LETTERS

We welcome all readers’ letters, but reserve the right to edit them or withhold names and addresses. Please write to: The Editor, Nursing Standard, The Heights, 59-65 Lowlands Road, Harrow-on-the-Hill, Middlesex HA1 3AW. Email: letters@rcnpublishing.co.uk

Please keep letters to a maximum of 150 words, and include your full name, address and a daytime telephone number

We must not overlook the vital role played by fathers of young patients

What a refreshing feature article from Alison Handley (August 17), who confronts us with our sometimes less-than-professional attitudes that sideline the fathers of young patients. Research continues to show a lack of insight from children’s nurses into the father’s point of view.

We continue to stereotype males in ways that recall Felicity Stockwell’s groundbreaking 1972 study, The Unpopular Patient, rather than seeing men as a key part of family support.

Thirty nine years later, in a video webcast on the Nursing Standard website (www.nursing-standard.co.uk), Ms Stockwell continues to call for better care.

We need to reflect on our attitudes. They can make a family experience of health care good – or dreadful. Nurses should be specially trained to help fathers feel as valued in the care of their sick children as mothers.

Greta McGough, by email

HIGH FLYERS NEED HELP TO GET THEIR IDEAS OFF THE GROUND

Jennifer Boore (career development August 3) highlights nurses’ opportunities to be entrepreneurial and the innovative characteristics many of them share.

After 20 years of running our innovation awards, the Queen’s Nursing Institute would add that nurses who have these qualities often need support in the face of hostility and entrenched opposition to new practices.

Our innovation awards provide a year’s professional development and project site visits, as well as funding. The aim is to ensure that the spark of creativity is not stamped out in difficult circumstances.

We are recruiting for our next round of projects and hope that many nurses will be encouraged by Professor Boore’s words to take the leap and submit their ideas.

For those who see themselves as high-flying entrepreneurs, there is the new – and free – Nurse First programme. Check out www.nursefirst.org.uk for details.

Rosemary Cook, director, Queen’s Nursing Institute, London

CUTTING MEDICINAL WASTE REQUIRES FURTHER INVESTMENT

Wasted medicines cost the NHS £300 million each year. The recent report by health economists on the problem elicited some interesting responses (news August 17).

However, much of this waste is inevitable, as patients change treatments or recover. Any waste-reduction initiatives will be expensive in terms of staff time, estimated at £25 to £100 per hour. This might be considered alongside the burgeoning claims for substandard clinical care, payments for which exceeded £770 million in 2010/11.

Some authorities view failure to monitor patients for adverse effects of medication as drug errors. Accordingly, the health services need unified, universal and consistent medicines management strategies.

Most particularly, patients with long-term prescriptions require regular and comprehensive monitoring for harms, benefits and compliance. This could be achieved by completion of adverse drug reaction profiles by the patients’ own nurses, coupled with efficient communication with prescribers.

However, evaluation of the impact on healthcare costs and medicines waste will invariably require further investment.

Sue Jordan, by email