

CHAIRMAN'S LETTER



I am writing this letter with a certain degree of sadness. Events in my professional, social and personal life have made it increasingly difficult to properly discharge the role of Chairman of our organisation, so I have reluctantly decided to step down from the Chair a year earlier than planned to make way for someone with the time and energy to take BARNA forward into the 21st century. My resignation will be effective from the AGM in June. We in the committee have discussed this issue and have appointed Clara Bradshaw to the Chair from that date.

Clara has a wealth of experience in BARNA, having acted as Co-ordinator when Rose and Richard first left the country. I am sure that, with a strong committee behind her, Clara is the right person to lead us onward and I wish her every success. Her role on the committee of IFNA can only serve to promote the cause of Anaesthetic and Recovery nursing both nationally and internationally.

I will continue to serve on the committee for as long as I am able or wanted.

On the subject of the committee, a number of us have been busy once again planning a clinical study day in London. This is a basic skills day and will be at the Royal Institute of British Architects in Great Portland Street, near to the UKCC. I hope that as many of you as possible are able to attend. For more experienced staff, we will be organising an advanced recovery skills day in the autumn, probably in York. If you have any suggestions for this day please let a committee member know.

How did your unit cope with the flu outbreak (I use that term, as despite the Government spin-doctors' claims, it was never an epidemic!)? Did you feel reassured by successive Ministers telling us all that there was no crisis and that caring for Intensive Care patients in Recovery was all part of a well rehearsed contingency plan? Were you able to continue routine operating or did you, like me, have to do emergencies only because staff were too busy looking after patients they are not trained to care for? It seems to me that a certain economy with the *actualité* was evident in the reports that there were ITU beds available in the country. At certain times there were 15+ patients

waiting for beds and I am sure that many more were not even declared by hospitals who considered it pointless to join this queue and so cared for them in inappropriate circumstances. Still, it was not all doom and gloom. My staff got valuable experience caring for ventilated patients, which they might not have otherwise got and the co-operation between theatres, recovery, ITU and the wards was quite refreshing. What a pity that that soon waned!

An article in January's Pharmacy Management describes a survey carried out of operating departments' attitudes to access to Controlled Drugs. In it the authors demonstrate that it is common practice for ODPs to have unrestricted access. They also point out that this practice is in contravention of the Misuse of Drugs Act 1985. The article recommends that ODPs should be registered and the legislation amended to allow them to legally have access. As I have said previously, such legislation is long overdue and this anomaly highlights yet another reason for speeding it through. Much as ODPs dislike it they are not considered professionally accountable for their actions and as such, a registered nurse can be held accountable for the actions or omissions of an ODP in their charge, even one senior to them.

In the January edition of *Technic*, Bill Kilvington calls on ODPs to 'prepare for registration'. I wholeheartedly support this call but add this word of caution. With registration comes responsibility. Do not see this as a panacea for all ills. The process of registration will be a painful one as there will inevitably be some chaff to be sorted from the wheat. However, what is left when registration is in place, will be a robust profession, ready and able to take its place alongside nurses giving high quality care to patients in the operating department.

I wish you all well for the coming year.

A handwritten signature in black ink, appearing to read 'Mike' followed by a stylized flourish.

Mike