A lack of children’s nurses is contributing to the mounting staffing crisis facing paediatric units across the UK, the RCN has warned.

‘Nurses as individuals have a tendency to just get on with things, but it is when we come together that we see the bigger picture’

Read how Venetia Wynter-Blyth became RCNi Nurse of the Year 2016

rcni.com/awards-opportunity

‘In palliative care we help children make memories’

With a shortage of qualified nurses in the voluntary sector, staff nurse Julie Webber explains why she loves this rewarding role

The charity Together for Short Lives has launched a campaign to encourage nurses to consider a role in children’s palliative care in the voluntary sector, to prevent any further reduction in services for this already vulnerable group.

Workforce and development manager Gillian Dickson says: ‘Our campaign is shining a light on nursing careers in this sector.

‘The opportunity to provide holistic care to the child and their family make this one of the most rewarding roles in nursing.’

Staff nurse Julie Webber agrees. She works at Rachel House Children’s Hospice in Kinross, Scotland, where she cares for children who have a palliative diagnosis and their families, a role that involves end of life care.

After qualifying in 2002, she worked in ENT/neurology at Glasgow Children’s Hospital, then in psychiatric intensive care at the Royal Hospital for Sick Children in Edinburgh. She joined Rachel House a year ago.

CONTINUED

Reflect on your successes in 2016

› gratitude diaries to help appreciate the good things in their lives. On the ward it’s unrealistic for staff to sit updating their journals, but there may be ways to nurture an appreciative and supportive culture in your team. For example, you can challenge the assumption that de-briefs should only happen after stressful events. What could you do when something positive happens?

› Set small, realistic goals: Reflect on the past year and consider what you would like to do better in 2017. Can you break this down into small achievable steps and set yourself a timeframe? Sharing your goal with a colleague may help motivate them to do the same – you could even put your goals on a poster in the duty room and encourage others to join in.

› Focus on making a difference: You may not be able to fix the NHS or even your local trust, but remember the impact that you can have on those you nurse. Small gestures are often priceless to someone whose dignity is being compromised.

Mandy Day-Calder is a freelance writer and life/health coach
There are more than 50,000 children and young people in the UK expected to have short lives.

Two thirds of voluntary services surveyed by Together for Short Lives reported that a nurse shortage is resulting in a reduced care offering.

The nurse vacancy rate in the children’s palliative care voluntary sector is 10%, higher than the NHS nurse vacancy rate of 7%.

‘There are so many rewards,’ she says. ‘I enjoy working closely with the children and their families. It is lovely to be able to offer the children choices, engage with their wishes and enable them to make memories.’

The post is Ms Webber’s first outside the NHS and she has found it a more supportive environment.

She has taken part in in-house professional development, covering end of life symptoms and care and spirituality, and has also attended an external respiratory study day. Staff have access to clinical supervision sessions, a competency framework and leadership opportunities.

‘The role has improved my nursing practice,’ says Ms Webber. ‘My clinical skills have improved, as well as my communication skills, which allows me to be more empathetic. I’m involved in decision-making processes and am a more autonomous practitioner as a result.’

‘There is help and support to overcome any initial difficulties,’ she says. ‘I love coming to work every day.’

About the sector

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‘Marcus is someone who dreams big and he’s the one actually here doing most of this work. He’s dedicated his life to this’

Oscar-winning actor Charlize Theron, speaking about HIV nurse Marcus McGilvray

60-SECOND INTERVIEW

‘I love having the time to talk’

People with asthma need consistent, personalised advice, says asthma nurse specialist Barbara Stephenson

Barbara Stephenson qualified at Westminster Hospital in London 40 years ago. She was a medical ward sister, then a practice nurse, and has taught the diabetes X-pert programme to patients. Her current role is asthma nurse specialist at Asthma UK.

What are your main work responsibilities?
Helping with clinical input at Asthma UK, including doing callbacks on the helpline.

How did you get your job?
I answered an advertisement in the RCN Bulletin eight years ago.

Who are your clients/patients?
People with asthma, healthcare professionals, pharmacists, school staff, and friends and relatives of people with asthma.

What do you love about your job?
Having the time to talk to people and being able to give them the confidence and knowledge to obtain the help they need and deserve.

What do you find most difficult?
Callers who are bereaved or struggling with managing their or their children’s asthma.

What is your top work priority?
To use British Thoracic Society asthma guidelines to give consistent, personalised advice; the aim is to empower people to get the right care and manage their asthma better, and reduce the likelihood of them having an asthma attack.

How have you developed your skills in this role?
- By listening to colleagues and giving and receiving feedback.
- Also, by attending training in bereavement counselling and keeping up to date with asthma guidelines.

What has been your most formative career experience?
The gratitude that callers express for our service is rewarding.

What will be your next career move?
I have moved into the final years of my career and I’m assuming this will be my last job.

What career advice would you give your younger self?
Have confidence to do what you feel is right for you at the time.