

Nurses need to support patients over driving issues



Janet Sumner,
Diabetes Care
Facilitator,
Swindon.

I write in response to the article 'Diabetic drivers: get up to date with the new regulations' (Vol 2, No 1, p9). I would like to urge all diabetes nurses and other health care professionals, not just to be aware of these regulations but to support their patients in a practical way, taking the role of patient advocate to fight this ruling.

A note of support has been received from Dr Evan Harris, Liberal Democrat MP, Oxford West, stating 'It

is doubtful that the new restrictions will add anything to road safety. They will certainly result in job losses'.

The Prime Minister has been asked 'if the decision on the new regulations was based on statistical evidence of increased accidents'. The reply was, 'The Prime Minister could not point to any such evidence.'

As nurses we are constantly urged to use evidence-based practice. Perhaps we should encourage our politicians to take the same medicine. Write today!

Should DSNs market themselves better?



Sara Da Costa,
Chair, UK
Association of
DSNs

I would like to take this opportunity to reply to the article 'The Northampton story: DSNs under threat' (Vol 2 No 1: 4-5). I would like to congratulate Jan Anfield on her ability to discuss with clarity such an emotive and frustrating experience. It is a worry shared by all DSNs and — as her experience shows — is directly related to a lack of understanding and thereby value of the DSN role.

This was one of the main reasons why the UK Association of DSNs was founded; our aim is to raise awareness by clarifying both the educational preparation and definition of the role itself. We will address the former by a joint Working Party with the RCN later this year which intends to recommend to the UKCC appropriate educational preparation for practice for colleagues entering the speciality as well as those currently in post.

Key to our continued employment is the need to actually discuss our role, its potential and its value in terms of quality client care and service development. This would be better addressed collectively by local and national marketing — while many of you may feel uncomfortable at my use of this term, it is a strategy we must address.

Often it is one we choose to ignore in favour of delivering client care. However, if we are simply viewed as an expense, and do not invest the time in persuading decision-makers otherwise, we are liable to be cut out. And who will deliver client care then?

The UK Association welcomes any strategies you may have, and would be willing to collate and promote ideas. Please make the time to consider this, for national recommendations and marketing would certainly help our future; apathy will not.

Northampton nurses prove their worth



Jan Anfield,
DSN,
Northampton

I am pleased to report that funds have been secured to maintain the diabetes specialist nurse posts in Northampton on a permanent basis. The Health Authority found, on examination of the facts (including activity levels and potential costings) that their proposal for all diabetes nursing to be devolved to practice nurses was neither practical nor cost effective. As a result of their enquiries the posts have been transferred to another trust which will facilitate the team unity and provide more sensible management arrangements.

Since these proposals were first suggested we have received overwhelming encouragement from our medical colleagues, the local BDA and patients past and present. We had a fight on our hands and the battle was won, in

my view, because we were able to show what very good value for money we represent.

Part of our battle plan involved using the media to sell ourselves and our role. Whilst very threatening, entering the public arena has raised our profile. The sales campaign was a success — our purchasers have decided, after careful scrutiny, to continue to buy the service.

As a group, we need to organise a sales campaign — we need to identify and advertise the value of our product, to put a fair price on it, to know when to use the soft sell and the hard-nosed approach, and to know who to target within the organisation to ensure they keep buying the goods. In short we need to become more strategic and political. That may cost time spent on patient care, but what will be the price if we do not?