

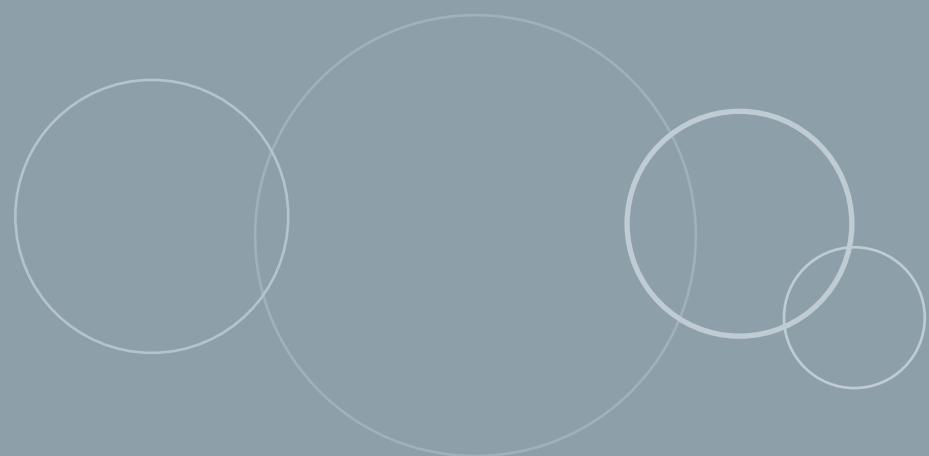


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The editorial team would like to thank all those who contributed to this issue of **READ**.

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Research Endeavours And Dissemination.

Dr Samira Al Senany at her PhD ceremony with Dr Tony Blackett



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Editorial

Despite the huge challenges facing universities and health communities around the UK and elsewhere there remains a great deal of high quality research being undertaken within the School of Nursing and Midwifery.

This edition goes a long way to demonstrating how active the School is across a number of fronts, all of which are consistent with the needs and concerns of the practice and service user communities both here and internationally.

One of the major strengths of the School is the work undertaken in the field of ageing. This edition of READ serves to underline this track record with a number of completed projects and new pieces of work being reported upon. We welcome back Professor Mike Nolan and here he presents findings from an important project about the nature of acute care for older people. Mike's work around the Senses Framework features highly within this report. The difficulties around meeting the needs of older people in care are mirrored in new work, being led by Professor Roger Watson, aimed at developing and appraising the effectiveness of an assessment tool for feeding difficulties for older people with dementia.

Knowledge translation is a key theme within health research and the School of Nursing and Midwifery is building a sound reputation in this field. Dr Mark Hayter has been awarded a grant to work closely with partners within the region to address the problems associated with alcohol use and sexual health. This

work will bring together academics and clinicians to develop a research agenda and is outlined in this edition. But such collaboration is not only important on a regional basis and internationally the School has again been active with a number of examples of conference presentations reported here. Of equal significance, the experiences of two visiting academics from China and Taiwan are also outlined. Their experiences demonstrate the important role such exchange programmes play in terms of knowledge transfer and capacity building in an international context.

Finally, the School's reputation in the field of palliative and supportive care is again underlined in this edition. Particular attention should be given here to new projects in the field of community based palliative care provision. Two projects have just recently begun; one aimed at evaluating a consultant led palliative care service at home and one focussing on the experiences of bereaved carers who received services provided by non-qualified support staff. Both projects are being led by Professor Christine Ingleton.

We hope that you find this edition of READ interesting and informative of the work being undertaken at the School of Nursing and Midwifery.



Prof Richard Jones,
PVC Research

Foreword

I'm delighted to have the opportunity to write this foreword to READ, which once again highlights the outstanding work being done in the School of Nursing and Midwifery. I don't need to dwell on the fact that times in higher education in the UK are uncertain at the moment; but I think that the School of Nursing and Midwifery exemplifies a number of the great strengths that the Faculty of Medicine, Dentistry and Health and indeed the University as a whole possess. It's these strengths that will enable the University to prosper in the years ahead.

We're seeing a pronounced shift in the way that research is being organised, not just in the UK but all around the world. In this new environment what drives research is not so much the priorities of individual academic disciplines; instead the motivation comes from the big societal problems we are all facing – the need to keep the world's population healthy, well fed and supplied sustainably with enough energy to meet their needs. For example, the UK research councils have come together to define priority, interdisciplinary themes,

such as energy, food security, and ageing: lifelong health and well-being.

The School of Nursing and Midwifery is extremely well-placed to contribute in this new environment, and the research described in these pages, much of which is focused on improving the care received by older patients, exemplifies the sort of practical and humane research that will improve people's lives in our ageing society. Academic rigour will always be important, but this isn't enough – we have to demonstrate that our work makes a real difference and the School's close connection with practitioners, the NHS and the Department of Health are exactly what is needed to make sure this translation to practice takes place smoothly.

Sheffield is an international university whose focus is on solving global problems. It's a pleasure to read about the experiences both of our students and visitors from overseas, who bring so much to our University, and of the international links being developed by School staff to give their work a global perspective.

Our editorial team... Jane Flint, Christine Ingleton, Sharron Hinchliff and Tony Ryan,



'From Metrics to Meaning': Changing the culture of acute hospital care for older people



Mike Nolan

The quality of acute hospital care for older people has been a subject of concern for over 50 years. As the numbers of older people in society continue to grow and levels of frailty increase such concerns remain as relevant today as they have always been. Recent initiatives from both the Royal College of Nursing (RCN 2008) and the Nursing and Midwifery Council (NMC 2009) have turned attention to the environment of care for older people and suggested the need for a change in the culture of care delivery. Organisational culture is seen as key to health care quality and promoting quality of care and performance improvements through culture change is a major priority for the NHS. Against this background the NHS Service Delivery and Organisation (SDO) programme of research commissioned a number of studies exploring culture change in acute hospital settings. A team of researchers from the University of Sheffield's Department of Work Psychology and the Sheffield Institute for Studies on Ageing were successful in submitting a tender for a study that explored the nature of culture change for older people.

Studying the care provided for older people provides an excellent way of looking at a range of complex issues because:

- the majority of patients in hospital are older and if the care provided is good for older people then it is likely to be good for everyone;
- as noted above there are a number of well-documented concerns about the standard of acute hospital care for older patients, especially relating to dignity.

The study therefore had two primary aims:

- to understand the range factors that either promote or inhibit culture change in acute hospital care for older people, carers and staff;
- to generate a potential 'toolkit' for culture change that might be used to apply the findings in other contexts and settings.

Building on several years of prior work the study was underpinned by a relational model of care based on the 'Senses Framework' (Nolan et al 2006). As followers of READ will be aware this framework argues that an *enriched* environment of care is one in which patients, staff and family carers experience six Senses: security, belonging, continuity, purpose, achievement, and significance. This approach to understanding the environment of care is broader than the notions of 'patient' or 'person' centred care and argues that if staff are to create an enriched environment for patients and their carers then they too must enjoy an enriched work environment in which they experience the Senses.

In addressing the above aims the study adopted a multi-method longitudinal design that comprised both qualitative and quantitative elements including:

- gathering data from a user reference group of older patients and family carers and conducting interviews with key opinion leaders form policy, practice and academia in order to 'set the scene';

- a review and narrative synthesis of the existing literature on culture change and dignity for older people, especially in acute settings but also drawing on the literature from care homes;
- longitudinal case studies in four Trusts which in their own way had each been trying to change the culture of care delivery;
- developing a number of questionnaires that captured differing aspects of the work environment that are important for the delivery of good quality care and related questionnaires that measured patient, carer and staff ratings of care quality;
- using these measures to test the links between the nature of the work and care environment and the quality of care as rated by staff, patients and carers.

The data from the user reference group, expert opinion leaders and the literature review highlighted the considerable challenges and complexities of providing high quality care for older people in a health service where the success of treatment is most often captured using 'targets' that focus primarily on the speed with which people are treated and discharged from hospital. Based on the literature the study explored the tensions between the 'pace' and the 'complexity' of care originally identified in a study by Williams (2001, Williams et al 2009) which sought to explain why problems with the hospital discharge of older people seem immune to change. Williams argued that the continued emphasis on the 'pace' of care delivery meant that the complex needs of older people were all too often overlooked. Such conclusions figured prominently in our own findings. In particular we found that:

- data from the study strongly suggest that across the NHS in general, and for a variety of change initiatives in particular, culture is dominated by an agenda that looks for a 'quick fix' solution and thereby overlooks both the complexity of the issues involved and the amount of time it takes for real and enduring change to occur. The literature suggested that introducing significant change can take up to 10 years but that the NHS has to respond to successive demands for change on an almost constant basis;
- the emphasis on 'pace' meant that the 'little things' that often define the quality of care for older people, and the quality of the work environment for staff are seen as less important and are not counted in the way that quality and culture are measured. There is therefore little incentive for staff to ensure that they are met. As one of the opinion leaders stated the emphasis has shifted too much towards the *'metrics rather than the meaning of care'*.

The survey confirmed the link between staff experiences of their work environment and quality of care as reported by patients and carers. Data from 70 wards (based on questionnaires from 929 nursing staff, 985 patients and 507 carers) showed that when nursing teams reported a shared philosophy of care and higher levels of emotional support from their colleagues than patients and carers reported significantly better quality of care. The study also highlighted the key part played by the ward sister in establishing an 'enriched environment' for staff in which they felt valued and supported.

Overall the findings of the study suggested that two broad models of culture exist in the NHS that we termed the *'perform or perish'* model and the *'relational and responsive'* model. Their characteristics are illustrated below with reference to the ideas of 'pace' and 'complexity':

• Perform or perish

- Pace: Quick fix, short term, process driven, pushing and fixing
- External: Top down agenda, local context largely overlooked, off-the-shelf, one-size fits all approaches applied
- Select few determine goals and direction of change
- Punitive and transactional leadership style from top, little unit level leadership
- Metrics matter: Superficial, often quantitative targets for success, e.g. patient flow
- Scored
- Impoverished change environment results and the 'Senses' are reduced

• Relational and responsive

- Complexity: Longer term, focus on people and perceptions, brokering
- Locally contextual factors fully acknowledged and addressed, solutions tailored to situation, existing models modified accordingly
- All groups including users/carers involved in deciding
- Empowering, inspiring and transformational leadership style at all levels, especially unit
- Meaning matters, relational, dynamic qualitative 'indicators' of success, peoples' experiences
- Profiled
- Enriched change environment results and the 'Senses' are enhanced

The findings of the study suggest that the 'perform or perish' model currently dominates the culture of the NHS and that culture change initiatives too often seek a 'quick fix' solution to complex and long-standing problems.

Concerns about quality of care for older people have resulted in numerous policy initiatives over recent years, several of which such as the National Service Framework (NSF) for Older People have attempted to introduce large scale change across the NHS. Our study suggests that such approaches often fail to take account of the complexities involved and also allow insufficient time for enduring change to become established.

Whilst there is a need for culture change at all levels our results indicate that those initiatives most likely to deliver real benefit for patients, carers and staff focus on change at the level of the ward or unit. Leadership at the top and at the ward/unit level is essential for change, but it is again the ward or unit level where leadership is key to enhancing the care experience for patients, carers and staff. The extent to which the ward sister was seen to 'lead by example' was the main factor creating the six Senses for staff and ensuring an enriched environment that promoted good care experiences for older people and their carers.

As in several other prior studies (see for example Davies et al 1999, Nolan et al 2006) the Senses Framework, and the idea of an enriched environments and relationship centred care 'spoke' to older people, their families and the staff providing care in a language that was *'ordinary, accessible, jargon-free and commonly understood'* (Goodrich and Cornwell, 2008). These ideas are also consistent with the latest 'best practice statements' for use with older people in acute care settings (Bridges et al 2009).

As a result of the study a draft *'toolkit'* has been developed that comprises a range of questionnaires that can be used by staff to assess the nature of their work environment, to identify what seems to be 'working' and also to highlight areas that could be improved. It is hoped that future work will develop this toolkit further and make it more widely available so that local culture change initiatives can be planned and introduced.

However genuine culture change will require that we move away from the 'metrics' of care and pay more attention to what has 'meaning' for older people, family and staff. As

Powell et al (2009) argue we need to recognise and attend to *'the complex social interactions'* that shape care delivery and base the NHS on a model that explicitly values, prioritises and supports the *'relational practices'* (Parker 2008) that underpin the best quality care.

This will require asking a series of important questions including:

- is relational practice seen as **significant**? That is, does it matter and is it accorded value and status, not as an added extra but as one of the core values underpinning nursing care?
- is relational practice one of the primary goals of the NHS? In other words is it seen as one of the fundamental **purposes** of care?
- is relational practice central to the way that **achievement** (success) is conceptualised and celebrated?
- do practitioners experience **continuity** in their exposure to positive role models for relational practice? In other words does relational practice figure prominently in their basic training and are they subsequently enabled and facilitated to develop and refine the skills need to practice in a relational way?
- do practitioners from diverse disciplines, with often implicit and potentially conflicting values and beliefs, feel that they **belong** to a practice community that subscribes to relational practice?
- do practitioners feel safe and **secure** to provide care based on relational principles? Are the potential vulnerabilities of such a way of working acknowledged and appropriate support provided?

These are questions which nurses and nursing need to explore if care for all patients is to improve.

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Nursing and Midwifery Council (2009) *Guidance for the Care of Older People*. Nursing and Midwifery Council

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Royal College of Nursing (2008) *Defending dignity – challenges and opportunities for nursing*. Royal College of Nursing, London

Williams, S (2001) *Grasping the nettle, understanding hospital discharge: A constructivist inquiry*. Unpublished PhD Thesis, University of Wales, Bangor

Williams S, Nolan M and Keady J (2009) *Relational practice as the key to ensuring quality care for frail older people: Discharge: Planning as a case example*. *Quality in Ageing* 10, 3: 44-55

The full report can be obtained from the SDO website:

Paterson et al (2011) *Culture Change, Organisational Performance and quality of Acute Hospital care for Older People* (SDO reference number 08/1501/83)

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NEW PROJECTS

Using the Edinburgh Feeding Evaluation in Dementia (EdFED) scale in acute care



Roger Watson David Reid Christine Ingleton

Professor Roger Watson, David Reid, and Professor Christine Ingleton are carrying out a study, funded by a Faculty of Medicine Research Grant, on using the EdFED scale in acute care. The EdFED scale, developed by the lead applicant, remains the only validated scale for the assessment of feeding difficulty for older people with dementia. The EdFED has been translated and used in several countries. The scale is validated for use in long-term care of older people but has never been validated for use in acute care where the spectrum of severity of dementia in

patients is likely to be different and the time available for assessment by nurses shorter.

The aims of the project are:

- to derive and test a system for recruiting older people with dementia to a study of the assessment of feeding difficulty in acute care;
- to enable meaningful engagement of people with dementia and their families in developing a revised proposal.

With the engagement of service users with dementia and their carers, and under the auspices of the local Alzheimer's Society, a system for recruiting older people with dementia in the local acute care NHS Trust will be developed and piloted. Data on EdFED scores and scores on the MUST instrument (a nationally implemented measure of malnutrition) will be gathered.

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Evaluation of an innovative community consultant-led UK palliative care service providing care at home

Hughes PM, Winslow M, Dr Bill Noble, *Academic Unit of Supportive Care University of Sheffield*

King N, Melvin J, Brooks J, *Division of Psychology and Counselling, University of Huddersfield*

Professor Christine Ingleton, *School of Nursing and Midwifery, University of Sheffield*

Bath PA, *CHIMR, Department of Information Studies, University of Sheffield*

Introduction

The Midhurst Macmillan Specialist Palliative Care Service was set up in the UK 2007 to provide palliative care as a community service after the closure of the former hospital-based provision. A key aim was to provide care for people who wished to remain at home, while keeping available options for other care where needed. A multi-method evaluation of the service is being undertaken.

Aims

To provide a detailed description of the service, including the experience of those in receipt of the service and the views of those referring into the service, in the context of the wider local provision.

Design and Methods

In-depth interviews are underway with patients, informal carers and professionals, alongside a postal questionnaire to bereaved carers. A documentary review of service activity is being undertaken. In addition, a survey of palliative care systems and support in General Practices in the 3 PCTS is being conducted, to provide important data on the context of care. Four hundred and twenty GP practices in the area have been asked to complete the GP End of Life Care Index, a self-complete questionnaire on Practice organisation, clinical behaviour and outcomes in

palliative care. Descriptive statistics will be used for the GP and bereaved carer questionnaires, and interview transcripts will be analysed thematically.

Results

We will report on the findings from the GP survey, comparing results with those from our earlier national survey of GP practices. The survey findings form one element of the larger evaluation. This data on context will be reported in the light of emerging data from the other elements of the study.

Conclusion

Analysis of the information obtained by these methods will allow us to evaluate the service; to gain insights from service users as to its effectiveness, and the extent to which choice is available; and to explore the different roles and relationships of health care professionals and others.

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Receiving end of life care at home: experiences of the bereaved carers of cancer patients



Christine Ingleton

Dr Daniel Munday, *University of Warwick*

Professor Kate Seers, *Director, RCN Research Institute, University of Warwick*

Dr Bill Noble, *Senior Lecturer in Palliative Medicine, Medical School, University of Sheffield*

Professor Christine Ingleton, *School of Nursing and Midwifery, University of Sheffield*

Mrs Elizabeth Pitt, *Home care facilitator, Coventry Primary Care Trust*

Home care for cancer patients at the end of life is an important aspect of enabling patients who wish to die at home to do so. Much of this care is provided by health care assistants (HCA) and other unqualified care staff. There is some evidence from previous studies which have explored the work and experience of HCAs; these have suggested that HCAs undertake complex tasks including intimate care, social and emotional support and practical help. However no studies have specifically explored the experience of bereaved carers who have received these services. The benefits and burdens of receiving such care from the patient/carer perspective and whether carers recognize the roles which HCAs describe for themselves are unclear.

This study will explore the experiences of the bereaved carers of cancer patients who have received end of life care from services providing home care by unqualified staff and examine whether experience varies according to the model of care: hospice at home, NHS and agency provided services.

Qualitative semi-structured interviews will be conducted with bereaved carers of cancer patients who received home

care services from dedicated hospice at home or NHS/agency services in two areas; West Midlands and South Yorkshire. Carers, 6-12 months post bereavement, will be purposively sampled according to relationship to patient, age of carer/patient, type of service received and social class. Interviews will explore carer's experience of having care provided within their home, with particular attention to the benefits and problems associated with this type of service and the role the HCAs performed. Interviews will be recorded, transcribed verbatim and analysed using the constant comparative method. It is envisaged that emerging insights will enable a deeper understanding of the issues faced by cancer patients and their carers receiving such care and will facilitate the development of appropriate models of home care for cancer patients at the end of life.

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Partnership working in palliative care research project



Clare Gardiner



Merryn Gott

Researchers from the School of Nursing and Midwifery have recently been awarded a research grant to explore partnership working in

palliative care. The research team, led by Dr Clare Gardiner and supported by Professor Christine Ingleton and Professor Merryn Gott (University of Auckland, New Zealand), were awarded the grant by the Cancer Experiences Collaborative (CECO), through their Older People Theme. Evidence suggests that palliative care for older people can be hampered by a lack of recognition of palliative care requirements, and a lack of effective partnership working and communication between care providers. This research aims to explore factors which support good partnership working between specialist and generalist providers of palliative care. The study will comprise a systematic review of literature relating to factors supporting good partnership working in both palliative care and in other disciplines. Following the review a proposal will be developed in order to develop strategies to improve partnership working in palliative care. The study builds on previous work from this research group. The study will commence in December 2010 and will run for six months.

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IMPACT

Alcohol and Sexual Risk Taking in Adolescents (ASeRT): a research, policy and practice knowledge exchange

Dr Mark Hayter and Christina Harrison, Sexual Health Service Manager (Doncaster Community Health Care) are carrying out a study looking at the link between alcohol use and sexual risk taking, particularly in young people. Doncaster has one of the highest teenage pregnancy rates in the UK and worryingly high rates of sexually transmitted infections (STIs) and there is recognition and evidence that alcohol use contributes to this – yet this issue is not prominent in the sexual health work of the service.

This study will use workshops, meetings, seminars and clinical visits to enable knowledge exchange between the University of Sheffield and the Young Person's Sexual Health Service in Doncaster in order to develop the service and an academic agenda around adolescent sexual behaviour and alcohol use. It is designed to bring researchers and practitioners who work in adolescent sexual health together to explore how the research on alcohol and sex can be used in practical sexual health counselling work with young people. It is also designed to enable practitioners and policy makers (service managers, specialist nurses, youth workers and other professionals) to add their practical knowledge and skills to the research agenda in the field of adolescent sexual health. Hence the project will facilitate a two way process through which the applicability of the research evidence to clinical practice can be explored and the clinical experience of practitioners can inform the research work of academics.

The initiative is designed to enable the present counselling strategies to be developed to better include an emphasis on alcohol use and explore strategies, grounded in practical considerations, for targeting adolescents with alcohol problems. It will also enable researchers and practitioners to develop a proposal, in partnership, to pilot a short alcohol intervention forming part of a future grant application to the Alcohol Education Trust (AET).

An additional strand to the initiative will see the facilitation of workshops designed to enable the views of adolescents themselves to contribute to the exchange of ideas and knowledge between researchers and practitioners. This will involve the running of workshops within the youth club based sexual health clinics in and around Doncaster using scenario type work and group discussions with young people who use the sexual health service. This strand will allow adolescents themselves to contribute their knowledge and ideas to the development of sexual health services and its alcohol strategy, giving, often socially deprived, young people a voice that can influence both clinical practice and research.

Finally, the initiative will lead to the development of new teaching and seminar inputs related to alcohol and sexual behaviour within the 'Practice of Family Planning and Sexual Health' programme currently provided by the School of Nursing and Midwifery.



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CONFERENCES

In October 2010, **Dr Paul Galdas** presented his research on the influence of gender on help-seeking behaviour for cardiac symptoms at the World Congress in Men's Health in Nice, France. All over the world, men are more likely than women to develop a range of serious, disabling and potentially-life threatening health conditions that are preventable. Yet men do not use a wide range of health services as frequently or as effectively as they might, and there is a paucity of health information and health care services aimed specifically at men. The World Congress in Men's Health provides an important multidisciplinary forum focusing on all aspects of men's health including urology, cardiology, endocrinology, oncology, sexual medicine, mental health, primary care, public policy, and education. Dr Galdas' research emphasises how the social construction of gender can intersect with men's and women's decisions to seek medical help when they



experience cardiac-related chest pain. For further information, see: Galdas PM, Johnson J, Percy M, Ratner PA (2010) Help-seeking for cardiac symptoms: beyond the masculine-feminine binary. *Social Science and Medicine* 71: 18-24.

Dr Sharron Hinchliff was invited to give a keynote lecture at the Annual Women's Health Issues Conference, hosted by the University of Liverpool Mersey Region Group for Sexual and Reproductive Health Training. Sharron's presentation, entitled *Midlife and Menopause: Coping with Change*, addressed the changes in health and well-being that women can experience during the menopausal transition. Sharron presented qualitative findings on menopausal changes, such as hot flushes, and the impact they had on the women's quality of life. She also discussed the changes in sexual activity women can experience around midlife. Ways of coping with the changes were covered and these included diet, exercise, alternative therapies and hormone-replacement therapy. The presentation drew attention to menopause within a social and relational context, as well as the heterogeneity of 'symptoms' associated with menopause including cultural differences in the prevalence of 'symptom' reporting.

The main attendees of the conference were GPs, and a small number were practice nurses. The conference was assessed by the University of Liverpool as appropriate for one full day Faculty of Sexual and Reproductive Health Care CPD and it had been accredited by the Royal College of Obstetricians and Gynaecologists.

World Health Organisation adolescent health workshop in China

In August 2010 Dr Mark Hayter was invited by the World Health Organisation (WHO) to join a team from the WHP Pacific Region and academics from Hong Kong Polytechnic University to run a series of workshops on adolescent health in Suzhou, China. The workshops were part of an adolescent health summer study programme for nurse teachers and nursing students from all regions of China. The first week of the programme involved Mark and other colleagues from the WHO and HKPU facilitating adolescent health seminars with more than 60 nurse teachers from nursing schools across China. These sessions were to help the teachers develop the knowledge base and facilitation skills necessary to take on workshop delivery with groups drawn from over 150 nursing students due to arrive for the last two weeks of the programme. Working closely with Professor Samantha Pang, Dr Regina Lee and colleagues from HKPU, Dr Moses Guttman and Dr Pat Nayar from the WHO Pacific region it was a pleasure to see how the teachers, who were new to using experiential teaching approaches, really took to this method of educational delivery. During the second part of the programme our role was to support the teachers in leading workshop with the newly arrived nursing students. The workshop was hosted wonderfully by the University of Soochow, School of Nursing and we were made very welcome by Dean Xue Xiaoling. The workshop was a real success and ended with students delivering health information and displays in one of the largest children's centres in Suzhou. The summer programme was also part of a research study that involved pre and post analysis of the adolescent health knowledge, attitudes and skills of all participants – for which preliminary analysis is showing the programme had a significant impact on all three domains with all participants. The study is now being prepared for presentation at the International School Nursing Conference in Hong Kong, 2011 and also for publication in *Nurse Education Today*.



Pictured: Dr Mark Hayter, Drs Guttman and Lee with one group of Chinese Nurse teachers on the adolescent health programme

Tokyo Medical and Dental University conference

Professor Anne Peat, Dean of the School of Nursing and Midwifery, was invited to present a paper at Tokyo Medical and Dental University (TMDU) at their International Seminar 'Advanced Nursing Education and Research' in 2010. TMDU is a prestigious university in Japan and expects its graduates to be international leaders in clinical work and research. Students who have acquired high grades and who have demonstrated an exemplary ability to learn are eligible for scholarships to study overseas.



Pictured I-r: Professor Anne Peat with Professor Fu-Jin Shih National Yang-Ming University, Dr Asta Heikkila Seinajoki University of Applied Sciences, Professor Kathy Magilvy, University of Colorado and Professor Akiko Sasaki, Tokyo Medical and Dental University

Over one hundred postgraduate students and staff were present at the conference which was opened by the President of TMDU, Takashi Oyama, and attended by the Ministry of Education, Culture, Sports, Science and Technology in Japan who sponsored the event. The purpose of the programme was for International Nursing Professionals to educate graduate students in the field of nursing research and education. Professor Peat, who is nationally and internationally recognised for the work she has undertaken in quality assurance and enhancement, presented a paper on 'Quality Assurance and Enhancement in UK Higher Education Institutions'. The paper identified the responsibility the University has for maintaining academic standards but stressed the importance of externality and the student's voice. The seminar also provided an opportunity to discuss nurse education and research in Taiwan, the USA and Finland with presentations from: Professor Fu-Jin Shih from National Yang-Ming University, Taiwan, Professor Kathy Magilvy, University of Colorado, USA and Dr Asta Heikkila from Seinajoki University of Applied Sciences in Finland. A symposium was held at the end of the presentations which provided an opportunity for speakers and faculty members to describe how collaboration between the universities could be developed. This led to a lively debate between the academics on how dialogue could be maintained and ideas explored for future collaboration. There was also a great deal of enthusiasm from students who welcomed the opportunity to gain experience overseas.

The International Visiting Students Scheme at the School of Nursing and Midwifery

by Yea-Pyng Rose Lin, visiting student

The overseas research practicum is one of the required doctoral courses in the Chang Gung University, Taiwan. The course is conducted through research-related activities under the guidance of the Taiwanese advisor as well as the supervision of a faculty member from a qualified institute or university outside Taiwan. To ensure that the student has sufficient time for research experience, a minimum of three months stay in the overseas institute is required. For this reason, the School of Nursing and Midwifery at the University of Sheffield was my first choice for the overseas research practicum. My supervisor for the programme in the School of Nursing and Midwifery is a pioneer in the field of nursing research and has expertise in developing measurement instruments.

I am interested in the issue of dignity in care. Currently, research into dignity in care from the point of view of nurses and patients has been conducted by using descriptive qualitative methods. According to the learning programme and objective of my overseas research course, I wanted to develop a tool for the measurement of dignity in care and design material for nursing education relating to patient dignity and nursing ethics.

The teachers and administrative staff at the University of Sheffield have been very helpful and always kept in touch with me about the process of application. To enhance my writing and speaking skills, I prepared a systematic review of dignity in care and translated my questionnaire on dignity in care from Chinese to English. My supervisor provided a lot of advice on editing my manuscript and also helped me clarify the research method and concept of my study. Although this is my first time attending an overseas programme, I have been able to adapt to a new environment at Sheffield quickly and learn more about the academic study of dignity in care in UK. The School provides an excellent environment in which to study, such as the research room, computers and printers, for the students in Samuel Fox House at the Northern General Hospital. In addition, the Information Commons provides high quality IT-enabled study space and 24 hour access to heavily-used student materials.

I have got to know many international friends in Sheffield. I have really appreciated and enjoyed my time here.

Moreover, Sheffield is one of the greenest cities in England with 150 woodlands and 50 public parks. Also, I went running every day in Weston Park and Crookes Valley Park which were near to my house. Sometimes I joined the ballet and yoga classes to keep fit and healthy. I am going back to Taiwan soon. This has been an unforgettable learning experience.



Pictured: Yea-Pyng with supervisor Professor Roger Watson

Experiences and reflections on my visit to Sheffield

By Yanhua Chen, visiting scholar

I am a Chinese academic visitor in the School of Nursing and Midwifery from the Affiliated Hospital of Luzhou Medical College. I have been here nearly ten months and, before going home, I would like to share some of my experiences. My supervisor has made me feel welcome and comfortable, particularly important as it can be a tough time as a stranger in the UK. In particular he guided me throughout the whole process of a systematic review of nursing clinical competence assessment, database retrieval, drafting the paper for publication, revision and submission to a journal.

A number of staff members in the School helped me gain insights into qualitative research which is a relatively weak domain in health research in China and Asia, where we prefer quantitative methods of research. But for me, I always have passion to learn and apply it someday. I was invited to sit in on a course on qualitative research, which was beyond my expectation. I also received expert advice on grounded theory and this encouraged me to try this research method in the field of HIV/AIDS research. This unforgettable trip to the UK has been really fruitful and broadened and strengthened my research skills.

Apart from research, nursing education is also a focus of my visit to this prestigious University. The teacher and student relationship, teaching and learning activities and continuing professional developing programmes have enriched my knowledge. The most impressive thing to me is the freedom of learning and self responsibility and management of your own study and also a feeling of equality and mutual respect in the relationship between teacher and students. This is quite different from China where we have a very strong philosophy of respecting tutors as our fathers and very much stricter disciplining of students. The first thing I am eager to learn is problem based learning (PBL) which attracted me before I started teaching in my country. I received some expert guidance from staff within the School on PBL and I finally understand this approach and have decided to establish this method of delivery into our nursing education programmes in China to benefit teachers and students there. The continuing professional development courses are very successful and useful for nurses' sustainable competence development and patient safety in UK. The courses provided by the School of Nursing and Midwifery are abundant and this inspires me to advocate more educational opportunities for nurses in my home country and better safety for the public. Another very exciting experience has been to see clinical placements and I have seen the totally different health system in the UK from this perspective.

I have also met many students from undergraduate students to postgraduate and PhD research students, from non nursing students to pre-registered and post-registered students. They are lovely and their extraordinary and self-directed learning style impressed me a lot; in addition, their friendly talks have given me a wonderful chance to understand nursing students in the UK.

The smiling, helpful and patient support staff are always there when I have problems. I was invited to experience many other activities within the School, for example, learning about the quality assurance strategies in University of Sheffield and in the UK.

The whole context has been free, encouraging and helpful one in which you feel you are quite involved in the group, instead of being isolated. The staff in the office which was my base for the duration of the visit were nice and we established a good relationship which made me feel even better here than at home.

Since I think I have taken much from the staff and students here, I am constantly thinking of giving something useful and interesting back to them. I was presented with the opportunity to share thoughts about nursing in China with some online postgraduate students and this made my visit here extremely meaningful.

There are too many things to describe and persons to express my gratitude to. This magnificent time has benefited me all round and I will share all the experience with my colleagues and students in China. I will encourage more teachers and students to learn here and also sincerely invite staff and students to visit China. I also hope that the friendship between us can last long and the communication and cooperation can continue forever.



Pictured: Yanhua with the Vice Chancellor, Professor Keith Burnett

European Dialysis & Transplant Nurses Association/European Renal Care Association (EDTNA/ERCA).

PhD student John Sedgewick has been appointed Education Consultant to the European Dialysis & Transplant Nurses Association/European Renal Care Association. This voluntary role will involve supporting the development of education opportunities to members of the association which currently span fifty countries. EDTNA/ERCA is a multi-disciplinary organisation of individual members with currently 3000 members from 50 countries. The association membership is open to nurses, technicians, social workers, dieticians, unit managers, transplant co-ordinators, and any other professionals working with renal patients. EDTNA/ERCA aims to achieve a high level of quality care and support for patients and their families whilst promoting the advancement of renal care through education and continuous professional development. The role will also involve contributing to the development standards for renal care and support colleagues within the association in initiating, promoting and conducting research in renal care. EDTNA/ERCA seeks also to encourage communication and co-operation between all members of the multi-disciplinary team involved in the provision of renal care and be the recognised multi-disciplinary renal care association in Europe. An important role of EDTNA/ERCA is establishing collaborations with other associations and organisations having a role in health care delivery in Europe and internationally.

Further information please visit:

<http://www.edtnerca.org>

Saudi women race for charity

Ahlam Al-Zahrani (PhD student) recently organised a race in support of the British Heart Foundation. More than 50 Saudi women from across the UK took part in the Sheffield race, which aimed to raise awareness of heart disease and the need for exercise. A delegation from the Royal Embassy of Saudi Arabia in London attended the event, led by Princess Fadwa bint Khaled, the wife of the Saudi Ambassador to the UK.

Students

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Staff

Bedford A, **Watson R**, Henry JD, Crawford JR and Deary IJ (2010) Mokken scaling analyses of the Personal Disturbance Scale (DSSI/sAD) in large clinical and non-clinical samples. *Personality and Individual Differences* 50: 38-42

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Curtis P, James A and Ellis K (2010) Children's snacking, children's food: food moralities and family life. *Children's Geographies* 8, 3: 291-302

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Gardiner C and **Ingleton C** (2010) Commentary on Cronfalk BS. Soft tissue massage: early interventions for relatives whose family members died in palliative cancer care. *Journal of Clinical Nursing* 19: 1189-1192

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Green E and **Ingleton C** (2010) Commentary on Huang Yu and Yates P. Factors influencing oncology nurses' approach to accommodating cultural needs in palliative care. *Journal of Clinical Nursing* 19: 1179-1181

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Hayter M (2010) Commentary on East L, Jackson D, Peters K and O'Brien L (2010) Disrupted sense of self: young women and sexually transmitted infections. *Journal of Clinical Nursing* 19: 2952-2953

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Hussein S, Manthorpe J, **Reid D**, **Penhale B**, Perkins N, Pinkney L (2010) Working together in adult safeguarding: findings from a survey of local authorities in England and Wales. *Research, Policy and Planning* 27, 3: 163-176

Ingleton C and Green E (2010) Commentary on Metcalfe A, Pumphrey R and Clifford C. Hospice nurses' and genetics: Implications for end-of-life care. *Journal of Clinical Nursing* 19: 1182-1184

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Ingleton C, Chatwin J, Payne S and Seymour J (2010) The role of the health care assistant in supporting district nurses and family carers to deliver palliative care at home: findings from an evaluation project. *Journal of Clinical Nursing* 20: 1203-1214

Ingleton C (2010) Research in palliative care – getting started. *Hospice Information Bulletin* 4: 18

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study of the views of social services managers in England and Wales. *Journal of Social Work Practice* 24, 4: 263-376

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O'Brien T, Payne S, **Nolan M**, **Ingleton C** (2010) Unpacking the Politics of Evaluation: a Dramaturgical analysis. *Evaluation: The International Journal of Theory, Research and Practice* 1, 4: 431-444

Ryan T (2010) Stroke awareness among British ethnic minorities. *British Journal of Community Nursing* 15, 8: 381-384

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Szu-Mei Hsiao, Mei-Ling Gau, **Ingleton C**, **Ryan T** and Fu-Jin Shih (2010) Spiritual needs of Taiwanese patients with advanced lung cancer. *Journal of Clinical Nursing* doi: 10.1111/j.1365-2702.2010.03278.x

Thompson D and **Watson R** (2010) Mokken scaling of the Myocardial Infarction Dimensional Assessment Scale (MIDAS). *Journal of Evaluation in Clinical Practice*

New book

A new book entitled 'Living within Ageing and Dying' and edited by Merryn Gott and Christine Ingleton, will be launched at the EAPC conference in Lisbon in May 2011. Published by the Oxford University Press, the book identifies ways forward for improving the end of life experiences of older people by taking an interdisciplinary and international approach.

Conference papers

Students

Crathern L and Jacob B (2010) *Involving the public in research: Reflecting on the collaborative process from both a researcher and service user perspective*. RCN International Research Conference, Gateshead

Van-Waeleghem JP, **Sedgewick J**, McCann M, Einarsdottir H and Pegoraro M (2010) *Cannulation and Vascular Access Care*. 39th International Conference, European Dialysis and Transplant Nurses Conference, Dublin, Ireland

Sedgewick J (2010) Exploring Older People's Views of Choice and Decision-Making in Chronic Kidney Disease (CKD)- A Grounded Theory Study. 38th Renal Society of Australasia National Conference, Cairns, Australia

Staff

Gardiner C, Gott M, **Ingleton C**, **Ryan T**, Seymour J, Bennett M, Noble B, Cobb M (2010) *Transitions to palliative care in acute hospitals: Findings from a qualitative study with medical and nursing staff in the UK*. 6th Research Congress of the European Association of Palliative Care, Glasgow, UK

Gardiner C, Gott M, **Ingleton C**, **Ryan T**, Seymour J, Bennett M, Noble B, Cobb M (2010) *Management of Palliative Care in Acute Hospitals: Findings from a Qualitative Study with Medical and Nursing Staff in the UK*. 6th Research Congress of the European Association of Palliative Care, Glasgow, UK

Gott M, **Ingleton C**, **Gardiner C**, **Ryan T**, Seymour J, Bennett M, Noble B, Cobb M (2010) *Transitions to palliative care for older people in acute hospitals*. Palliative Care Congress, Bournemouth, UK

Gardiner C, Gott M, **Ingleton C**, **Ryan T**, Seymour J, Bennett M, Noble B, Cobb M (2010) *Transitions to palliative care in acute hospitals: methods and ethical challenges*. Palliative Care Congress, Bournemouth, UK

Ingleton C (2010) *Introduction to research in palliative care*. On behalf of Cancer Experiences Collaborative (CECo), St Luke's Hospice, Sheffield, UK

Welcome to new staff

- Dr Paul Galdas, Lecturer
- Flora Hinks, Recruitment and Admissions Officer
- Allannah Millsom, Student Services Support Officer
- Professor Mike Nolan, Professor of Gerontological Nursing

Welcome to honorary staff

- Rev Mark Cobb, Director of Professional Service, Sheffield Teaching Hospitals NHS Trust
- Professor Merryn Gott, School of Nursing, Auckland University, New Zealand

Welcome to visiting scholars

- Yanhua Chen
- Kristin Haglund

Welcome to new research students

Mansour AlYami
Debrah Bates
Nuria Esandi Larramendi
Gesthimani Merodoulaki
Alice Palmer
Caren Sheppard

Visiting Student:

Yea-Pyng Rose Lin

Congratulations to

Tony Ryan, promoted to Senior Lecturer
Clare Gardiner, promoted to Research Fellow

Recent upgrades MPhil to PhD

Mahmoud Al Kalalkeh
Margaret Dunham

Completions

Congratulations to:
Samira Al Senany PhD
Ana Carvajal Valcarcel PhD
Julia Maz DMedSci
Caryl Skene DMedSci

International Award

In October 2010, **Bridget Penhale** was awarded the 2010 International Rosalie S. Wolf Memorial Award for her research in the prevention of elder abuse. She received the award at a ceremony in New York. We wish Bridget good luck in her new post at the University of East Anglia and look forward to working collaboratively with her. Bridget now holds an honorary post at the University of Sheffield.





Research prize

Congratulations to DMedSci student **Liz Crathern**, who was awarded the 'paper of the day' research prize at the RCN international research conference in May 2010, for the paper most likely to be talked about in a year's time (see conference papers for details).

PhD student **John Sedgewick** has been invited to join the Editorial Advisory Board for The Renal Society of Australasia Journal.

John has also been invited to join the International Scientific Advisory Board for the RCN International Research Conference 2010 – 2011. Abstract Selection Committee Member (International Scientific Advisory Panel) International Nursing Research Conference, Royal College of Nursing, 16-18 May, Harrogate International Centre, Harrogate, England, UK

Dr Sharron Hinchliff has been invited to join the local scientific committee of the World Congress for Sexual Health Conference 2011. She is part of a small team responsible for one of the seven conference tracks 'Social, behavioural and historical research'. The conference attracts delegates with an interest in sexual health from all over the world. It will be held in Glasgow in June.

Professor Christine Ingleton has been appointed as Associate Editor to the BMJ in Supportive and Palliative Care.

Professor Roger Watson, currently Editor-in-Chief of the Journal of Clinical Nursing, has been appointed Editor-in-Chief of the Journal of Advanced Nursing from January 2012.



The School of Nursing and Midwifery has been able to secure five Commonwealth Scholarships to cover the fees of students commencing their studies on the online Master of Midwifery programme (or MMedSci in Maternity Care) in September 2011. Applicants for these scholarships, which are funded by the Commonwealth Scholarship Commission in the United Kingdom, must meet our standard selection criteria and must reside in a developing Commonwealth country. Full details of our courses, the Commonwealth Scholarships and the application process are available on our web pages: www.sheffield.ac.uk/snm/scholars

Potential PhD projects

The School has currently identified a number of exciting PhD projects for which we would be very interested to receive PhD applications. The projects are linked to individual staff members' interests and expertise and details can be found at:

http://www.sheffield.ac.uk/snm/phd_projects.html

If you would like to discuss the projects further please get in touch with the staff member concerned or contact Dr Mark Hayter, Postgraduate Tutor, email: m.hayter@sheffield.ac.uk.

English language support for PhD students

The University has a very wide range of English language courses available for both current and prospective PhD students. They vary in length but all offer excellent support and have a good success rate in helping students to improve their writing skills, speaking ability and IELTS scores. Full details of these courses can be found on the University website:

<http://www.sheffield.ac.uk/eltc/courses/aepc/index.html>

High Achievers Event

Staff of the School met with students and their family members at the School's first Annual High Achievers event. The event drew together those students who have achieved distinction level grades in their studies to celebrate their outstanding academic achievement. The students were presented with a certificate recognising their achievement by the Dean and had the opportunity to discuss how to develop their work for publication and research.



Masters in Advancing Practice – new full-time option

This successful course has run on a part-time basis for several years and we are now able to offer the programme to students who wish to study in Sheffield full-time. Designed for healthcare practitioners who are in or aspire to advanced roles in clinical or managerial positions, the MMedSci in Advancing Practice develops and enhances the knowledge and skills required for the real challenges they encounter on a day-to-day basis. The course explores advanced and autonomous practice, leadership, research, and service improvement. We would like to invite applications for the course beginning in September 2011. For further information go to the website: www.sheffield.ac.uk/snm/postgraduate

For more information, please contact:

Programme Leader

Michael Macintosh – m.j.macintosh@sheffield.ac.uk or

Programme Coordinator

Gary Toon – g.toon@sheffield.ac.uk

Online Masters Recruiting

Now is the time of year when we receive applications for our suite of online Masters programmes, each of which will commence with a fresh cohort of students in September 2011.

- **MMedSci in Advanced Nursing Studies**
- **MMid in Midwifery**
- **MMedSci in Maternity Care**

Nurses and midwives around the world are currently expected to extend their knowledge and skills beyond basic levels to further develop their practice. For those situated far from a centre of academic excellence, however, this can present problems. The University of Sheffield School of Nursing and Midwifery has addressed this by running postgraduate courses over the internet since 2004.

Our programmes, taught part-time over three years, are completely self-contained, with all materials, including journals, databases etc., provided online. Our students appreciate the flexibility of online learning and the opportunity to gain otherwise unattainable qualifications by joining a virtual yet vibrant multicultural learning community.

If you have been thinking of making the step up to Masters level then you may well find that one of our courses is right for you. The first place to go to find further information is our user-friendly website: www.sheffield.ac.uk/snm/online

If you are uncertain about anything you are free to contact the Programme Co-ordinator or relevant Programme Leader:

Programme Co-ordinator:

Mr Gary Toon – g.toon@sheffield.ac.uk

Programme leader – MMedSci in Advanced Nursing Studies:

Dr Sharron Hinchliff – s.hinchliff@sheffield.ac.uk

Programme leader – MMid Midwifery and MMedSci in Maternity Care:

Dr Tony Blackett – t.blackett@sheffield.ac.uk

www.sheffield.ac.uk/snm/online



MMid Midwifery



MMedSci Advanced Nursing Studies



MMedSci Maternity Care