YOUR VIEWS

Stop ticking and start talking

Your story about intentional rounding (news online, 5 April) reminded me of the ‘back rounds’ we did, where every patient who had difficulty attending to their activities of daily living was repositioned and asked how their day was going and how they were feeling.

We interacted with every patient on the ward. We had a structure to end to patients, but this was certainly not the only time we spoke to them.

How sad that for today’s young nurses communicating with patients is a ‘tick box’. Engaging with patients when you pass their bed makes it part of general conversation rather than a battery of questions.

Elaine Davin

Intentional rounds promote regular interaction with patients

Hard work counts for nothing

Janet Davies’s column on the fight for fair pay (opinion online, 7 April) resonates.

I hit the top of my pay band in November 2012. With some rough maths, this means I have had an average real-terms pay cut of 1.2% a year since then.

During this time, I have gained knowledge and experience and contributed to improving patient care in an increasingly difficult working environment. This suggests the government has little regard for the work that my colleagues and I do every day.

Gary Riding

Someone will have to pay

So everyone at the Nursing and Midwifery Council gets a 2% pay rise in 2017-18 at a cost of £800,000 (news, 5 April). I wonder how long it will be before they offset this cost by raising the obligatory registration fee for nurses and midwives?

Elaine Heeney

Shetland is where it’s at

There are so many challenges facing nurses and healthcare. From funding cuts to public health, the picture is dishearteningly complex. No wonder many would be tempted to disappear to a remote island.

It was great to see a nursing post highlighted in your news pages (19 April) on the tiny island of Fair Isle, not far from where I grew up in Shetland. Not ‘the Shetlands’, as the article says. If you ever want to really irritate one of the 23,000 people who call this distant archipelago home, you just need to call it the ‘Shetlands’. There’s no such place.

We’re proud of Shetland; its contribution to the world is far greater than its tiny size would suggest – from music to oil, fishing to renewable technology.

Ed Freshwater

Define ‘learning disabilities’

Should consideration be given to what we mean by the term ‘learning disabilities’, given the difficulty in recruiting nurses to this area (editorial, 19 April)?

The danger is that the needs of this group are going under the radar. I wonder whether ‘learning disabilities’ sufficiently highlights the seriousness of the particular health issues faced by some.

Most people have an idea of what is meant by the term ‘psychiatric nursing’, but not ‘learning disabilities’. Perhaps more educations is required.

Michael Owen

TWEETS OF THE WEEK

Join the @NurseStandard Twitterchat every Thursday from 1pm to 2pm using #NSComment

Last week we asked: Would better hospital food combat weight problems?

‘Poor quality food not seen as a priority with poor NHS funding. Healthy, good quality food isn’t cheap’
@drew_london

‘One-size-fits-all portion sizes are wasteful too – a 90yr-old patient weighing <50kg is not going to eat the same as a teenage boy.’
@muireanntweets

How about using colour coding (red, amber, green) on the food when given to a patient so patients know the nutritional values?
@RotationNurse

Not necessarily, but it could help them have a sense of home while recuperating
@honeykhansolah