

A Professional Resource for Nurses New to Defence





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Publication

This is an RCN service guidance document. Service guidance documents focus on the organisation, resourcing and delivery of health and social care services for specified populations and/or staff groups delivering care. They are intended to support service commissioning, planning and provision as well as improvements in service quality and people's experience of health and social care services.

Description

This resource provides guidance and advice for nurses who are new to the Defence Medical Services. It includes information on developing your career, raising concerns and managing stress.

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Evaluation

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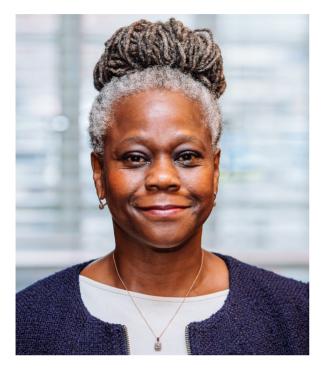
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Foreword



On behalf of the RCN I would like to congratulate you on your new role working in defence.

Whether joining the Regulars or the Reserves, the challenges you will face, the friendships you will forge, and the skills you will learn going forward will benefit you, your colleagues and those under your nursing care.

This booklet is intended to guide you through the start of your future career, with information on a number of useful resources, including the importance of taking time to care for yourself.

With all good wishes for your future career.

Dame Donna Kinnair

Acting RCN Chief Executive and General Secretary

About this resource

This resource has been developed for nurses joining the Defence Medical Services (DMS), to help support their transition into this new specialist area of employment. It aims to be a practical guide signposting readers to key professional resources, as we realise that members lead busy lives. Information contained within this resource has been collated from a variety of sources, including crowdsourcing events with the Royal College of Nursing, Defence Nursing Forum (RCN DNF) members and support from educationalists at Birmingham City University. The project was funded by an RCN Forums Governance professional grant.

About the Defence Nursing Forum

The Defence Nursing Forum (DNF) provides specialist professional advice and educational resources for defence nurses. By joining a professional forum within the RCN you will have access to specialist information and educational events related to your role, in addition to networking opportunities with peers. Details of the RCN DNF can be found at:

- Facebook: RCN Defence Nursing Forum
- Twitter @rcn_dnf
- RCN website: www.rcn.org.uk/getinvolved/forums/defence-nursing-forum

The DNF is one of the RCN professional forums. Forums are groups of RCN members who work, or have an interest in, a particular nursing speciality. There are many forums covering areas such as education, critical care and mental health. As a forum member, you are part of a community that:

- shares ideas and best practice
- works to enhance knowledge in a particular speciality
- shapes nursing practice
- helps to identify, promote and develop future nurses and nurse leaders.

Details of other professional forums can be found at: www.rcn.org.uk/get-involved/forums



Defence Medical Services (DMS)



The DMS manages many of the clinical personnel working in defence. Within the UK the primary function of the DMS is to ensure defence personnel are prepared and medically fit for deployment; this involves delivering and co-ordinating primary health care, dental care, secondary health care, rehabilitation, occupational health, community mental health and specialist medical care, including public health, for all defence personnel.

Each service has a distinctive character, history, rank structure and terminology, but they all share core values. The values and standards of each service outline the conduct to be adhered to at all times, both when in uniform and off-duty. Failure to uphold the values and standards means individuals may be subjected to disciplinary or administrative action, and the Service Test is used to determine whether the actions of an individual have adversely affected the operational effectiveness of a unit. It is important to celebrate diversity, but also to recognise the similarities between the organisations and the need to work together. Teamwork, leadership and followership are core skills required to pull together as a team in order to deliver the necessary clinical capability and achieve operational effectiveness. Personnel are expected to put the needs of the service and others ahead of their own and to demonstrate their values and standards at all times. Triservice working is expected, so an understanding of the rank structure is important.

New job, new role

As with any new job or role, you will work alongside a wide variety of people, and will need to develop new working relationships and understand how a new organisation works. The first few months is often a really positive time, but it can also be challenging and test even the most experienced nurse. This period of adjustment to a change in role or environment is commonly referred to as 'transition'. The transition time period may vary depending on the individual, but can last for 12 months. There are many models of transition that can be useful to help understand the process you may go through; Box 1 outlines a useful resource.

The transition period can be a hugely rich and rewarding time too. It will help shape you as a person and a professional, so be prepared to get everything you can from these experiences. The purpose of your first posting is to integrate into the military environment, complete your preceptorship programme if required, and build on your experiences. If you are a newly qualified nurse when you join your first clinical unit (either a Defence Medical Group (DMG) or a Department of Community Mental Health (DCMH) as a mental health nurse), you will undertake a preceptorship programme. This will help you transition to defence and cope with the reality of the challenges. Here are some quick and simple suggestions that might help ease you into your new first posting:

- Prior to arriving at any unit you are encouraged to write an introduction letter to your new chain of command (utilising JSP 101). This provides an opportunity to tell your new unit about yourself and any interests you have (for example, professional or sporting) and also to inform them of your proposed arrival dates. It is also good practice to enclose a curriculum vitae.
- Your first posting should be seen as a learning opportunity: even as an experienced nurse you will need to learn lots of new things, so take every opportunity as you might not have time later.
- Find out about the unit's induction or preceptorship package. What opportunities are available? Will you have a mentor?
- Remember to ask for help: the military and health care are built around teams and teams working together.

Box 1: Transition resources

The Transition Stages Model can be viewed online at http://nursingthefuture.ca

Strategies for facilitating transition can be found at www.academia.edu/1737146/ Professional_Role_Transition_for_New_ Nurses

Managing your career

Appraisal

As service personnel you will have an annual report. These reports are important as they can be used as evidence for your Nursing and Midwifery Council (NMC) revalidation, but they also provide valuable feedback on your performance and potential and are instrumental in your career management. There is specialist annual report guidance you should follow and this should be briefed to you during basic training. Key messages include:

- Find out who your First (1RO) and Second Reporting Officers (2RO) are. As a minimum, you should meet with your 1RO at the start, mid-point and end of the report period.
- Set your objectives for the year.
- Know your reporting period.
- You should have a mid-point appraisal.
- Ensure you have an annual report!

Details of military appraisals can be found in JSP 757. For civilian personnel they can be found in the Human Resources Management System (HRMS).

Continuing professional development opportunities

As an NMC-registered nurse, you will be required to complete revalidation. This includes a requirement to complete continuing professional development (CPD) relating to your nursing and defence roles. Within defence, ongoing development is closely aligned to promotion and opportunities for experiences beyond military service boundaries. As new graduates/ new service members you will already have had opportunities to participate in activities that enhance your learning and role within the services. The professional expectation is that this will always continue, whether as a civilian or military nurse. You are advised to keep records of your learning experiences, including feedback from peers, patients or superiors. Feedback can be critical in stimulating learning and reflection.

Clinical supervision

Clinical supervision in its simplest form is nurses coming together to reflect on practice in order to develop their knowledge and skills and improve the care they provide. Within defence, the importance of clinical supervision is recognised as providing an opportunity for peer support in a nonhierarchical way. Clinical supervision for nurses is actively encouraged, with the aim of a minimum of one hour's protected time each month.

Although clinical supervision is not a statutory requirement for the NMC, it is an essential part of good practice. It contributes to CPD, which in turn is vital for revalidation and re-registration. Clinical supervision ultimately contributes to ensuring patient safety, which forms the key ingredient in nursing care.



Opportunities within defence nursing

Currently the DMS employs nurses in a variety of roles, including (but not exhaustively):

- training and education establishments
- military units, including on board RN ships, Army medical regiments and field hospitals, and aeromedical evacuation
- Departments of Community Mental Health (DCMH)
- Defence Primary Healthcare (DPHC)
- Defence Medical Groups (DMGs), hospital units co-located and embedded in National Health Service hospitals
- Defence Medical Rehabilitation Centre.

Evidence-based practice

The NMC Code requires nurses to 'always practise in line with the best available evidence' (NMC 2015), by ensuring that any information or advice given is evidence-based and you maintain the knowledge and skills you need for safe and effective nursing practice. With a shift from ward-based nursing to an all-graduate profession, research awareness and capability has significantly increased and a body of defence nursing-specific evidence is in development. The UK DMS has established an Academic Department of Military Nursing (ADMN). Led by a Defence Professor of Nursing, the team ensures nursing research culture is nurtured and our own research agendas are developed.

As a defence nurse you have access to a number of defence-specific evidence-based practice resources to help develop your practice (Box 2).

Box 2: Evidence-based practice resources

Defence Medical Library Services – Burnett Library

Based at Defence Medical Services (Whittington), the Burnett Library has access to thousands of military-specific journals and books, including e-resources. Their catalogue can be accessed online: http://dmlscentral. heritage4.com

DMLS telephone number: 01543 475200

RCN Subject Guides

The RCN Library Team, in conjunction with the DNF, have developed a subject guide highlighting specific resources that are available. Details of the Defence Subject Guide can be found at: www.rcn.org.uk/ library/subject-guides/defence-nursingservices

RCN Library

As a RCN member you can access the RCN Library either in person or online. The library is Europe's largest nursing-specific collection. The team is also available to help with literature searches, and provides access to the RCN nursing archives.

Operational nursing

Nurses undertake a variety of roles to support deployed operations, either through keeping the 'fighting force fit', supporting force generation, or planning, training or delivering health care.

All nurses are registered with the NMC and are required to deliver care in accordance with the Code. With regular and reserve nurses coming from across the UK, we are often exposed to different types of patients, protocols and policies. To standardise this the following are used:

- Defence Operational Nursing Competencies (DONC). DONC provides standardised competencies for all nurses and includes general information on how defence health care is delivered, the core competencies required and specialist nursing competencies
- mission-specific training prior to deployment. This often consists of simulation training exercises, which provide an opportunity for the deploying team to meet, work together and understand the types of patients they may potentially encounter.



Raising your concerns

Safe care is everyone's business. When you are new in post, it can be especially hard to know whether you should speak up about a situation that has caused you concern. However, it is important you escalate your concerns, as you are an advocate for your patients, your peers and your subordinates.

When to raise a concern

Don't wait for a problem to develop; raise your concern as soon as you can if you see poor care being provided by others or feel you are being prevented from providing high-quality, safe and compassionate nursing care.

All NHS employees have a contractual right and duty to raise concerns with their employer if they consider them to be in the public interest – including malpractice, patient safety, financial impropriety or any other serious risks.

Within the DMS we also have a whistleblowing policy, which sets out expectations. Details are available via the MOD Intranet site.

It is MOD policy that all service and civilian personnel, regardless of rank or grade, have a right to be treated with dignity. All service and civilian personnel also have a responsibility to do all they can to ensure that the working environment is free from all forms of bullying and harassment and that the dignity of others is respected.

www.gov.uk/government/publications/ jsp-763-the-mod-bullying-and-harassmentcomplaints-procedures

How to raise a concern

- All employers (including defence) should have a formal policy for raising concerns. This guidance should detail how to raise your concern and with whom in the first instance.
- You can raise a concern either verbally or in writing. You will need to include some background history of your concerns and the reasons why you are concerned.
- Ensure that you keep records and notes throughout the process of the issues that you are concerned about for future reference. Organised filing of correspondence and all forms is highly recommended.
- Your employer has a duty to respond. If they do not, the RCN can help you to escalate your concerns. For further information contact RCN Direct on 0345 772 6100, 8.30am to 8.30pm, seven days a week, 365 days a year.
- The RCN also has support and advice on whistleblowing. Details can be found at: www.rcn.org.uk/employment-and-pay/ raising-concerns



Looking after yourself and managing stress



As a defence nurse you may be exposed to unpredictable and challenging environments. It is therefore vitally important to maintain good health and wellbeing by learning to "bounce back" and prevent compassion fatigue. Stress is an adverse reaction people may have to excessive pressures or other types of demands placed on them at work. There are many physical effects of stress, such as poor sleep or loss of appetite, and these can lead to indecisiveness and difficulty in concentrating. This means patient safety can be affected, so stress needs to be taken seriously and appropriate steps taken to manage it. Below are some ways you might consider minimising and reducing stress:

- be prepared some stressors are completely avoidable
- recognise stress and know what to do if you experience it
- learn how to manage the behaviour of others
- know how to escalate concerns, because sometimes you can't solve a problem on your own.

As a defence nurse you have access to a number of organisations that can help. Here are a few you may find useful:

Big White Wall

The Big White Wall is a safe online community for people who are anxious, down or not coping. Available 24/7 and anonymous, individuals can express themselves freely and openly. Supported by professionally trained 'wall guides', they ensure the safety and anonymity of members. www.bigwhitewall.com/landingpages/landingV3.aspx?ReturnUrl=%2f#. WMQbBnlyaUk

Silver Cloud

Silver Cloud is an organisation that helps people manage the way they think, act and feel. With over 10 years' experience, Silver Cloud provides a library of interactive and engaging programmes. www.silvercloudhealth.com/what-we-do

Mental Health First Aid

Mental Health First Aid (MHFA) is an educational course that teaches people how to identify, understand and help a person who may be developing a mental health issue. https://mhfaengland.org

Minimising risk and recognising onset

Whilst no system can ever guarantee to detect every individual at risk of mental illness, measures are in place to reduce risk and increase awareness at all levels.

Defence is making increased use of Trauma Risk Management (TRiM), a model of peer-group mentoring and support for use in the aftermath of traumatic events.

Trauma Risk Management (TRiM)

Personnel exposed to the operational environment might experience stress to a greater or lesser degree. This is quite normal, but a small number may suffer from stress that leads to mental health issues.

All service personnel run the risk of operational stress through the pressure of deployment and their possible exposure to extremely traumatic situations and events. It is defence policy that mental health issues are properly recognised and treated, and that all efforts are made to reduce the stigma associated with them. Stigma prevents many people from seeking help, resulting in a worsening of the symptoms of mental illness to a point where significant damage is caused to their health, wellbeing and relationships.

The perceived stigma associated with mental health conditions in the Armed Forces reflects those of the general public. Overall, research indicates that the Armed Forces have no more of a problem with mental health issues than society as a whole. However, particular groups within the Armed Forces may be more vulnerable to certain disorders and the MOD continues to fund research to study the mental health of both serving personnel and veterans.

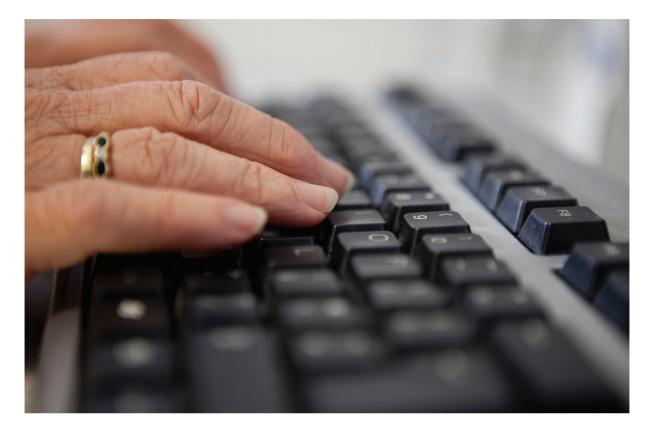
The biggest barrier to progress in early diagnosis and receipt of appropriate and effective treatment for mental health problems is the longstanding problem associated with seeking help. The greatest concern is how those affected feel others may perceive them. Unlike the response provided to those displaying physical injuries, a person may appear perfectly fine, leading others to have a less sympathetic response. The influence of stigma can be so significant that many will choose to endure the impacts of mental health conditions – even when they know they can be relieved or cured with treatment – rather than risk making others aware of what they fear will be perceived as a flaw or weakness. In many ways the stigma associated with mental health problems is actually more disabling than the condition itself.



Top tips

- Seek help and advice early Command, Medical Officer, Welfare, Padre, friend, family.
- Try an app on your phone, for example Mood Juice.
- Try resources provided by defence, such as Big White Wall.
- Plan some enjoyable activities and goals short, medium and long-term.
- Take care of the basics sleep; finances; relationships; housing; family; diet; exercise; interests; religion.
- Take care of your general health.

Accessing information



The Defence Intranet is a secure military network. It is used by all branches of the Armed Forces and MOD civil servants. It is a closed network, and not accessible via the World Wide Web.

The Defence Gateway allows certain information and resources to be accessed securely so that any member of defence can collaborate, communicate and share information over the internet. Accessible resources include the Defence Learning Environment (DLE), adventurous training activities and a DMS portal.

Information is shared through policies, instructional notices and guidance.

- Joint Service Publication (JSP). A JSP provides standardisation and authoritative guidance across the services and MOD, with regard to certain areas.
- Defence Instructional Notices (DIN) for information, guidance and notices, for example about new courses.

Examples of JSPs

JSP 101 is the official guide to Defence Writing (DW) within the Ministry of Defence. DW is the term used to describe the MOD's 'house style'. This is available within the public domain and is a useful guide on how to structure emails and letters.

www.da.mod.uk/Publications/category/61/ jsp-101-defence-writing-guide-19045

Social media

The RCN DNF has active Facebook and Twitter accounts from which educational updates, relevant study days, and interesting articles can be shared with its members. Many personalities and units within the MOD also have active social media profiles to engage with.

The online or digital profile/footprint of defence personnel remains of general concern, not least for basic crime and espionage prevention. The most immediate concern is the potential for unwelcome personnel to gather information in order to target specific individuals. Defence personnel and their families should be encouraged to carry out recommended measures for privacy and sharing settings. This will assist in the control of third party access to their personal data. Please consider carefully what information you make available when using social media.

Useful social media links

@DefenceHQ	@RoyalNavy
@BritishArmy	@RoyalAirForce
@RNReserve	@RAFReserves
@Defence_Medical	@rcn_dnf
@BCUDefencePh3	@DMSMedDir
@qarancassn	@qaranchistory
@pm_raf_ns	@Def_ADMN

Useful guides:

www.getsafeonline.org/social-networking www.gov.uk/guidance/think-before-youshare



The RCN represents nurses and nursing, promotes excellence in practice and shapes health policies

RCN Online www.rcn.org.uk

RCN Direct www.rcn.org.uk/direct 0345 772 6100

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