

HEADLINES SPRING 2006

Conference Review:
The British Association of Neuroscience Nurses
28th – 30th October 2005
Edith Wood Reports

The annual conference for The British Association of Neuroscience Nurses (BANN) was hosted by Edinburgh earlier this year. Taking place over 3 days this innovative event is attended by all grades of qualified nurses from specialist centres all over the United Kingdom.

Held in the MacDonald Hotel, positioned at the bottom of the volcanic Arthur's Seat, the location was splendid. The Royal Mile, Scottish Parliament and the Palace of Holyroodhouse were situated literally at the front door of the hotel. Even the home delegates who have lived and worked in Edinburgh could not help but be impressed by the architecture and beauty of their home town.

The conference featured an extensive programme; with something of interest to every attendee. The programme was a well balanced combination of scientific presentations, workshops, poster presentations and excellent key note speakers covering a range of nursing issues, including leadership, education, and development and how we should move our profession and care delivery forward in the ever changing challenge of the NHS.

Of particular interest was the collaborative presentation by Dr Robin Sellar, Consultant in Interventional Neuroradiology and Miss Elizabeth Preston, Service Manager for Critical Care and Head of Service for Oncology at the Western General Hospital, Edinburgh.

In the past five years a two-centre regional service, has developed in Scotland for the treatment of cerebral aneurysms. 90% of all the ruptured and symptomatic aneurysms in Scotland are suitable to be treated by interventional coiling. Both academic and anecdotal evidence support this.

Dr Sellar discussed the advances in technical treatment and how the nurse has a critical role in the treatment and care of this patient group through

the trajectory pathway. The presentation was both informative and appreciative of the nursing role.

Professor Ian Whittle, Consultant Neurosurgeon, Western General Hospital, Edinburgh, addressed the fast evolving role of the nurse. He gave an interesting insight on how he felt the nursing profession could develop in the form of extended roles such as nurse anaesthetists and nurse surgeons. While the author enjoyed the presentation and welcomed Professor Whittles comments it should be addressed that why are the once highly specialist skills of trained doctors constantly being devolved to the nursing profession. Where does that leave both of our professions and fundamentally where does this leave the patient? The author welcomes any comments.

The key note speech by Mrs Ann Markham, Chair, NHS Education Scotland brought a much welcomed review of leadership in nursing. Examining the issues surrounding successful and unsuccessful leadership and exploring leadership in respect of the NHS. She concluded by applying both aspects to the role of the nurse. Her speech captured the audience's attention, leaving attendees feeling refreshed and inspired.

Contributing further to the potential of the nursing role was the keynote speech by Professor Dickon Weir Hughes, Chief Nurse/Deputy Chief Executive, Royal Marsden Hospital London. Where nurses may have thought they made little consequence in the overall management of the NHS, Professor Hughes outlined why and how nurses had the ability to identify and implement change with both a successful and empowering outcome.

In respect of the social side of the conference, a private visit to the Scottish Parliament was very well received. With an opening speech by Margo McDonald Independent MSP .The attendees were guided round the much talked about controversial building. Whether the architecture and expense was to your taste or not the tour proved to be worth all the time, effort and organisation required to secure such a venue.

In conclusion, it is very apparent that the ultimate goal of the organisers in Edinburgh had been to provide a conference which was of the highest standard. The academic programme was excellent, the accommodation was superb and the hosting city's culture and ambience was enjoyed by all. The Edinburgh members of the BANN can now look forward to the Southampton conference next year.

Edith Wood is Clinical Nurse Specialist for Interventional Radiology at the Western General Hospital in Edinburgh.

**Ailine Nixon reports
on the
Clinical Neurosciences Conference 2005**

Tuesday 6th September 2005 and I was on a train travelling to Torquay. I was destined for clinical neurosciences 2005 a joint meeting of the Association of British Neurologists (ABN) and the Society of British Neurological Surgeons (SBNS) and their Dutch colleagues.

For the first time a programme had been put together for nurses and allied health professionals working in the neurosciences as part of the event. I was fortunate enough to attend courtesy of an educational grant from BANN .

The first nursing session was entitled new ways of working and provided an insight into the variety of new and innovative roles that neurosciences nurses are developing. Malcolm Clarke from Leicester gave an inspiring talk on his service for carpal tunnel patients where he assesses, treats patients in day case surgery and follows them up without the need to see a doctor. An audit of his service has shown outstanding success rates in terms of patient satisfaction, infection rates and reducing waiting times.

The nurse practitioner, specialist nurse and consultant nurse roles were also discussed from various angles which was extremely thought provoking. The session concluded that we are still hazy about the definition of these roles and how consultant nurses are differentiated from matrons/managers and clinical nurse specialists. Paula Vasco who chaired the session vowed to write to senior nursing bodies to point out the confusion in these titles and defining these nursing roles and to request clarification on how the

consultant nurse role differs from the clinical nurse specialist and the modern matron roles.

The second nursing session looked at the impact of the NSF for long term conditions on neuroscience nursing. The session focused on the need for early recognition, prompt diagnosis and treatment of neurological conditions and discussed how the development of the community matron role and the development of care bundles for neurological conditions can help to achieve this. Gail Robinson also provided an example of good practice at the acute brain injury unit at the National Hospital for Neurology and Neurosurgery in London. At this unit a multidisciplinary team work effectively together to start rehabilitating patients from the beginning when they are still in the acute stages of their condition.

The sessions aimed at the doctors were also informative and thought provoking. There was an interesting session entitled 'Should neurologists look after patients with SAH?'

This was prompted by the fact that many aneurisms are now coiled rather than clipped so surgeons now have very limited surgical input into SAH patients and much of the treatment is carried out by neuroradiologists. The argument was put forward from the neurologists' side that if no surgery is required then the neurosurgeons didn't necessarily need to be involved. The session concluded that it didn't really matter who lead the care of SAH patients as long as these clinicians were experienced in this area. As neurosurgeons lead the care of SAH patients in the majority of cases and therefore have the experience maybe management of these patients should stay as it is. The 3 day conference was inspiring and equipped me with new knowledge as well as the opportunity to network with like minded and forward thinking colleagues. I would like to thank BANN for assisting me to attend this conference and would encourage other BANN members to take advantage of the funding that BANN has available for educational ventures.

Ailine is a Staff Nurse at the Royal Hallamshire Hospital Sheffield

A Review of the Current Education Offered to European Neuroscience Nurses

Carol Forde-Johnston EANN representative for the UK

Following last years EANN meeting in Rimini, May 2004, it was evident that many European countries offered a wide variety of courses and specialist training for neuroscience nurses, some similar and some contrasting to UK educational programmes. A need was identified at this meeting to review the current education offered to neuroscience nurses across Europe. Therefore, during 2005, I conducted a project establishing what form post-registration education takes throughout Europe for neuroscience nurses. It is hoped that this study will assist with the development of a future strategy for neuroscience nurse education across Europe and support future EU education projects such as NEUroBlend.

The overall aim of the study was to evaluate what post-registration education was currently being offered to neuroscience nurses throughout Europe. To achieve this aim all 14 EANN representatives were given a questionnaire via post and email that included 19 questions linked to post-registration education within their country. Questionnaires were given to 14 representatives and there was a 57.1% response rate with 8 replies. The countries that replied included the United Kingdom (UK), Belgium (B), Netherlands (N), Denmark (D), Sweden (S), Italy (I), Finland (F) and Greece (G). The questions within the questionnaire were mostly open-ended or YES/NO answers and reflected a qualitative approach to elicit more information linked to the types of courses being offered and resources used.

Key findings found many differences and similarities between countries. Overall, 6 countries have a specialist educational programme for Neuroscience Nurses (UK, F, N, B, S, D) and 2 have none (I & G). When reviewing which institution these programmes linked to there were many differences such as Universities in the UK, Centres for Adult Education in Denmark, General and University Hospitals in the Netherlands, Polytechnics in Finland, Schools of Nursing in Belgium and Universities in Sweden. In Greece, after working sometime in the area of neurosciences, neuroscience nurses may have financial support from the state to follow a neuroscience course in another European country. Only Italy has no specialist neuroscience education programme linked to an institution. In contrast, their Italian National Association (ANIN) provides an annual convention for nurses and medics to attend and share information that is mainly linked to the latest medical procedures and treatments in neurosciences.

When reviewing the level and type of training being offered to neuroscience nurses there were many disparities across Europe. Most UK neuroscience courses now link to Universities and are offered as modular programmes or certificates that may link to Diploma or Degrees on University pathways. Many programmes in the UK have neuroscience programmes that are credited at Diploma/Degree level 2/3. In contrast, throughout Europe all countries use a University credit point system called the European Credit Transfer System (ECTS). It is suggested that the UK Universities may have to

change their University credit system to this point system in line with future European education directives.

Denmark's system is similar to the UK's as they allocate 9 (ECTS) points for a neuroscience short course that can lead to a Clinical Diploma (60 ECTS) points if the student continues to study at the University on other health care courses. In the Netherlands the neuroscience course consists of 25 days divided over 1 year and the certification is under the control of their National Neuroscience Nurses Association. Swedish nurses can study for a Nurse Specialist Diploma but not in neurosciences that is something they are currently working on. Instead their neuroscience short courses carry 5, 10 or 15 ECTS points to build upon towards a future generic Diploma. Belgium offers the shortest neuroscience course that consists of 8 days and 2 days at congress. This occurs only once a year in 2 Schools of Nursing with approximately 20 nurses in each School.

In relation to specialist neuroscience courses, most UK Hospital Trusts fund this type of post-registration education but at different levels as there may be inequities in replacement costs and the supernumary status of the nurse depending on the Hospital Trust. In Denmark the hospital pays a part course fee, the state pays an additional educational salary and there is part funding from a Centre for Adult Education. Within the Belgium system, the hospital funds their short neuroscience course and the government gives the nurse 250 euros as an educational support to use as they wish e.g. for books and travel. Finish nurses may receive funding from their hospital if money is available but many have to pay for the full cost of the neuroscience course themselves. When asked what educational philosophy underpinned the various neuroscience programmes it was evident that the majority, including the UK, linked to 'competence-based training' and 'training on the job.' Sweden's philosophy was scientifically orientated and concentrated on the latest research and the exchange of experience between participants.

In contrast, Greece and Belgium's was the most task-orientated focusing on medical models and philosophy.

The type of programmes offered to UK neuroscience nurses varies from Trust to University but the majority have neurosurgical, neuro-medical and neuro-rehabilitative components that may include neuro-oncology, ethics and law. In the UK the majority of neuroscience courses have a classroom based teaching day(s) with practice days caring for patients with neurological conditions that enable the students to be reflective. The Netherlands divide their course into the 6 components of Ethics, Neuropsychology, Anatomy and Physiology, Brain injuries and Stroke, Neuromuscular Diseases and Epilepsy with a distinct lack of neurosurgical care. In contrast Belgium's short course focuses purely on intensive care and emergency nursing within neurosciences. Other European countries tended to change the titles and content of their short neuroscience courses yearly e.g. Denmark focused on epilepsy care one year and Finland focused on stroke care one year. It was suggested that the choice of content for the year depended upon government directives or the latest research linked to patient treatments within that country.

Finally, when all 8 countries were asked whether they felt specialist neuroscience education for nurses could be improved they all unanimously replied YES! They suggested more links with other units, hospitals and Universities to share work materials (UK), more contact and information worldwide to improve their work (I), specialist registration and expansion of the course (F, B, G, S) and more help with costs from the state (F, S, I).

In summary, this study elicited a great deal of interesting information and, although there are some similarities, there are many differences between countries offering neuroscience education to nurses within Europe. It is acknowledged that these differences reflect the philosophies underpinning health care and the number of neuroscience units and nurses, for example Belgium is led by the medical model with only 2 Schools of Nursing offering a neuroscience course. Therefore, we need to be aware of the specific needs of the country in relation to population differences and health care services. It is also evident that there are many opportunities to improve the sharing of information and there is a need to support those countries wanting to improve neuroscience education and set up courses that link to further education. This is a goal of the EANN over the next 3 years and much of our time will be spent on NEUROBlend project work that will lead to a European database for neuroscience education so watch this space!

BANN Report 2005 for WFNN Board of Directors

Meeting

Kate McArdle

Since the last board meeting the BANN has become a stronger association with an increasing voice at high levels of health care.

Though the membership size is unchanged the committee size has increased slightly and work has been shared out which has been helpful in progressing some projects.

Our President has been involved in the National Review of Neuroscience services in Scotland, and three members have been involved with the review of neurosciences services in North and south Wales. They have offered an objective voice and experience of neuroscience nursing to the lengthy and involved debates.

We have continued to have three-day annual conferences as well as study days run at a more local level.

Anne Preece our secretary has worked extremely hard and our web site has been reopened and is much improved. Please do visit us at www.bann.org.uk.

Though they did not originate from BANN the committee fully support the work of the National Neurosciences Benchmarking and Education groups. The benchmarking group will be devolving to more local chapters to encourage more networking and linking in a more local way as well as saving on time and travel. We are encouraging them to publish their work so far.

Through the government NHS Modernisation Agency the Neurosciences Network has established a NeuroSmart group on e-mail. This has enabled people in Neuro to advertise, discuss pose questions etc. It has become a very easy way to find out more about the way others work. If you would be interested in joining this group please do let me know, as it would be exciting to have international partners.

Another Government initiative which we have been closely involved with is the Neurology 'Action on' project. This project looked at bids from various neurology departments offering their plans to progress and develop their neurology service. Topics included setting up a tele-service and a specialist nurse. It was exciting to review the 90 bids and try to shortlist the finalists.

We have more recently been supportive of the development of a new nursing journal: The British Journal of Neuroscience Nursing. It will be bi-monthly initially. There will be representation from the journal at the conference but please contact me if you wish more information.

Our regular board meetings continue and we are now very familiar with teleconferences which have been a good way to utilise our time effectively.

If you require any more information about BANN please contact me on:
kate.mcardle@orh.nhs.uk.

Lesley Pemberton
Honorary Member (Former Vice President), BANN
Remembers Lucy Hughes, former Chair of BSNNN (BANN)
Miss Lucy Hughes

Last July (2005) I received a phone call informing me that Lucy Hughes had died. The call was from her friend, Berry, who said she wanted to let BANN know because Lucy had a long-standing connection with the Association and many members would remember her. Berry had found my name and phone number as a contact. It was sad to receive the news, but so kind of Berry to think of Lucy's colleagues and friends at this time.

Lucy was one of the founder members of the British Society of Neurosurgical Nurses (BSNN), as it was known at its inauguration in November 1971. She was elected as a committee member at the first meeting in Manchester and served a term of office until 1974. From 1977-1981 she was Chairman of what

had become the British Society of Neuromedical and Neurosurgical Nurses (BSNNN).

I do not have detailed information of when and where Lucy undertook nurse training and where she worked throughout her career. However, I know that she was working in Neurosurgical Nursing at the North Staffordshire Royal Infirmary (Stoke-on-Trent) when the BSNN was founded. It was after this, I think, that she was a Nursing Officer in Neurosurgery at the Walton Hospital, Liverpool. During those early years of the Society she was involved in organising some of the conferences (or 'meetings' as we called them then).

Later, she obtained a post as Divisional Nursing Officer at Tameside Hospital (Ashton-under-Lyne, Lancashire). With this career move she was no longer directly involved with Neuroscience Nursing but maintained her link and membership with the Association up to her retirement. Along with a few other former members of BANN, she was granted Honorary Membership when she retired from nursing.

It was in the late 1970s that I first met Lucy, when I joined the Society. At the time she seemed quite a formidable woman - one of the old-school 'Dragons' of the nursing profession. (Forgive me for saying that, Lucy, but I don't mean it unkindly.) In those days things were much more formal. Looking back at some of the Society minutes and AGM reports of those early days, references were to

Miss/Mrs/Mr - no first name terms.

Over the years I got to know Lucy a little more when we met up at conferences. When Lucy retired from the nursing profession she was able to return to her beloved home in Northern Ireland.

Two or three years ago I heard that Lucy had been very ill and was undergoing treatment for cancer. She made some recovery but, sadly, was not cured. I can imagine her giving the nurses who looked after a hard time if they did not meet her rigorous standards!

Those of you reading this, who remember Lucy, may be able to add more of your own memories of her. I hope that, like me, you will remember her with honour and gratitude for her life. Lucy made a long-lasting contribution to and maintained enthusiasm for our current BANN.

Lucy was always smartly dressed, with an immaculate hairstyle (how did she manage that?). However, I discovered that she was very sociable with a good sense of humour. She liked her G & T (at appropriate times, of course) and loved playing golf.

List of Universities running the Neuroscience Short Course around UK 2005

University of Central Lancashire Tel: 01772 201201

University of Central England Tel: 0121 331 5000

Edge Hill College of Further Education, University of Lancaster Tel: 01695 584274

The University of Nottingham Tel: 0115 951 5151

School of Health Care, Oxford Brookes University Tel: 01865 741111

London South Bank University Tel: 020 7815 7815

Homerton College, University of Cambridge Tel: 01223 885900

University of Plymouth Tel: 01752 600600

Glasgow Caledonian University Tel: 0141 331 3117

Queen Margaret University, Edinburgh Tel: 0131 317 3226

Sheffield Hallam University Tel: 0114 225 5555

University of Leeds Tel: 0113 243 1751

University of the West of England, Bristol Tel: 0117 965 6261

University of Salford, Greater Manchester Tel: 0161 295 5000

University of Southampton Tel: 0238 059 5000

BANN Website www.bann.org.uk

Anne Preece Secretary BANN

I have been managing the website for over a year now and have to admit it has been a steep learning curve.

In February of this year I had the bright idea of changing the website provider to something more user friendly - then the fun started!

I spent two weeks worrying as the site had disappeared "off air!"

I had visions of bann.org.uk wondering aimlessly in cyberspace and owing up to the committee that I had messed up.

Eventually the fault was located - the hosting company had inadvertently omitted "uk" from the address.

Sanity restored I was able to continue developing the site without admitting anything to the committee!

We now have a variety of pages with information on forthcoming events, publications, committee members and so on.

My main task this year will be to try and develop a members only area to add value to membership of BANN and facilitate joining on line. Any suggestions for further developments please contact me at:

info@bann.org.uk

Neuroscience Events 2006

BNPA Annual Meeting

9-10 February, 2006; London, UK
email. admin@bnpa.org.uk

4th World Congress for Neurorehabilitation

12-16 February, 2006; Hong Kong
www.wcncr2006.com

The Social Brain 2 - See the Bigger Picture

2-3 March, 2006; Glasgow, UK
www.mindroom.org/socialbrain2, email. registration@mindroom.org
Download the First Announcement brochure

Clinical Update: Epilepsy in Adolescents & Adults

8 March, 2006; London, UK
email. simon.timmis@rsm.ac.uk

The Second Annual Update Symposium Series on Clinical Neurology and Neurophysiology

6-8 March, 2006; Tel Aviv, Israel
email: meetings@isas.co.il
www.neurophysiology-symposium.com

International conference on CJD:

Decade past—Decade to come

Monday 20th March 2006

BMA House

Tel: 016306739993

Email: info@cjdsupport.net

www.cjdsupport.net

Post Traumatic Stress Disorder in the Current Climate

23 March, 2006; London, UK

email. simon.timmis@rsm.ac.uk

10th Congress of the European Federation of Neurological Societies

2-5 September, 2006; Glasgow, UK

www.efns.org/efns2006

7th Meeting 2006 The European Association for NeuroOncology

14-17 September, 2006; Vienna, Austria

e mail: eano2006@medacad.org

BRITISH ASSOCIATION OF NEUROSCIENCE NURSES CONFERENCE

13th—15th October 2006

Holiday Inn

Southampton

Contact:

Rachel Palmer

Or

Sue Chorley

023 8079 6365

Carol Forde-Johnson Reports on the EANN Board of Directors Meeting (Barcelona, May 2005)

As The EANN representative for The BANN, I attended my second EANN annual Board Meeting in Barcelona, Spain. The WFNN 9th Quadrennial Congress was being held concurrently so there were many opportunities to attend various interesting presentations and workshops. Barcelona is an ancient city with a magnificent historical and cultural heritage so it was an excellent venue to share knowledge, experiences (and sangria!) with nurses from around the globe.

The EANN comprises of membership from 14 countries including Austria, Belgium, Denmark, Finland, France, Germany, Iceland, Israel, Italy, Spain, Sweden, Switzerland, the Netherlands and the United Kingdom. Our EANN

President Paul Van Keeken from the Netherlands introduced 2 new representatives from Belgium and Austria. Other EANN executive officers are Winnie Depaepe, Treasurer (Belgium), Fabio Barbarigo, Vice President (Italy) and Ansley McGibbon, Secretary (UK).

Elections took place at our meeting and nominations were taken for Vice President and Secretary. Ansley has now stepped down from office and we have a new Secretary called Ann-Cathrin who is the EANN representative from Sweden. Vice President will remain as Fabio from Italy.

The EANN committee wish Ansley every success in the future following her decision to step down from office.

We actively encourage BANN members to get involved with The EANN as a great opportunity to share ideas with our European colleagues and any of you are welcome to discuss these opportunities with our BANN committee members.

Many challenging issues were discussed during this years Board Meeting such as education for neuroscience nurses across Europe, the commencement of a 'NEUroBlend' project, a future congress, and the EANN marketing strategy.

Although there is a great deal of work ahead for The European Association and it's representatives, it is evident that there is a great commitment and enthusiasm towards supporting our neuroscience peers across Europe ultimately improving standards of neuroscience patient care.

Much of our time over the next 3 years will be spent on our NEUroBlend project work that will lead to a digital repository and database for neuroscience education which will be free to all neuroscience nurses on the web. Money has been allocated to the Radcliffe Infirmary, Oxford, from a European Leonardo Da Vinci fund, specifically to work on this project. More information about the NEUroBlend project will be given over the coming year.

Prior to our EANN meeting, I conducted a review of the current education offered to European Neuroscience Nurses through the use of a questionnaire. The aim of the study is to evaluate what education is currently being offered to neuroscience nurses throughout Europe. The results from this study were presented at our EANN meeting and are discussed later within Headlines. It is hoped the findings will help to inform our educational work within the European community in the future.

Another key development from last year is confirmation that the 8th Quadrennial Congress of The EANN will be hosted in Rejkavik, Iceland in 2007. Therefore, we can look forward to an interesting cultural experience from a diverse and unusual country. All information and updates are to be found on the conference web site: www.eanncongress.hi.is

The next Board of Directors meeting will be in Vienna, Austria, May 2006.

Carol Forde-Johnston

EANN

Representative

for UK

June 2005

OBITUARY

Jan Young, Neurosurgical Theatres, Department of Clinical Neurosciences, Edinburgh

Joyce Haskell

1938- 2005

I am sad to announce the very sudden death of Joyce Haskell aged 67 years old on the 10th March 2005.

Joyce Haskell was a founder committee member of the British Society of Neurosurgical Nurses from the early 1970's, when she travelled to attend meetings at the Maudsley Hospital in London until 1980's. She continued to support the Society by attending meetings and in 1990, spoke at the Edinburgh meeting, presenting a paper called 'NEUROSURGERY FROM THE YEAR DOTT.'

Joyce was born in Aldershot, on 8th May 1938, to George and Kathleen Haskell. Although an only child, there was a large extended family of Aunt, Uncles and Cousins, who all lived nearby. Joyce was a quiet, studious young lady, who became Head Girl of her Secondary School. She commenced a Pre-nursing course, but this was cut short due to the untimely death of her Father. Joyce completed her Nurse Training at the local 'Mayday Hospital in Guildford, being presented with the 'Gold Medal', achieving top marks in her final exam.

In 1960 she moved to Edinburgh to undertake her Midwifery Training at the Simpson Memorial / Elsie Ingles Midwifery Training Hospitals. Joyce enjoyed the social life in Edinburgh and decided to stay on in the City.

In 1962 she applied to the Midwifery Dept at the Western General Hospital in Edinburgh. There were no positions in this department at that time & she was offered a temporary 3 month post as a Staff Nurse in the Theatre Unit, in the then Department of Surgical Neurology (DSN). She stayed and became Sister of this Unit and over the next 31 years continuing to develop and work in the same Department until she took early retirement in 1993 aged 55.

During her 31 years service, Joyce worked with 4 Professors of Neurosurgery: the late Professor Norman Dott; Professor John Gillingham; the late Professor Douglas Miller and the current Professor of Neurosurgery Ian Whittle.

The Unit and workload changed dramatically over the years. There were several building renovations and additions, eventually housing Neurology and accepting Head & Spinal Trauma, becoming known as the Department of Clinical Neurosciences (DCN) in the late 1980's.

I initially met Joyce whilst working on the wards in the department.

I became a work colleague in DCN Theatres & eventually as Charge Nurse working closely with her for over 12 years. Joyce was a quiet, methodical person, who could appear to be distant and unfriendly, until you got to know her. Her professionalism, experience and calmness settled the young, enthusiastic & new in post. Joyce was happy to work quietly in the background giving guidance and encouragement, always willing to discuss issues and find suitable solutions to problems. Any decisions on policy were always jointly agreed. We became very close friends during her working life and kept up this friendship once she retired.

Joyce had a passion for collecting Owls, she used to say they were calming & OWLS stood for "Old With Less Stress". You had to be extremely careful when visiting her, as they were everywhere!! All shapes & sizes, ornaments, door-stops, pictures and posters of OWLS, they met you at the door and followed you round the entire Flat.

Joyce never married and when her Mother died in 1984, she made a conscious decision to stay in Edinburgh, where she had developed a close-knit group of friends who she frequent organised social events with, attending Theatre, Ballet, Concerts, Museums and Eating-Out, her favourite food being Chinese.

She enjoyed a varied social life and travelling widely abroad. Although she had made holiday visits to Egypt, Kenya, India and China during her working life, her retirement enabled her to organise several cruises to Norway, Russia and her favourite place, China. On these trips, she went with old friends, but always made new ones who were always welcomed into the fold.

EVALUATION OF THE BANN CONFERENCE

86 Evaluation forms were returned at the end of the conference. Delegates were asked to rate the speakers, of presentations and workshops, on a scale of 1-5 ranging from excellent to poor. The average for presentations was 4.1 and for the workshops 4.3. When asked about the overall educational value of the programme the average score was 4.5 and the score for the organisation of the meeting was 4.75. Likewise the venue was scored at 4.75 and the standard of the catering 4.5, maybe not as healthy as some delegates may have wished.

But not a deep fried Mars Bar in sight!

I look forward to seeing you at the next conference in Southampton.

Deep fried Mars Bars

The deep-fried Mars bar is alive and well in Scotland with more than a fifth of chip shops serving up the delicacy.

Researchers surveyed 500 chip shops and found children are the main buyers, with one shop selling up to 200 a week.

The first report of battered Mars bars being up for sale appeared in the Scottish Daily Record in August 1995.

Scotland has a reputation as the home of the deep-fried chocolate for many years and it has become something of an urban myth outside of the country.

(News bbc.co.uk)

Deep fried Mars Bars Recipe

Ingredients:

1 Mars Bar (UK) or Milky Way (US)

1 cup plain flour

1/2 cup corn flour

A pinch of bicarbonate of soda (baking soda to Yanks)

Milk or beer

Oil for deep frying

Directions:

Chill the chocolate bar by keeping it in the fridge, but don't freeze it.

Mix the flours and bicarbonate of soda (baking soda) together.

Add milk (traditional) or beer (which gives a lighter result) until you get a batter with the consistency of thin cream.

Heat the oil until a small piece of bread will brown in a few seconds, but don't allow to smoke.

Remove wrapper from chilled chocolate bar. Coat completely in batter.

Carefully lower into hot oil and fry until golden brown. Serve, with ice cream or french fries, if you're so inclined.

(Of course, if you want to be sophisticated, you can cut the bar into bite-sized pieces before coating in batter.)

CONFIDENTIALITY

Please be advised that all membership records are held on computer. This computer does not link with any other network and so confidentiality is preserved. Names and addresses will not be disclosed to firms, companies, publishers, etc without the consent of individuals.

Information with regard to seeking assistance with nursing research projects or to patient support groups is facilitated through your unit link member at his or her hospital address.
BANN Executive Board

22nd November 1999

Updated April 2004

I hope you have enjoyed this edition of Headlines.

Please circulate it to your colleagues and encourage them to join.

I would like to encourage you to write articles, reports or letters for publication to the editor.

Authors will be paid £25 for an article that is published in Headlines.
Please use Headlines to communicate with you neuroscience nursing colleagues via a letters page. The best letter will be awarded a £10 book voucher.