

Top news

At-a-glance

- CNO review of mental health nursing launched one year ago
- DH to carry out independent evaluation of progress
- case studies illustrate local successes in physical well-being training and recovery.

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CNO review of mental health nursing – one year on

We look at the progress made in the year since the Chief Nursing Officer (CNO) launched a set of recommendations to improve mental health nursing.

From Values to Action: The Chief Nursing Officer's review of mental health nursing recommended that mental health nursing should take a holistic approach, taking into account service users' interrelated physical, psychological, social and spiritual needs.

To achieve this, the CNO said mental health nurses needed appropriate training, supervision and managerial support to help them provide better assessment, health promotion activities and more evidence-based psychological therapies.

Measuring progress

A year since the review was launched, the Department of Health is commissioning independent researchers to carry out an evaluation project. The evaluation will identify what progress has been made and how to implement the review's recommendations successfully.

The Department of Health's Director of Mental Health Nursing Neil Brimblecombe said: "We hope to get the evaluation underway by

mid summer. There will be an initial survey to give us a clearer picture of current service provision and good practice, followed by a series of progress reports culminating in a final survey."

Success in local services

In this month's bulletin, we bring you a series of case studies, demonstrating how

three separate services are implementing different aspects of the CNO's recommendations.

Over the next few pages, we hear about physical well-being training in Kent, the recovery model in Devon, and prescribing by mental health nurses in Cumbria.

Continued on page 2

Implementing holistic practices

An article in the March issue of the *International Journal of Nursing Studies* (44 (2007) 339-348) summarises the results of the three-month written consultation process that gathered views on taking into account mental health service users' psychological, physical, social and spiritual needs for the CNO review.

Implementing holistic practices in mental health nursing: a national consultation was written by Neil Brimblecombe, Alison Tingle and Robert Tunmore from the Department of Health, and Trevor Murrells from the Nursing Research Unit at King's College London.

● [View the article](#)

STOP PRESS – CNO conference dates

The annual summit for nurse and midwifery leaders will be held in London from 31 October – 2 November. Look out for further details in the CNO Bulletin. For details of the Spring business meetings, see page 8.

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Have your say

This bulletin is tailor-made for nurses and midwives across the NHS. It aims to cover the main news and developments every month. Please send your views on the content and design to Susan Frade at CNO-Bulletin@dh.gsi.gov.uk

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Voicepiece

Chief Nursing Officer Christine Beasley highlights progress in mental health nursing

A year ago this month I launched the CNO's *Review of Mental Health Nursing: From Values to Action* and progress on its recommendations so far looks encouraging.

During the year, I have visited several mental health services across the country, including those in Sussex and at Rampton Hospital, to see exactly what the review has meant in terms of improving the experience of service users and practice development at a local level. These visits included one to Kent & Medway Partnership NHS Trust where training on physical aspects of care has led to a more holistic approach. Further details are included in this month's bulletin.

Throughout these and other visits, I have heard about the positive aspects of the review in that it engaged with stakeholders, listened to their views, and identified the best of current practice to set the standard for future care. The review provides a real opportunity to establish a better standard of care for people who are too often excluded from mainstream society and among the

most vulnerable people we care for. Clearly, the challenge now is to spread good practice and sustain innovation. Having heard the enthusiasm and commitment of many mental health nurses, I am very optimistic about this. The work has a solid



'This is a real opportunity to establish a better standard of care for people who are excluded from mainstream society.'

grounding in shared values across a diverse spectrum of services and I have seen it in action as a lever for change. A formal programme to evaluate the outcomes of the review is about to get underway.

The same strong principles will inform the development of the 'Good practices in Learning Disability Nursing' that I announced last year. These guidelines will focus on how learning disability nurses can make the

greatest contribution to the well-being of people with a learning disability.

I have set up a reference group to advise on the content of the guidance that includes people with a learning disability, carers, employers and, of course, nurses themselves.

Over the next few months we will also be setting up workshops around the country with local organisations and a broad range of stakeholders. In the meantime you can get involved by responding with your own examples of good practice in learning disability nursing by sending them to the mailbox address included on page 4. It is clear that we need to respond better to the needs of people with a learning disability, so I welcome your contribution to achieving this goal.

CNO review of mental health nursing – one year on

Continued from page 1

Modernising nursing careers

The review of mental health nursing is not happening in isolation and will have close ties to the Modernising Nursing Careers (MNC) programme. As Neil Brimblecombe explains:

"Although the CNO's review was carried out before the launch of the MNC programme, the two projects share similar aims, including the need to develop enhanced roles and skills that will improve outcomes for

service users at the same time as providing more rewarding careers for nurses."

For more about the MNC programme, see page 5.

Continued on page 3

Links and info

- [From Values to Action: the CNO's review of mental health nursing](#)

At-a-glance

- mental health nurses in Kent receive training in physical well-being to meet needs of service users
- well-being support programmes help to improve outcomes and participation
- the training and new roles provide high job satisfaction for nurses.

Links and info

- For details email donna.eldridge@kmpt.nhs.uk

Case study: Well-being training provides holistic approach

As a direct result of the CNO's mental health nursing review, mental health nurses in the Kent and Medway NHS & Social Care Partnership Trust are receiving training to help them improve the physical well-being of service users.

Accredited by the Royal College of Nursing, the four-day programme covers:

- how to set up a local well-being support programme
- how to carry out physical health checks
- phlebotomy training
- monitoring side effects
- how to run a healthy living group
- how to set up and run a physical activity group
- how to offer appropriate lifestyle advice.

Donna Eldridge, Assistant Director of Nursing at the trust, said: "We hope that

introducing physical well-being programmes will help meet the needs of our service users and improve their outcomes as well as enabling us to meet the challenges in the CNO review and the *Choosing Health* White Paper. It also offers staff a new role with high job satisfaction."

Karen Healy, who has been appointed as the trust's well-being nurse practitioner, has already set up and delivered a well-being support programme in the Thanet area. The aim was to provide physical health support,

medication management and lifestyle assessments to clients experiencing severe mental illness. Clients were given a minimum of four one-to-one consultations and immediate access to physical activity groups in the community.

"The clients enjoyed this holistic approach and fully participated in recommended changes to their lifestyles," Karen said. "They felt more involved in their care, and as a result they took more responsibility for their mental and physical well-being."

At-a-glance

- Devon team sees success of recovery approach to mental health care
- approach focuses on the potential of service users to live meaningful lives
- questionnaire allows service users to assess the success of the approach.

Links and info

- For details email rachel.webb@devonptnrs.nhs.uk or john.good@devonptnrs.nhs.uk
- More about DREEM

Case study: Recovery approach encourages independence

Mental health nurses in Devon have also felt the impact of the CNO's review, as it highlighted the importance of the trust's focus on the recovery approach.

The recovery approach recognises the potential of patients to recover and live a meaningful life.

Devon Partnership NHS Trust began to implement this approach in 2002 and the success is already evident.

"We are now helping people into more independent accommodation and helping them to access community facilities, such as education and vocational services," explained John Good, Nurse Consultant for Rehabilitation Recovery at the trust. "We've moved from being an insular service to being much more outward looking."

According to John, nurses in the past have been great 'rescuers of people' instead of helping service users use

their own resources to be independent.

"I think using the recovery approach helps inform nurses about what they should be doing with service users," said John. "It means service users' experience has been less paternalistic, less institutional, and more therapeutic. We're able to help them to help themselves in attaining the things they find important in their daily lives."

Rachel Webb, ward manager at the Russell Clinic, the specialist rehab and recovery inpatient service, believes that the CNO's review helped reinforce the way her team was already working, and acknowledged their good practice.

Her team was featured in the review document for its

innovative way of examining the success of the recovery model. Using the DREEM (Developing Recovery Enhancing Environments Measure) questionnaire, the trust seeks service users' views on whether the service provides a recovery environment.

Users rate several elements of their experience, including their feelings of hope, sense of meaning and personal recovery, as well as the performance of the service.

Information from DREEM allows the service to see whether its staff are working in a recovery based way. "In other words, we say we are a recovery unit, but do we do what it says on the tin?"

Continued on page 4

At-a-glance

- unit led by nurse prescriber helps service users come off psychotropic medication
- patients' length of stay cut from 18 months to three months.

Case study: Nurse prescriber leads interventions in mental health unit

A nurse-led mental health unit for older men in Cumbria is using a range of interventions to help service users come off psychotropic medication and move to nursing homes much sooner.

In accordance with the recommendations of the CNO's review of mental health nursing, the unit, run by Cumbria Partnership NHS Trust, is taking a holistic approach to care and is making full use of the new nurse prescriber role.

Working closely with service users, their relatives, carers, social workers and nursing homes, staff at the unit have successfully reduced service users' stays from around 18 months to an average of just three months.

Of the 15 service users currently at the unit only two are using psychotropic medication, compared with 95 percent of service users in medical-led organic assessment wards elsewhere in the trust.

The unit creates tailor-made treatment packages that include 'life

story' work, activities, aromatherapy and massage to improve their overall health and sense of well-being.

The unit is led by nurse consultant Valerie Provan, the non-medical prescribing champion for three trusts in Cumbria. Her team includes a unit manager, eleven nurses and 10 healthcare assistants.

Valerie said: "The unit was set up two and a half years ago, giving us an ideal opportunity to reassess and improve the service.

"Such units have traditionally been medically led, allowing nurses little or no autonomy in changing the emphasis to treating the person rather than the symptoms.

"As a qualified nurse prescriber I have been able to use my skills to safely reduce the medication

of service users, many of whom were overly sedated, or agitated as a result of taking medication for long periods.

"I take bloods, arrange chest X-rays and scans and prescribe antibiotics and other relevant medication within my competencies, reassured by the knowledge that I can check any concerns with a consultant psychiatrist based at a local hospital or with a GP who visits the unit twice a week.

"Once a service user's medication is reduced, staff are better able to see the real person and work out suitable packages that enable service users to successfully move into nursing homes much sooner than would otherwise have been possible."

Links and info

- For more information contact valerie.provan@ncumbria.nhs.uk

Learning disability nursing: good practice

You can contribute to the development of the Good Practice Guidelines by submitting a case study of good practice in learning disability nursing to the mail box below.

Examples can be about the work of learning disability nurses working in any environment and for any organisation. Case studies of good practice can provide a better understanding of the positive impact that your service and

care has on the lives of people with learning disabilities, their carers and families. They can also help to demonstrate that excellent practice is achievable wherever learning disability nurses are working.

Good practice examples should not be more than 100 words in length. They should include:

- the area and name of the organisation in which the nurses involved work
- the type of work or

- innovation described
- why and how the good practice was established
- what the positive outcomes are (and any evidence of this, for example audit findings, publications or awards received)
- an email for further contact.

Please send details to CNOandLD@dh.gsi.gov.uk

At-a-glance

- Maternity Matters provides a framework for high quality, safe and accessible maternity services
- four national choice guarantees introduced
- recognising midwives' expertise in caring for women, especially those with normal pregnancy and birth.

Links and info

- [The Maternity Matters report](#)
- For more information contact pat.parris@dh.gsi.gov.uk

New vision for maternity services

A framework highlighting the Government's commitment to developing high quality, safe and accessible maternity services has been published. *Maternity Matters: Choice, access and continuity of care in a safe service* outlines four national choice guarantees that will give all women choice around the type of care they receive and ensures improved access to services and continuity of midwifery care by the end of 2009.

"This document is a key milestone in the development of maternity services for women," said Chief Nursing Officer Christine Beasley. "It clarifies for women the choices they can expect to be given for their maternity care, and it emphasises the key role that midwives have in providing the information that women and their families need to be able to exercise choice."

The new national choice guarantees will give all women and their partners the opportunity to make informed choices throughout pregnancy, birth and during the postnatal period. They will be able to choose local options or access maternity services outside their area with a provider that has available capacity. The four choice guarantees are:

Choice of how to access maternity care – women will be able to go directly to a

midwife or via their GP.

Choice of type of antenatal care – women will be able to choose between midwifery care or care from a team of maternity health professionals.

Choice of place of birth – women and their partners will be able to choose between three different options:

- birth supported by a midwife at home
- birth supported by a midwife in a local midwifery facility, either based in the community or in a hospital
- birth supported by a maternity team in hospital, including midwives, anaesthetists and consultant obstetricians. For some women this will be the safest option.

Choice of place of postnatal care – women will be able to choose how and where they access postnatal care.

Women will be supported by a midwife throughout pregnancy and after birth to ensure continuity of care, meaning that a woman will be able to get to know and trust her midwife, and for the midwife to understand her needs throughout. This will ensure that women are aware of on-going support should the known midwife be unavailable and each woman should receive consistency of care if she chooses to give birth outside of her area. Individual support will be provided to each woman throughout labour and birth.

Maternity Matters also introduces measures to integrate maternity care with other services provided in the community in order to improve accessibility of maternity services and help reduce health inequalities experienced by those from more disadvantaged groups.

At-a-glance

- stakeholder events to develop the Modernising Nursing Careers programme
- events consider education and future roles.

Links and info

- [The Modernising Nursing Careers direction setting document](#)

Modernising Nursing Careers: an update

A lot has been happening since the launch of the Modernising Nursing Careers (MNC) programme late last year. Plans are in place to progress all the actions, but attention has so far been focused on the future of education and postgraduate careers.

Work started with a successful UK-wide education summit in February.

This considered three themes:

- the future of pre-registration education
- advanced and specialist

practice

- the future of nurse educator roles.

Following this event, the Nursing and Midwifery Council has agreed to lead a review of the content and level of pre-registration education.

Other events have taken place to gather views on learning disabilities nursing and nurse educators.

In addition, five regional stakeholder events have been organised by the SHA nurse directors from the East of England, London, West Midlands, North East and South West. These

are looking at options for postgraduate nursing careers and advanced level practice.

As well as patients and students, this work is involving nurses from all branches of nursing, working in a range of care settings, including education, community and primary care, acute care and non-NHS sectors. A report will be published in the summer.

A research paper on nursing careers has been published by King's College London. [Click here](#) for the report.

At-a-glance

- new initiative helps local services meet 18 week referral to treatment target
- resources include examples of best practice
- 13 early achiever health communities commit to reaching target one year early.

End waiting, change lives initiative

End waiting, change lives is the name of a new initiative designed to engage all NHS staff in meeting the challenge of the 18 week referral to treatment pathway.

By December 2008, there will be a maximum waiting time for non-emergency consultant-led treatment of 18 weeks from referral to treatment, with the majority of patients being treated much more quickly.

Doctors, nurses and other NHS staff will lead the changes to services needed to ensure that this ambitious goal is achieved, but everyone has a role to play in helping the NHS rise to this challenge.

End waiting, change lives will provide information, ideas and best practice to staff and others who need it as the journey towards 2008 progresses.

The initiative builds on the good progress that has already been made in reducing NHS waiting, and completes the journey on tackling non-urgent waiting times in the NHS.

Case studies highlight the ways that local services have tackled long waiting lists.

Examples include:

- improving the use of operating theatres
- introducing orthopaedic clinics in community settings – allowing patients to be assessed more quickly and reducing hospital referrals
- making greater use of day surgery
- reducing missed

appointments by letting patients book directly.

Early achievers: Thirteen local health communities have committed to meeting the 18 week referral to treatment target a full year before the rest of the NHS. The 13 'early achievers' are working to treat 90 percent of admitted, and 95 percent of non-admitted, patients within 18 weeks by December 2007.

Links and info

- [The 18 weeks programme website](#)
- [More about End waiting, change lives](#)

Nurses and the 18 weeks programme

The 18 weeks programme will give hospital and primary care nurses the chance to work together to transform services – leading to opportunities for new ways of working. Nurses roles may be developed based on skills

and competencies within new models of care.

Nurses will have the opportunity to influence local changes, particularly for long-term conditions where care is provided by a number of organisations.

At-a-glance

- nursing team wins award for anti-ageism video
- video distributed around the world
- message emphasises dignity and respect for all.

Anti-ageism video promotes dignity and respect

Nurses from Heywood, Middleton and Rochdale PCT and the University of Salford scooped the Queen Mother's award for dignity as a result of its anti-ageism video.

The project team directed and produced the DVD using images and voices of Rochdale citizens to raise awareness of ageism and to promote positive images of ageing to nurses and other healthcare staff.

"It's really about challenging nurses' own perceptions about older people, about dignity and respect, and applying that in their daily work," explained Jackie Taylor, Clinical Lead for District Nursing at Heywood Middleton and Rochdale PCT and facilitator of the project.

In making the video, Jackie and the team worked closely

with a local user carer forum – a community group whose members champion the needs of older people.

According to Tracey Williamson from the University of Salford, the idea was to use a medium that could be accessed and distributed to a wide audience. "We wanted to make this project as inclusive as possible, including Rochdale citizens as well as health and social care staff. A video had more opportunities to do this than just distributing leaflets."

So far, 1,500 copies of the DVD have been distributed

throughout the UK and abroad and its anti-ageism message has spread as far afield as Canada and New Zealand. The DVD is being used primarily by educators to train students and staff in health and social care.

Jackie is keen to explain that the messages in the video don't apply only to older people. "Particularly with nurses, dignity and respect should be at the core of their service delivery. These issues are relevant to all patients."

The team received the award at this year's Health and Social Care Awards ceremony.

Links and info

- [View the video](#)
- For more details, email Jackie.taylor@hmrpct.nhs.uk
- [Details of the Health and Social Care Awards](#)

At-a-glance

- action plan helps newly qualified staff to find jobs
- NHS South East Coast working with newly qualified nurses to provide support and training.

Action plan to support healthcare job seekers

An action plan to help newly qualified nurses, and other staff at risk of displacement, to find jobs was agreed at a February summit organised by NHS Employers.

Representatives from employer organisations in the NHS, local government, the independent and voluntary sectors, trade unions and higher education signed up to the plan, which includes commitments to:

- creating talent pools through the NHS Jobs website for newly qualified professionals
- piloting keep-in-touch programmes so that employers can contact newly qualified professionals when opportunities arise
- looking at the idea of ring-fencing jobs for newly qualified professionals
- looking at the feasibility of schemes that maximise or

guarantee opportunities for newly qualified professionals within a single SHA

● NHS, social care, local government and voluntary sectors working together locally to plan the health and social care workforce.

Steve Cocks, Education Commissioning and Contracting Manager for NHS South East Coast, attended the summit. He said: "We are fully signed up to the action plan. Of the 417 bursaried nurses who qualified within the health authority in September, 106 have yet to find positions, and we are working with our trusts to resolve this.

"We are making every effort to keep in touch with them and are looking at arranging sessions with universities to help them keep up-to-date with developments.

"At the same time we're trying to ensure that they know how to use NHS Jobs to cast their net wider geographically. We're also working with the region's universities to organise one-to-one sessions at careers days so that they can look beyond the core NHS to the wider needs of the system, possibly applying for posts with private and independent healthcare providers."

Links and info

- [The NHS Jobs website](#)

News in brief

New deal for carers

A multi-million pound package of support for carers has been announced, recognising the essential work carried out by carers. The Government's new deal will provide short-term home-based respite care for carers in crisis or emergency situations, establish a national helpline for carers, and launch an expert carers programme later this year. The 1999 *National Carers Strategy* is also being reviewed.

- [View more details](#)

New agreement for unions and NHS

NHS nurses will have more of a say about new policies, thanks to a new partnership agreement between staff unions, NHS Employers and the Department of Health.

All partners have made a commitment to debating constructively and honestly about issues in the NHS.

- [View more details](#)

£2m for primary care research

Specialist nurses are to be employed to carry out clinical research as part of the Government's new primary care research network. The network, which will receive £2 million in funding, is made up of eight local research networks. Nurses and other staff will carry out research and also help raise awareness among primary care clinicians of clinical studies currently recruiting patients.

- [View more details](#)

Technology for safer patient care

New Department of Health guidance promotes and supports the use of barcoding and similar technologies to improve efficiency and increase patient safety. Bar coded wristbands, for example, could be used in hospitals to help eliminate errors caused by misidentifying patients.

- [View full report](#)

New screening test for all babies

All babies in England are to be screened for an inherited metabolic disease called Medium Chain Acyl CoA Dehydrogenase Deficiency (MCADD) within two weeks of birth to help prevent neurological damage or death. The screening will be carried out as part of the

standard 'heel-prick' test for babies that screens for other diseases such as sickle cell disorders and congenital hypothyroidism.

- [View more details](#)

Blood transfusion campaign

A national patient transfusion awareness campaign is taking place between 23 and 27 April. The campaign, organised by the National Patient Safety Agency, aims to inform patients and the public about the risks and benefits of blood transfusions, alternatives to donor blood, and to involve patients in safety issues such as correct identification.

- [View more details](#)

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Mental health Bill

The Mental Health Bill is currently going through parliament. It has been through the House of Lords and is due to be debated in the House of Commons in April and May. The Bill proposes new roles for nurses by opening up professional roles. Other proposals include supervised community treatment, simplifying the definition of mental disorder, and the Bournemouth safeguards for

people who lack capacity to decide about their care.

● [View the Bill](#)

PBC now in all PCTs

Practice based commissioning (PBC) implementation statistics for February show that all PCTs have now achieved universal coverage of PBC, meeting government targets. Practice uptake of incentive payments is now 94 percent, up from 93 percent in December 2006.

Have you helped reduce infections?

If you have made reductions in infection rates, improved cleanliness or have examples that could help other NHS staff, please share your success and learning. Please email your contact details to reducingmrsa@dh.gsi.gov.uk with a short outline and somebody will contact you. Alternatively, upload your examples at www.clean-safe-care.nhs.uk

Sexual health conferences

The Sexual Health Team at the Department of Health and the National Support Team for Sexual Health recently hosted two conferences to inspire nurses to recognise their true potential in creatively reshaping and modernising sexual health services in a rapidly changing health environment. For details, contact Anita Weston, Nurse Advisor in Sexual Health, Anita.Weston@dh.gsi.gov.uk, 0207 972 3984.

Diary

Care closer to home – regional events

The Department of Health is organising a series of free half-day regional events to introduce a new set of national guidance for commissioners and providers of more specialised care in the community, using practitioners with a special interest.

● [View more details](#)

CNO spring business meetings

Directors of nursing should have received their invitations to attend the spring business meetings on Friday 20 April (Leeds) and Monday 23 April (London).

● [View more details](#)

CNO conference

See page 1.

Consultations

Payment by Results consultation

A new consultation document puts forward proposals for extending the payment by results (PbR) tariff to include outpatient services and treatment provided in community settings outside hospital. The consultation closes on 22 June, with findings published later in summer.

● [Access the consultation](#)

● [View details of PbR](#)

Latest publications

Make sure you're not missing out on new tools and guidance. Here is a round-up of recent publications from the Department of Health (DH) and beyond. DH publications are available from www.dh.gov.uk/publications

● *Falls in hospital*

A new report from the National Patient Safety Agency provides healthcare staff with a better understanding of the scale and consequences of patients falling in hospital. The report analyses more than 200,000 incidents and makes recommendations for improving the care of patients vulnerable to falling.

● *New leaflet for carers*

A new leaflet for carers and care professionals provides information about how to avoid becoming a victim of bogus callers. The leaflet includes useful telephone numbers and advice on practising good doorstep behaviour and keeping watch of money, cheque books and cards.

● *Innovation for health: making a difference*

A joint report by the Government and the medical devices industry highlights the benefits of medical innovation in the NHS. *Innovation for health: making a difference* sets out plans for how to use medical innovation more widely across the NHS in order to benefit patients and contribute to the efficient working of the NHS.

● *Making positive steps*

A new guidance document, *Positive Steps: A practical guide to delivering race equality in mental healthcare*, has been launched to help professionals working in mental health services. The guide offers advice and support for responding to the needs of black and minority ethnic patients and profiles

key mental health issues and religious and the cultural needs of different ethnic groups. It also includes useful contacts and showcases good practice.

● *Safer Practice in renal medicine*

A new toolkit was launched on World Kidney Day in March. The toolkit advises staff on the steps they can take to minimise the risk of MRSA bloodstream infections in renal dialysis.

● *Protected mealtimes CD-ROM*

The National Patient Safety Agency has re-released its *Protected Mealtimes* CD-ROM. This short film sets out the principles of the protected mealtimes initiative. For a free copy, call 08701 555455 quoting reference PM:CD ROM.