George V Drive East
Cardiff CF14 4XZ

These short informative seminars will help increase your understanding of the difficulties people with diabetes experience in managing their condition. Topics include the prevention/remission of Type 2 diabetes, Type 1 diabetes and acute complications. The sessions are open to staff working both in the NHS and private sector.

When booking, choose from the morning (registered nurses) or afternoon session (students and nursing support workers). The closing date to book is Thursday 9 April.

📍 For further information, call 02920 680713 CPDwales@rcn.org.uk

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general	22-26 & 31-32	mental health	30
international	26-27	nursing older people	30

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In line with our expansion project for our 2nd tower, Danat Al Emarat Hospital for Women & Children is currently looking to hire nurses and midwives in various positions. Danat Al Emarat Hospital was launched in 2015, and is considered a specialty hospital for women and children, and an accredited research center. In addition to pursuing the JCI, Surgical Review Corporation (SRC), and College of American Pathologists (CAP) accreditations, Danat Al Emarat is also preparing for Magnet accreditation by 2021.

We are currently hiring for the following positions:

- Assistant Chief Nursing Officer
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- Nurse Practitioner and Specialty Nurses
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- Lactation Consultant
- Registered Midwives
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- Registered Nurse positions available.

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All candidates must have a Bachelor's degree in nursing or midwifery and a minimum of 2 years' experience.

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Visit us at **Stand 3 – RCNi Recruitment Fair in Birmingham.**



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Black Country Partnership Foundation Trust and Dudley & Walsall Mental Health Trust are looking for talented and ambitious Registered Mental Health Nurses to help support our vision of providing high quality care which can only be made possible by our highly valued and inclusive workforce.

We have a number of Band 5 and above nursing vacancies that can offer you an exciting career in Mental Health. Whether that's in one of our acute inpatient wards, PICU unit, older adults wards, rehabilitation or specialist services there are a range of opportunities available for you. Opportunities exist across Sandwell, Dudley, Wolverhampton and Walsall, we also welcome applicants looking for flexible working arrangements.

If you are student nurse, who has recently graduated and awaiting your nursing pin, we are keen to talk to you as we launch our new initiative that provides you with the opportunity to start your nursing career working within the Trust whilst awaiting your pin.

If you are thinking about returning to nursing then you are in the right place. Both Trusts are encouraging mental health nurses to return to practice.

What do you need to do?

If you are interested in coming back to mental health nursing, please e-mail bcpft.blackcountrywidertp@nhs.net

Details of the roles on offer are available on the NHS Jobs website, or via the following:

www.bcpft.nhs.uk/working-here
www.dwmh.nhs.uk/working-with-us



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Calling all Registered Mental Health and Learning Disability Nurses

Band 5 and Band 6 opportunities

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Visit us on stands 6 and 7
RCNi Nursing Careers and Jobs Fair
10 March 09:30 - 16:00
NEC, Birmingham



Saunton Sands, North Devon

Come and join us

If you're a qualified Registered Mental Health Nurse, a Registered Learning Disability Nurse, or thinking about returning to practice you'll find plenty of nursing opportunities at Devon Partnership NHS Trust to further your career.

With excellent tailored preceptorship programmes to clear career pathways and a commitment to your personal development, you'll be joining an organisation that is committed to supporting you every step of the way.

Working with us is more than just a job. You'll be joining an organisation that is passionate about making a difference to the lives of people using our mental health and learning disability services. You'll also be joining an organisation that is passionate about you!

www.jobs.dpt.nhs.uk

Living in Devon

The beauty and quality of Devon landscapes are unsurpassed with over one third of the county designated as Areas of Outstanding Natural Beauty. There are over 450 miles of coastline along two stunning and distinctive coasts, the rugged wildernesses of two National Parks, a UNESCO Biosphere Reserve, England's first natural World Heritage Site – the Jurassic Coast, 5,000km of public rights of way and over 250km of off-road cycle paths. Our natural outdoor playground offers you the chance for a fantastic work-life balance.

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Great place to work, great place to live



We are Recruiting Registered Nurses!



NHS Grampian has a strong focus on patient-centred care and continuous improvement. We are currently looking for dynamic, motivated and enthusiastic registered nurses who have the desire to learn and be able to work effectively within multi-disciplinary teams. Your priority will be to provide safe, effective care and be committed to delivery to NHS Grampian's values of caring, listening and improving.

We are looking to predominantly recruit to band 5 positions but opportunities exist for band 6 and Band 7 in some specialities. These posts are based on various hospital sites across the North East of Scotland including on the Foresterhill Health Campus in Aberdeen, one of the largest teaching hospital sites in Europe, Royal Cornhill Hospital in Aberdeen which provides a Mental Health and Learning Disability service, Woodend Hospital providing Medicine for the Elderly and Rehabilitation Medicine services and Dr Gray's Hospital in Elgin, a district general hospital. We promote lifelong learning and development opportunities.

We have fantastic opportunities for self-motivated nurses who are looking for a new challenge. Below are some of the specialities we are recruiting to:

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- **Critical Care (including HDU settings)**
- **Theatres**
- **Interventional Radiology**
- **Cardiac Catheterisation Labs**
- **Medical**
- **Care of the Elderly Medicine and Rehabilitation**
- **Endoscopy**
- **Mental Health and Learning Disability**

Grampian is a great place to live and to work, offering a strong and welcoming community spirit, a cosmopolitan city with enviable countryside and beaches on its doorstep, a safe environment for children, excellent schools, and first-rate transport links to the rest of the UK. To find out more about living and working in Aberdeen, Aberdeenshire or Moray go to: www.aberdeencity.gov.uk, www.aberdeenshire.gov.uk or www.moray.gov.uk

We offer relocation assistance of up to £8,000. In promoting equal opportunities, we welcome applications from all sections of the community.



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GENERAL

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You will ensure the highest standards of clinical care for women and babies, providing professional leadership and direction as well as effective management of resources.

Key requirements:

As well demonstrating the highest level of professional knowledge and experience, you will already have had significant experience in a senior operational management role and have experience of leading change and service development. Your commitment to the 'Best Start' Strategy for Maternity and Neonatal services in Scotland is essential and you will play a pivotal role in the implementation of this in Lothian.

Your commitment to safe, effective, Person Centred care will be clearly evidenced.

Further information:

For further information about this post, please contact Fiona Mitchell, Director for Women's and Children's Services, NHS Lothian: fiona.mitchell@nhslothian.scot.nhs.uk, 0131 536 0041 or Alex McMahon, Executive Director Nursing, Midwifery & AHP's, NHS Lothian, Alex.McMahon@nhslothian.scot.nhs.uk, 0131 465 5496.

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Find out more about nurse vacancies at Bupa by visiting our careers site or come and see us at the RCNi West London Careers Fair on 24th April.

careers.bupa.co.uk/nurses



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NHS Foundation Trust

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We are looking to recruit highly committed, experienced, self-motivated and dynamic nurses who can demonstrate a passion to drive our services forward, with the support of our senior nursing staff, to enable the nursing team to feel part of a skilled and competent nursing workforce. You will be assisting in managing busy clinical areas as well as providing day to day support leading and motivating the nursing team via strong interpersonal and leadership skills. We will ensure you have the support to be able to achieve your own objectives within the vision of our Trust values.

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Zurich Insurance are seeking to recruit skilled and enthusiastic Nurses (RGN and/or RMN, Occupational Health Nurse) to be part of our Innovative and Dynamic Medical Rehabilitation Team! It would be advantageous to hold Insurance rehabilitation experience or vocational management skills. We are well established in the Group Insurance Market and are making a positive impact through our unique and innovative proposition. Our role is varied, innovative and very rewarding, working with our Claims Team, our Customers, their Employees and Treatment providers to prevent sickness absence where possible and early intervention to enable a sustainable return to work when absence occurs.

https://insurance-careers.taleo.net/careersection/zurich_ext_cs/jobdetail.ftl?job=1900087L



Developed by the RCN to support
the education and training of HCAs.

A free interactive training resource designed to equip new-to-post HCAs with the knowledge to succeed in their role.

www.rcn.org.uk/firststeps



Be a Live-in Nurse

Back to basics with 1:1 nursing



Are you a RGN with at least 3 years' experience? If so, we can offer you:

- Weekly pay from £1,265 plus 12.07% holiday pay
- The opportunity to work when you want (minimum requirement 12 weeks a year)
- Paid travel expenses, accommodation in the client's own home and meals
- Varied assignments across the country - England, Wales, Northern Ireland and the Channel Islands
- Typically two week assignments, nursing patients in their own homes on a one-to-one basis
- PAYE only

If you enjoy providing the highest standards of nursing care on a one-to-one basis, please contact us today for an informal chat about the role. (Community and acute hospital experience is required).

☎ 01732 771924 / 01732 770403

✉ nursing@consultuscare.com

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



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NHS Foundation Trust

Harefield Hospital, Middlesex

Critical Care Nurses

We're looking for highly motivated band 5 and band 6 nurses to join our busy, friendly department; you'll be keen to develop your critical care nursing skills whilst applying the 6Cs of nursing.

The ITU at Harefield Hospital consists of 29 level 3 beds and has undergone a recent expansion and renovation. We care for patients following complex cardiothoracic procedures; these include transplantation, ECMO and ventricular assist devices and we also receive patients following PPCI who require level 3 care.

Our education programmes will provide you with the essential knowledge and skills you require and the programmes are supported by our practice education team. So, you'll be fully supported whilst gaining experience in the care of critically ill patients.

Following orientation and completion of step one Clinical Competencies, you'll have the opportunity to access university-based post-graduate courses. We welcome applications from newly qualified nurses who have previously had an acute nursing placement.

For an informal visit or for more information, please contact Ellen Dunthorne / Moya Piper, Senior Sisters on 01895 823 737 ext 85680.

To apply, visit www.jobs.nhs.uk and search under Job Ref: Band 5: 312-HH-AA-6530 or Band 6: 312-HH-AA-6532.

Closing date: 31 March 2020



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www.rbht.nhs.uk



Are you a registered nurse?

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Apply today by visiting circlehealth.co.uk/careers



*subject to terms and conditions

Looking for a new opportunity in Oxfordshire or Warwickshire?



Nurse-led specialist care

We are looking for a capable, compassionate nurse to join our outstanding nurse led- team at Wardington House. We're a specialist home providing person-centred holistic care for people with dementia. Our residents have complex needs. The home has high staffing levels, its own training centre, and has won awards for its student nurse placements and mentoring.

This is an ideal role for a nurse who has an interest in both physical and mental health to develop a rewarding career. Training is available for anyone wanting to return to nursing after a break.

Wardington House is family owned and set in delightful gardens that provide a superb home for residents to enjoy their lives. The pay and working environment are excellent. There is free on-site parking.

If you are looking for an outstanding job in an outstanding home call Jane Worrall on 01295 750622 or email jane.worrall@wardington.com Wardington House, Wardington, Banbury, Oxon, OX17 1SD

Winchester

Senior Community Mental Health Practitioner

See our main advert in the Mental Health Section



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Competitive rates of pay with expenses.

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We are looking to supply our current clients including NHS Scotland and many private clients with experienced and passionate Nurses.

What will you benefit from?

- Flexibility to choose own working pattern
- Pay from £21.54 to £37.50 (Rates will depend on area, Self-Employed, NHS and Specialities)
- Holiday pay at 12% per hour
- Mandatory training (face to face and electronic modules)
- Free uniform upon joining
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- 24/7 on call support from clinical manager
- Weekly pay

Application process is send CV to bookings@delightsupportedliving.co.uk or call 07983 294029

Rushcliffe Care Group

Require Full Time, Part Time and Bank both General and Mental Health Nurses in a number of our homes across the UK (Leicestershire, Derbyshire, Kegworth Hospital)
Rate of pay **£16.50-£18.00 per hour** (depending on experiences and locality needs).

Contact; reception@rushcliffecare.co.uk for details and application form

We are an equal opportunities employer

Closing date for applications: 27th March 2020



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Australian Nursing Network helping you discover Australia via a 12 month Working Holiday Maker Visa (subclass 417)*

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Don't know where to start?

Your adventure would begin in beautiful Sydney working for us in some of the most prestigious centrally located hospitals in the North Shore Area.

We offer a one to one friendly service from our UK team who can offer ongoing guidance and assistance every step of the way regarding what to expect, what you need, and how to do various things necessary for your year in NSW, so when you arrive you are prepared and fully informed and will have a contact waiting for you in our Sydney office to assist further.

Now is the time to talk, if you don't ask you don't get to find out, so let's make it happen!

That first small step you take could be the beginning of an amazing new adventure or perhaps life!

Please email us with your details and include a contact number:
jackie@ausnursingnet.com.au

UK Phone: 0755 3385 183

Australian Nursing Network

* *Basic Eligibility Must be 18 to 30 years old (inclusive) - except for Canadian, French and Irish citizens up to 35 (inclusive)*

Must have a passport from an eligible country or jurisdiction

Must not be accompanied by dependent children

Is not for permanent migration



**HEALTH SERVICE EXECUTIVE, IRELAND
SAOLTA UNIVERSITY HEALTH CARE GROUP**



Saolta University Health Care Group, Ireland invites applications for the following post:

– Chief Director of Nursing & Midwifery

Ref: SG93

An exciting opportunity has arisen in Saolta University Health Care Group for an innovative and motivated Chief Director of Nursing and Midwifery. The Saolta University Health Care Group provides acute and specialist hospital services to the West and North West of Ireland – counties Galway, Mayo, Roscommon, Sligo, Leitrim, Donegal and adjoining counties.

As a member of the Group's Executive Management Team, the successful candidate will play an active role in contributing to the strategic direction of the Group, working closely with the hospital Directors of Nursing and Hospital Managers to deliver integrated high quality, patient centred care.

The principle objective of the post is to lead, inspire, direct and promote on-going improvements in nursing care and to foster a culture that strives for excellence in all aspects of the delivery of patient safety and care. The development of Advanced Nurse Practitioners and the enhancement of the Patients Experience are just some of the exciting projects that the CDONM will lead on. The successful candidate will have the ability to devise and implement strategy and have experience as a senior nurse in a large complex environment.

Informal enquiries to Mr Tony Canavan, Chief Executive Officer, Saolta University Health Care Group via Email: ceo.saolta@hse.ie or Tel: +353 (0)91 893882/893889

Closing date for receipt of application: **12 noon on 20th March, 2020.**

Full details on this post and requirements available on www.saolta.ie/jobs or www.hse.ie/jobs or should you wish to contact the Group Recruitment & Retention Office directly via Email: resources.human@hse.ie or Tel: +353 (0)91 542119.



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Quality Care

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

We are seeking to appoint a Care Manager to assist our Care Director and lead our committed team in the day to day running of Maison L'Aumone, a purpose built 41 bedded residential home. The successful candidate needs to be an RGN/RMN and possess NVQ Level 5 Leadership & Management in Health & Social Care or be willing to undertake the award. Applicants will need to adopt a person-centred ethos and be able to demonstrate strong leadership qualities. A minimum of one year's management experience is essential. A relocation package is available.

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



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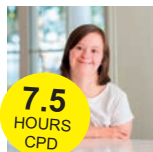


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Safeguarding Adults Level 3 (1 Day) **NEW!**

ONLY £79
+VAT

£94.80 (inc of VAT)



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

LONDON COURSES:- MAR 25th APR 28th

BIRMINGHAM COURSES:- MAR 13th APR 17th

MANCHESTER COURSES:- MAR 13th APR 17th

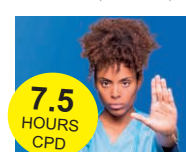
Course Content Includes: -

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

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

ONLY £79
+VAT

£94.80 (inc of VAT)



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

LONDON COURSES:- MAR 17th APR 20th

BIRMINGHAM COURSES:- MAR 10th APR 7th

MANCHESTER COURSES:- MAR 10th APR 7th

Course Content Includes: -

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

Clinical Record Keeping (½ Day)

ONLY £65
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£78 (inc of VAT)



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

LONDON COURSES:- MAR 2nd APR 6th MAY 4th

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)



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

LONDON COURSES:- MAR 2nd 21st APR 6th 18th

Course Content Includes: -

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

Medication Administration (½ Day)

ONLY £65
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£78 (inc of VAT)



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

LONDON COURSES:- MAR 11th 25th APR 8th 22nd

BIRMINGHAM COURSES:- MAR 17th APR 14th

BRISTOL COURSES:- MAR 19th APR 16th MAY 14th

MANCHESTER COURSES:- MAR 11th APR 8th

Course Content Includes: -

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Venepuncture + Cannulation (1 Day)

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£114 (inc of VAT)



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

LONDON COURSES:- MAR 7th 11th 21st 25th

BIRMINGHAM COURSES:- MAR 18th APR 15th

MANCHESTER COURSES:- MAR 18th APR 1st

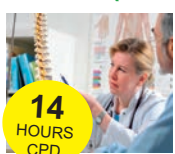
Course Content Includes: -

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

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

ONLY £395
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£474 (inc of VAT)



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

LONDON COURSES:- MAR 23rd - 24th

BIRMINGHAM COURSES:- MAR 10th - 11th

MANCHESTER COURSES:- MAR 25th - 26th

Course Content Includes: -

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

Mental Health Awareness (1 Day)

ONLY £79
+VAT

£94.80 (inc of VAT)



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

LONDON COURSES:- MAR 3rd 30th APR 7th 25th

MANCHESTER COURSES:- MAR 25th APR 15th

Course Content Includes: -

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

Dementia Awareness (1 Day)

ONLY £79
+VAT

£94.80 (inc of VAT)



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

LONDON COURSES:- MAR 7th APR 3rd

BIRMINGHAM COURSES:- MAR 25th APR 22nd

Course Content Includes: -

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

Book Online at www.hs-group.com
(For in-house training enquiries please call us on 0203 010 0022)



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NEW!
Management of Aggression Training:-

- Breakaway
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- PMVA 3 Day

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LONDON CHISWICK MAR - 16th, 28th	LUTON MAR - 4th, 11th, 18th, 25th	PORTSMOUTH MAR - 5th, 12th, 19th, 26th	NOTTINGHAM MAR - 6th, 13th, 20th, 21st, 27th
LONDON KENSINGTON MAR - 4th, 6th, 7th, 11th, 13th, 14th, 18th, 20th, 21st, 25th, 27th, 28th	OXFORD MAR - 11th, 21st, 25th	BOURNEMOUTH MAR - 4th, 18th, 19th	SHEFFIELD MAR - 2nd, 12th, 14th, 19th, 24th
LONDON EUSTON MAR - 2nd, 6th, 7th, 9th, 13th, 14th, 16th, 20th, 21st, 23rd, 27th, 28th, 30th	BIRMINGHAM MAR - 2nd, 5th, 6th, 7th, 9th, 12th, 13th, 14th, 16th, 19th, 20th, 21st, 23rd, 26th, 27th, 28th, 30th	BRIGHTON MAR - 3rd, 10th, 17th, 24th, 31st	LEEDS MAR - 4th, 6th, 7th, 11th, 13th, 18th, 20th, 21st, 25th, 27th
LONDON VICTORIA MAR - 4th, 7th, 9th, 12th, 16th, 19th, 21st, 23rd, 26th, 28th, 30th	COVENTRY MAR - 4th, 18th, 28th	MAIDSTONE MAR - 12th, 14th, 18th, 19th, 26th	LIVERPOOL MAR - 3rd, 17th, 31st
LONDON STRATFORD MAR - 2nd, 5th, 6th, 7th, 9th, 10th, 11th, 12th, 13th, 14th, 16th, 17th, 18th, 19th, 20th, 21st, 23rd, 24th, 25th, 26th, 27th, 28th, 30th, 31st	LEICESTER MAR - 11th, 25th, 24th	MILTON KEYNES MAR - 10th, 17th, 24th, 31st	MANCHESTER MAR - 2nd, 6th, 7th, 9th, 13th, 14th, 16th, 20th, 21st, 23rd, 26th, 27th, 28th, 30th
LONDON WATERLOO MAR - 3rd, 6th, 7th, 10th, 13th, 14th, 17th, 20th, 21st, 24th, 27th, 28th, 31st	BRISTOL MAR - 5th, 10th, 12th, 17th, 24th, 26th, 31st,	COLCHESTER MAR - 4th, 5th	BRADFORD MAR - 6th, 20th
CROYDON MAR - 18th, 17th, 31st	CARDIFF MAR - 18th, 26th	CHELMSFORD MAR - 6th, 11th, 25th	PRESTON MAR - 11th, 20th
READING MAR - 4th, 11th, 18th, 25th, 28th	EXETER MAR - 5th, 12th, 19th, 26th	HUNTINGDON MAR - 13th, 27th	NEWCASTLE MAR - 4th, 11th, 25th
	PLYMOUTH MAR - 5th, 19th, 27th	NORWICH MAR - 12th, 16th, 26th	HULL MAR - 13th, 27th
	SOUTHAMPTON MAR - 2nd, 10th, 16th, 24th, 31st	NORTHAMPTON MAR - 3rd, 10th, 17th, 24th, 31st	GLASGOW MAR - 23rd, 9th
		PETERBOROUGH MAR - 25th, 11th	EDINBURGH MAR - 13th, 30th
		DERBY MAR - 11th, 25th	

Book Online at www.hs-group.com
 (For in-house training enquiries please call us on 0203 010 0022)



Southern Health
NHS Foundation Trust

Care to join us in Hampshire? Senior Community Mental Health Practitioner

Based in Winchester Salary: Band 6 £30,401 - £37,267 pa Hours: 37.5 pw

We're looking for skilled and dedicated individuals to join our team to support the delivery of responsive, evidence-based recovery focused care to the service users in acute mental health crisis.

We receive high recommendations from our staff, here's some examples:

- "Real team-working, friendly and feels supported, like a family"
- "I've had training opportunities to support my professional development"
- "This is a supportive team, committed to delivering high quality care"
- "Good line management and I have regular monthly supervision"

To be successful you must possess excellent clinical skills and the ability to complete comprehensive mental state examinations, thoroughly assess risk, formulate safe and effective risk management plans, and document this clearly and concisely.

It is desirable that applicants are flexible and able to work shifts and unsociable hours as required. An ability to drive and access to a car for work purposes is essential.

Benefits available include:

- A Golden Hello payment of £2,500 to external candidates
- Relocation package up to £8,000
- £1,000 if you recommend a friend to come and work in the trust
- Generous annual leave entitlement and NHS pension scheme
- Regular clinical supervision and training opportunities
- A range of staff discounts including childcare vouchers and cycle to work scheme

For an informal discussion please contact Clive Redgrove or Peter Hurst on 01962 897730.

To find out more and apply visit: www.southernhealth.nhs.uk/work-for-us

Fair Ways

Athelstan House, Southampton

We are hiring a Registered Nurse Manager to join our children's and young people's mental health service during a period of growth and development. Athelstan House, Southampton, is a CQC registered 6 bedded home located in Southampton that provides a mental health rehabilitation and recovery service for young people transitioning from Tier 4 in-patient services. The care we deliver is based on a community model, with a non-restraint policy, encouraging young people to re-integrate into society whilst being supported in developing successful futures. 5 years post-registration experience required.

You will be at the forefront of managing, guiding and leading the team to provide high-quality mental health care.

Salary for this role is ranged at £33,434 -£40,182 per annum (AFC band 6/7 equivalent) with a host of benefits including 25 days annual leave plus bank holidays, pay enhancements to reward unsociable hours and the opportunity to purchase additional annual leave. We also cover NMC registration fees.

Flexible working hours will be considered on an individual basis.

Fair Ways is a not for profit organisation where we pride ourselves on getting the best from our staff and young people which we encourage through training, engagement and delivery.

Closing date for this role is **Monday the 30th of March 2020** with interviews taking place week commencing **Monday the 6th of April 2020**.

If this role is of interest or you are keen to learn of other opportunities don't hesitate to contact Fair Ways on 02380 230400 or email caroline.williams@fairways.co with your current CV and covering letter to receive an application form



JOIN OUR AMAZING TEAM

About Lilian Faithfull Care

We are a well-established charity based in Gloucestershire that provides care, support and a 'Home for Life' for the elderly.

Opportunities

As we expand our care, we are seeking to recruit RGNs into our amazing teams across our group. We have several nursing roles at our homes in Cheltenham and Stroud. Day or night shifts, and either full or part time considered.

About the role

As a highly valued nurse, you will have a wide range of responsibilities, caring for the clinical / wellbeing needs of our residents. You will have proven clinical skills, a strong understanding of dementia and be passionate about the care of older people. Your communication skills are key to this role - both verbal and written. A current active UK nurse's pin is required.

In return we provide:

- Competitive salaries
- A £1 enhancement for hours at weekend
- Excellent training
- Health plan to support your wellbeing
- Free life insurance x 2 annual salary & subsidised critical illness
- Paid breaks
- A friendly & supportive place to work.

Get in touch today

Please call us on 01242 500415 or send your CV to HR@LFHgroup.co.uk or visit our website for an application form lilianfaithfull.co.uk/about-us/work-with-us

REGISTERED NURSE REQUIRED TO JOIN PORTHGWARA NURSING HOME RATED OUTSTANDING BY CQC

We are looking for a Registered Nurse to join our dedicated Nursing team, with a passion for the care of the older person. Our strong clinical team is supported by enhanced training and we work closely with the MDT to provide specialised care within our high-quality nursing home in a stunning seaside location.

Package £29,000 to £34,000 plus benefits, Tier 2 paid, location package.

Please contact Melissa Norman Registered Manger on 01326 280307 or email info@porthgwara.co.uk

Porthgwara Nursing Home, North Corner, Coverack, Cornwall TR12 6TG

Sisters of St. Joseph of Anney

Llantarnam Abbey, Llantarnam. Cwmbran. NP44 3YJ

Care of Older People

RMN or RN

32 hours per week - £13.00 per hour (enhanced rates for weekend working)

Contact David Watts, HR Manager, on 01633 483232 or e mail hrcmanager@sistersofstjoseph.co.uk



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Putting patients at the heart of the care we deliver.



Why we do what we do

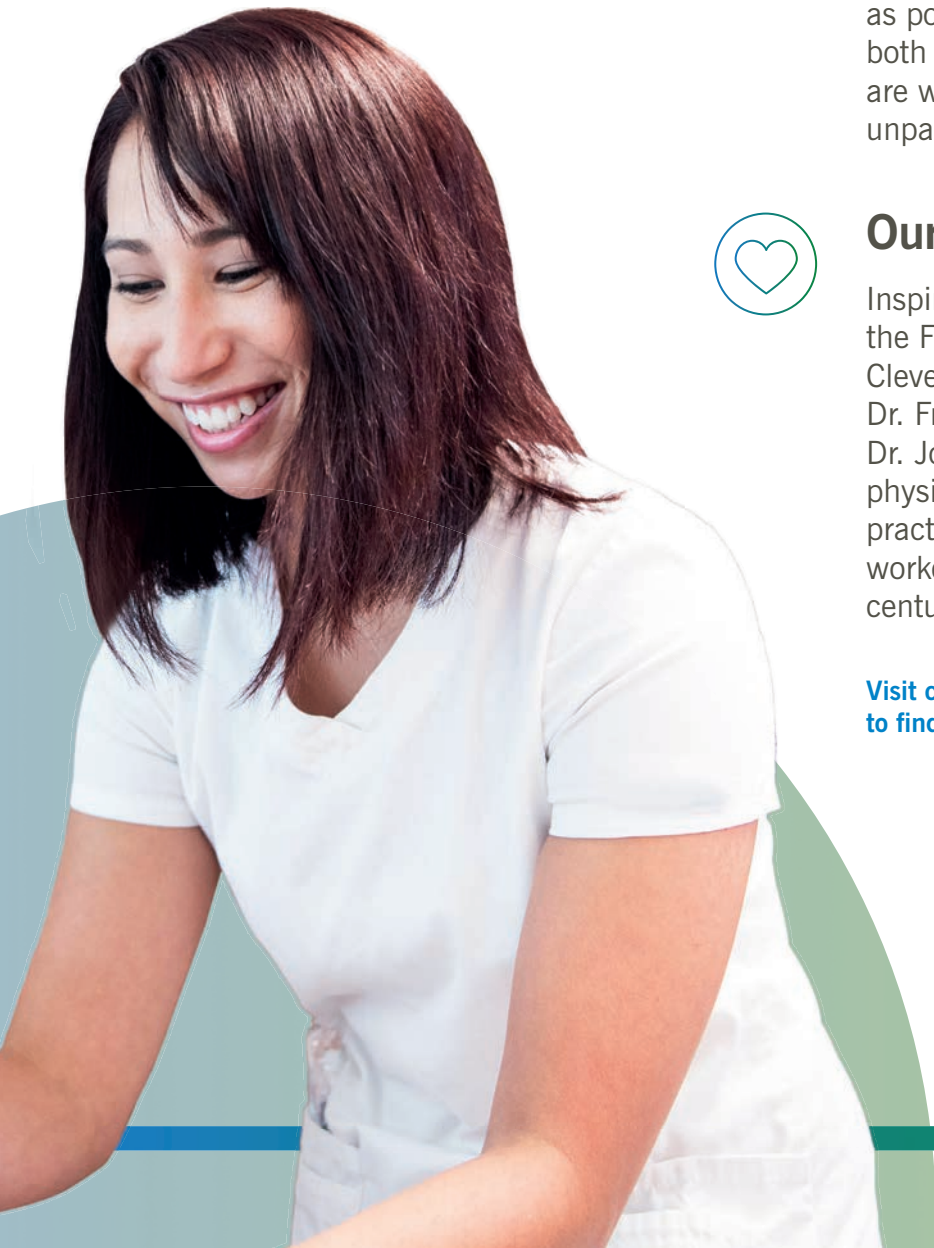
Cleveland Clinic was founded not just for care, but for so much more as well. We invest in groundbreaking research and development, we look to learn as much as possible, and we lead with innovations both large and small. All of these elements are what helps us provide our patients with unparalleled care that puts them first.



Our heritage

Inspired by the effort of the US forces during the First World War, four doctors founded Cleveland Clinic. Dr. George Clark Sr, Dr. Frank Bunts, Dr. William Lower and Dr. John Phillips saw a future where physicians could put their expertise into practice and change the way healthcare worked on a deeper level. Over the next century, they would achieve exactly that.

Visit careers.clevelandcliniclondon.uk/nursing to find out more.





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REGISTERED NURSE (NON-COMMISSIONED OFFICER)

£32-51K P/A

- Clinical Position
- Apply in your final year of nurse training or already registered
- No experience required
- Recruit to age 47

REGISTERED NURSE (OFFICER)

£33-64K P/A

- Clinical and Managerial role
- Apply after NMC registration
- Min. 24 months acute clinical experience
- Some management and leadership experience
- Recruit to age 47

Must be resident in the UK for past 5 years