TWEETS OF THE WEEK

Not allowed drinks on ward cos (a) infection (b) unprofessional (c) not good 4 nil by mouth patients to see
@shinybluedress

Clinicians need to 'grasp the nettle' and initiate advanced care planning conversations
@KDenning

Robotcleaner likely 2 be damn sight cheaper long term than paying for home help for s/o physically unable 2 push vac around
@KatharineChrome

Jeremy Corbyn highlights mental health as priority
@NursesCafe

#Nurses don't necessarily have the time, they just have the heart. Thank you nurses for all you do
@American_Heart

This why out of date attitudes persist #mentalhealth because people without compassion open their mouths #endstigma
@stueymckenzie

1st long clinical shift yesterday since June. Sore fingers from milking chest drains. Loveliest moment holding a hand
@amd4_ann

I love this: 'No problem is a problem. Problems are a golden opportunity for improvement.'
@HelloMyNameIsJoan

'How can we expect compassion from undervalued individuals?' Dr Edmonstone on emotional labour in healthcare #CfL2015
@TheBMA @Jeremy_Hunt @Telle_101

Follow Nursing Standard @NurseStandard and join the #NScomment chat on Thursdays at 12.30pm

COULD YOU SPOT SOMEONE WHO HAD BEEN SUBJECT TO TRAFFICKING?

Human trafficking is a despicable and cruel trade in vulnerable human beings.

As nurses and midwives, we are most likely to see these individuals when they access health care, often with late presentation, or when they have been injured or arrested.

We have a responsibility to recognise the signs that someone is not free to make their own decisions. If we suspect someone is the victim of trafficking, it is our duty to know how best to help and protect them from further harm.

They may not have obvious injuries, but instead might display signs of fear or stress. They may have old scarring or fractures, or display signs of having been raped. It could be they do not know their address, lack identification, fear authority, struggle with language and have someone with them who speaks for them.

With the increasing numbers of refugees fleeing conflict in Syria, Eritrea and Iraq, and others fleeing poverty in their home countries, there is a new supply of people who will be easy prey for the traffickers. We need to be vigilant so we can identify and support the victims to escape their abusers and be protected from further exploitation.

Amanda Cheesley, Fiona Smith and Carmel Bagness, RCN, by email

WE HOPE THESE TIPS WILL BOOST ATTENDANCE AT ASTHMA REVIEWS

One million people with asthma missed their annual review appointment last year.

'Did not attend' (DNAs) are one of the biggest sources of frustration for clinicians, many of whom are working longer hours than ever before. Non-attendance means patients are not receiving the right care to manage their asthma effectively.

This is why Asthma UK has been working directly with healthcare professionals in primary care to identify proven, practical tips to reduce DNAs

and encourage patients to be better prepared for their asthma reviews.

They include simple suggestions, such as asking patients to make a video of their symptoms on their smart phone, and undertaking asthma reviews for children in the summer holidays before the back-to-school spike in asthma attacks. We believe this advice, put together with nurses and GPs, will help to improve care and reduce the number of people being admitted to hospital because of life-threatening asthma attacks. These attacks still kill three people every day in the UK.

You can view and download the top tips at www.asthma.org.uk/10toptips. We welcome feedback on the top tips from nurses and would like to hear other suggestions, so please do have a read and get in touch.

Andrew Proctor, director of advice and support at Asthma UK, by email

What you're saying on Facebook...

ON WHY SCHOOL NURSES SHOULD CONSIDER WEARING UNIFORM

■ That is what children want to see? What utter rubbish! A uniform creates barriers between nurses and their patients, particularly children. This is an outdated theory peddled by someone who clearly likes the hierarchies uniforms create.

■ Children need to feel they can approach nurses, they don't need to feel anxious when they spot someone walking down the corridor in a uniform.

■ Pink scrubs are fine on a ward, not exactly appropriate when walking around a community though. I have worked in school nursing, and wouldn't have done so if I had to walk around in scrubs.

Emma Smith

■ Yes I think they should! The children loved me in my pink scrubs they look and are far less scary than civilian clothes!

Buddug Roberts