NQ edition

for today's Christian nurses & midwives

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- the L-plates are off
- you've made it, what now?
- qualified & blessed

sp_tlight

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Editors

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editorial: qualified & blessed

n this special edition of *Spotlight*, we take a dive into topics that we hope will be helpful for our newly qualified readers. But if you are not newly qualified, after enjoying the articles yourself, why not consider blessing a newly qualified nurse or midwife that you know with a copy?

Being a newly qualified nurse or midwife can be one of the most stretching times of our lives. So, my prayer for each of you reading this is that during the stretching, God will mould you into the nurse or midwife he wants you to be. I pray that you will be bold and gentle for his Kingdom and glory.

As I was drawing up intravenous antibiotics for my cancer patient the other day, I was thinking how I could be the best Christian nurse I can be. If you mix the wrong dilutant with a powder medication, such as using normal saline in clarithromycin, it becomes thick and opaque and is useless to you. This is what our lives are like. If we mix worldly thinking into our hearts, they become sludgy and opaque, so it is harder

> **Bethany Fuller** is a Staff Nurse in Surrey, and worked as CMF's Peer Support Coordinator for Newly Qualified Nurses and Midwives during 2023

to see the Lord and let his light shine in our lives to those around us. By reading the manual God has given us, we can let his word overflow into our lives and practice as Christian nurses and midwives. So, let's make sure we are mixing the powder of our hearts with the pure water of the Word, allowing any sin to be dissolved by the sanctifying work of the Holy Spirit, so we can be translucent in our witness and love of Christ.

May you always seek to love and serve God first in your careers and respect and serve your patients well for Jesus' sake. May he bless the work of your hands (Deuteronomy 28:12) and your patients through you.

Grace and peace in Christ,

Bethany (guest editor)

keep updated

Keep up to date with our events at *cmf.org.uk/nurses/events*.



nursesandmidwives@cmf.org.uk



cmf.nurses.midwives



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cmf.li/PrayerMate

humility

the L-plates are

Bex Lawton reminds us that, whatever our career stage, we all still need a little help

UALIFIED

hen Lanswered the phone I would say, 'A&E, student nurse speaking'. Which was short for, 'Accident and Emergency, I'm answering

the phone because I'm closest and want to be proactive, but don't ask me anything too complicated or expect too much from me. I'm still learning!'. Was it just my imagination? Or did the person on the end of the line use a tone of voice with me like, 'Can you pass me on to your Mummy or Daddy?' when they asked to speak to a staff nurse? Well, the time for hiding behind my turquoise-blue student uniform is over. I have my PIN. And a licence to practise nursing. And I am grown-up nurse.

Why is it when I passed my driving test, I could swap my L-plates for P-plates to show other drivers I was new. Give me a little space when I manoeuvre. Have patience with me. Show grace. But in nursing our L-plates are ripped off and we're now staff nurses. From nought to sixty in the fast lane. Where are my nursing P-plates? When I introduce myself to my patients, 'Good morning, my name's Bex. I'm your nurse for the day', I want to caveat it with 'be gentle with me, I'm new'. I wonder how long I can say 'I'm new'. Just for the first few months? Six months maybe? The first year? If I had a pound for every time I said, 'Please bear with me, I'll just confer with a colleague', I'd be the richest nurse that ever lived. Trying to give off the air of confidence and professionalism, whilst manically treading water underneath.

But then, I attune my ear to the rest of the team. Even the deputy sisters ask each other questions. Part-time staff check bleep numbers with full-time staff. Experienced nurses check with newbies how to use the new piece of equipment and ask what the new policy is. So, I remind myself, I don't need to pretend to know everything. I'm still 'a learner' in what happens to be a whole team of learners. And although it's a vulnerable thing to say, 'I don't know' or 'I need help?', I won't be fearful of what others might think of me. I will not put unrealistic expectations on myself.

Lord, will you keep me honest and humble. Thank you for how far I've come. Keep growing me and moving me in the right direction. This is the prayer of a courageous, newly-qualified nurse.

Bex Lawton is a paediatric nurse in Oxford and is CMF's Head of Nurses and Midwives confidence

He's got your back!

Lizzie Chitty shares her reliance on God in tight situations ou got this! Hopefully, this is what your cheer squad (colleagues, family, church groups, etc.) are saying to you as you take your first steps as a newly qualified nurse or midwife. In my experience, though, God wants to say, 'I've got you'.

My dream of nursing in French-speaking Africa started at age 16. However, if you had asked me then what I thought that would look like, the answer would not have been 'working onboard the world's largest civilian hospital ship'.

As a newly qualified nurse, I remember the frustration of feeling nowhere near my dream, as I knew that I had at least two years of practising before I could spread my wings. Not to mention the fact that I still didn't have any idea what it was that I was working towards. The relief at getting to the end of one chapter turned quickly into wondering if I had taken the right first job for my dream to come true.

It soon became clear how important it was to stay in my first job as a surgical ward nurse for what ended up being three years. I thought it was just a starting point that I would quickly move on from once my career was mapped out. Well, that never happened! God knows how much I love surprises and those skills were exactly what I needed to get started.

Psalm 139 has sustained me throughout my career at all stages. We are reminded there that God is with us, his spirit and his presence go with us, even if, like me, you 'settle on the far side of the sea'. (v9) He watches over us when we walk onto the ward for a night shift after getting zero sleep during the day (v3). I have experienced his love walking up the gangway of the Mercy Ship; not just in the joy of using my skills to serve my patients, but in the community onboard and in the cultures we served. I have seen his hand in every step I have taken on this journey, even when I couldn't see the endgame.

God loves you; he knows exactly what you need, and he is always by your side. Make sure you don't forget to take that knowledge with you, along with your pens and fob watch!

Lizzie Chitty is a Theatre Nurse working in Nottingham and a CMF Associate Staff Worker for nurses and midwives, focusing on those with a global connection



Lorna Mensah is awed at the character of God revealed to us as we care for our patients

awe

e clock in and clock out. Shift after shift, we go through the motions and flop into bed at the end of each hard day. Yet how

many times do we stop to consider the beauty and gifts all around us?

As healthcare professionals, we have a unique privilege to study both the complexities of the human body and to see them in action. Seeing the wonder in creation in the human body is a great gift. As we reflect God's image and value each life for which we care, this in turn shows the value he places on each life.

We know that if Christ is in our patients, it should change the way we treat them. If the glory of God is displayed in each medical phenomenon, how should that change the way we talk about the body? Can our awe and respect for the human body itself become a witness? For the human body is a work of art by a divine creator, and a work of beauty. Beauty is placed in this world by God to draw us to wonder. And wonder, in turn, is to naturally overflow into our ultimate privilege as humans created in God's image – worship. Beauty is, therefore, an incredible gift and a signpost to point us back to the one who is ultimately beautiful.

Creation declares the glory of God. Do you hear the song of God's healing power as you watch blood clot before your eyes? Or feel the completeness of regeneration when you feel a baby moving beneath your hands? When you see a mother kneeling by her daughter's bedside, do you feel the strength of the Father's love for you? Or does the complexity of surgery fill you with awe at the one who created the body?

Let us lift our eyes and our hearts to see the beauty of the Lord in all that is in every room of every hospital, theatre room, and clinic. Let us view our unique position that allows us these glimpses into the wonder of the human body as an opportunity to see the glory of God more fully all around us. And may that overflow into lives of worship, love, and adoration for our creator God.

Lorna Mensah is a midwife living in Hull

reflection

midwife

Victoria Hutchinson reflects on the challenges of taking up midwifery as a career in mid-life

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Can I be newly anything aged 37?

They say that life begins at 40 But I'm not feeling too sure and I'm having my doubts

Will I be accepted on the wards? Will I hack the pace? Will I know how to be, Mature me? Not a has-been who's past it, a second-rate choice But a middle-aged midwife, life-experienced and self-assured?

I've loved all the training Forged relationships and bonds Fed on research and evidence I've passed all the exams In spite of the years In spite of the lag Between my O level days And my midwives' bag. I saw mum's eyebrows rise back then When I shared my hesitant vision Was God really calling me To this privileged profession Aged thirty-seven? Oh Lord, how you teach me each day of my life To depend on your strength as I do life as midwife You give me passion, compassion and the heart to care You give me competence, skills and the courage to dare You give me energy and drive and a team to be part of You give me awe and respect and an ocean of love You bless me with joy, the breath of new life in my hands You pour out of me, relentless, to the relentless demands. You equip and enable, you go before And when I am flagging, your mercy is more.

So, if you are qualifying, qualified, yet questioning your place Know that God goes before you You walk in his arms of grace

Victoria Hutchinson is a recently retired midwife in the Midlands

crash Call psalm

Onahi Idikwu finds Psalm 28 helping her to pray in a resus emergency

our legs are running before you process what is happening. A default response to the crash bell going off in resus. Your heart pounds almost as fast as your feet, as you rush towards the chaos. You see the senior nurse jaw-thrusting the patient, but your feet remain rooted, unsure what your hands can bring. You're a newly-qualified nurse, after all, and this is your first crash call. Dread consumes you but then you remember, you too have a call you can put out.

Your mind flashes to Psalm 28; you read it this morning on the bus to work 'To you, Lord, I call; you are my Rock...' (v.1)

prayer

'Roc!' you hear the anaesthetist say, 'I need a dose of *rocuronium*, we need to prepare for a rapid sequence induction. He's been seizing for 30 minutes. Nothing we've given seems to be working.'

The room suddenly feels smaller,

as the alarms grow louder, each demanding your attention.

Each reminding you, you're running out of time.

Though you do not understand all that is happening, you know enough to sense he is slipping away.

The heart wrenching shriek that escapes his mother's lips, as she crumbles to the floor, reveals she senses it too.

You lean on the crash trolley as panic scurries up your spine and sweat drips down your brow.

You feel out of your depth.

But you too have a cry you can release

Lord 'Hear my cry for mercy as I call to you for help'. (v.2a)

Please God, calm my nerves.

Another nurse hands you the observation chart as she rushes to second check the rocuronium.

Grateful for something to do, your shaking hands begin to document the observations

Lord, please give us wisdom as we care for this child and bring healing

The infusion pump beeps, showing the phenytoin has finished. The beeps are drowned out by the groans and then cries of the child.

His mum rises from where she had fallen and grips his face, her eyes weeping with joy.

You hear the lead consultant say, 'hold intubation, he has stopped seizing.' The collective sigh of relief is almost audible as focus turns from resuscitation to monitoring and debriefing.

Your mind returns to the psalm, 'The Lord is my strength and my shield; My heart trusts in him, and he helps me'. (v.7a)

Father, thank you for answering my cry for help.

Onahi Idikwu is a paediatric and neonatal nurse in London

poem

how can I do this?

Lucy Honeysett shares her experience of dealing with mortality as a new nurse.

Lord, how can I do this?

Lord, how can I do this? It feels like you're asking me to stay with this lady. I want to help. I want her to know she's precious and not forgotten. I feel privileged to be present. I want her to know you. But, Lord, how can I do this?

How can I watch this lady die without knowing? I don't know her. Does she know you? Does she love you? Does she know where she's going? As she enters eternity now, is she entering your presence? Lord, how can I do this?

I hear you whisper to me: I am with you. I will help you. I don't need you to have the answers. Sometimes you'll never know. But come with me. Together, **we** can do this. 🍎 when the going gets to the base of the bas

Jane Colling encourages us to focus on Christ in difficult time

self-ca

n qualifying as a nurse, the initial congratulations and feeling of achievement was great. At last, I had a vocation, a niche and a purpose,

something to offer. I quickly learned, however, that this was just the beginning of my learning, and there were exciting and challenging times ahead.

I'd like to share three things that have been helpful to me during my nursing journey. Keep

balanced, keep connected, and keep going. I share them with you in the hope that they will inspire you to include things in your 'nursing toolkit' that will serve you well and enable you to develop a work-life balance with Christ at the centre.

keep balanced

When our patients do well, we have a sense of achievement and job satisfaction. But, when they suffer, we experience sadness, compassion, and a host of emotions that

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make us human. A skill in nursing is to know when to let go, when to commit the person over to God and say, 'my job is done'. Working within a team, we are making our contribution, whilst being ready to ask others for their expertise at the right time. We learn to delegate care to our peers when we go off-shift, and ultimately recognise that God is responsible for the patient, and we must place them in his hands. Developing this balance, we will be better able to be fully present when we are at work, but release our responsibilities when the job is done. Work-life balance is the familiar phrase. Perhaps as Christians, we can call it finding balance in God, to be the best that we can be, whilst recognising we are only part of the picture.

keep connected

On the frontline of your workplace? John 15:1-11 reminds us to 'remain in Jesus'. We can do this simply by spending time with him, in his Word, in prayer, and in fellowship with others who know him and seek to grow in him. It is good to spend time doing activities that bring us closer to him. We need to be watered, fed, and planted in the right soil. Give thought on a regular basis to where you are planted, your church, your family and social sphere. How are you making sure that God waters you with the refreshing water of his presence and Holy Spirit? It's not just for the benefit of others that we need to be planted in the right place and regularly watered, but also that we ourselves may know what it is to live in the freedom and joy of God's children 'that my joy may be in you and that your joy may be complete'. (John 15:11)

keep going

As The Message version of 1 Corinthians 12:12-18 says, 'We each used to independently call our own shots, but then we entered into a large and integrated life and he has the final say in everything...Each of us is now part of his resurrection body, refreshed and sustained at one fountain – his Spirit – where we all come to drink...As it is, we see that God has carefully placed each part of the body right where he wanted it.'

We are God's workmanship, created in Christ Jesus for good works prepared for us beforehand (Ephesians 2:10). It's far too easy to allow ourselves to feel insignificant when we are new to a team, when we are a small part of what feels like a very big picture. As we grow in Christ, we realise that our security lies in our identity in Christ. First and foremost, we go to work to serve him, and we find our niche and purpose in him. Affirmation from colleagues and patients is appreciated and necessary, but when we don't receive this we are still a valuable team member, because we know ultimately it is Christ we are serving.

So how do we keep positive, strong, and functioning well in what is fundamentally a broken and struggling system? We keep our eyes on Jesus who is concerned with perfecting us within our workplaces. Nothing shocks him and he continues to pour out his mercy and justice through us. We are light, truth, and life, if we remain in him (John 15:3-5), he will shine through us and he will make sure our life bears fruit for him.

The psalms are full of instructive and encouraging ways to keep going when things are tough. Ways like hiding God's Word in our hearts, repeating truth phrases as a source of strength, and keeping your eyes fixed on Jesus. Stop worrying too much about the things that are temporary, and ask God to give you his perspective when things feel difficult, negative, or overwhelming.

May God bless you and keep you as you live and speak for Jesus in your new roles!

Jane Colling is an Advanced Nurse Practitioner in a general practice and CMF's Peer Support Coordinator

pastora

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our team of Pastoral Partners are available to:

> WEII when you need support with the challenges you are facing

pray¹

for you to grow and flourish in Christ in your profession

signpost when necessay to professional support and care

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poem

those

That first drug error The first time you cry on shift The first complaint made about you And the first patient that you lose.

The funeral you attend And the safeguarding case That first crash call you put out And the incident form you fill in.

Gosh, we never forget these firsts. They shape our first years qualified and they set us up for the years ahead.

But they can make us questions ourselves, our training, our God.

God, why is this so hard? And, will it always be? Will I always carry grief like this? Will it always affect me?

My answer is... ...I hope so. I hope you don't become thick skinned, or numb to another's pain. I hope your heart stays fragile actually That your heart breaks for what breaks his again and again

That you learn to forgive yourself That you carry people, but only to give them to God in prayer That you remember that you are not God Only he is perfect Only he sustains Only he holds all things together

I hope lament finds a way into your worship And you find freedom to question him. That you find others who are doing it too Who are inspiring and encouraging

I pray that you never lose your love for God And for being his hope in hopeless places That you cling to the faith, joy, and love that he gave you

And that you become the nurse or midwife you're meant to be.

Bex Lawton

sense

peace

Emma Smith recounts how God equipped her to deal with a neonatal emergency

s I walked up the steps to the birth centre for my night shift, I prayed (as I always try to before each shift) that the Lord would help me be a good and safe midwife. A few hours into my night shift, a lady expecting her first baby was admitted to the birth centre in early labour. Expecting that the birth might be hours away, I offered her pethidine, commonly given for analgesia in labour. Shortly after the pethidine was administered, her labour unexpectedly progressed rapidly, and she started to deliver. Although a rare complication of pethidine, being an opioid, it can sometimes cause respiratory depression in babies if given close to delivery, and they may need resuscitation. The birth centre is a low-risk environment for mothers and babies without complications, and as most healthy babies will be born not requiring any form of resuscitation, the resuscitare (a machine for neonatal resuscitation) is kept outside the labour rooms should it be needed.



over my years as a midwife, I have frequently known God's help in my work, and at times his protection

Knowing that this mother had received pethidine close to her delivery, I chose to bring the resuscitare directly outside the room, just in case.

The instant this baby was delivered, I knew something was wrong, as it was pale, floppy, and not breathing. I immediately asked my assisting midwife to bring the resuscitare into the room and put out an emergency call.

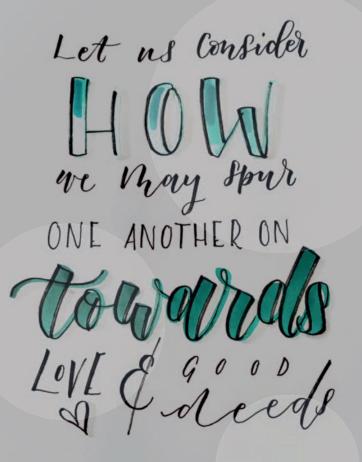
Thankfully, the baby responded very quickly to resuscitation and required no further assistance. It was only on my own reflection later that I realised I had been anticipating that emergency, and, dare I say it, a part of me almost knew it was going to happen. How did I know? There had been no indication in the fetal heart monitoring prior to birth that this baby might need help at delivery. The more I thought about it, the more I had to conclude that this 'sixth sense', as some might call it, could only be God- given. Sceptics might say that it was purely my training that prompted me to bring resuscitation equipment close by, but how could they then explain that sense I had that I would meet with an emergency? My heart rose in thankfulness towards the Lord for his help, as a delay in getting the resuscitare into the room could have resulted in a poor outcome for the baby.

Over my years as a midwife, I have frequently known God's help in my work, and at times his protection. I am often reminded of the verse, 'He guided them safely, so they were unafraid'. (Psalm 78:53) He takes seriously our cries for help, and while he still allows difficult times, it is possible to practice and live without fear because of our experience of his closeness and help.

So, those of you who find yourselves with a quaking heart, maybe as newly qualified or simply just battling with anxiety, have courage and remember these words in 1 Chronicles 12:18, 'Peace, peace to you, and peace to your helpers! For your God helps you.' (English Standard Version)

Emma Smith is a midwife in Surrey, England

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llustration: Sophie E 21

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money

managing your MONEY Liz Capper offers sage advice on

financial management habits to get into early in your career

re you a saver or spender? Since childhood you will have developed a relationship with money. As you commence your career, it's important to get a grip on money management.

Early on, a Christian uncle talked to me about regularly putting aside money for God's work. He introduced me to a precursor of Stewardship,¹ and encouraged me to set up a small standing order, month by month. Then I nominated the Christian work I wanted it to go to. This has been so enriching, a blessing, and a privilege to contribute to initiatives, and to respond to the Holy Spirit's prompts. It started small but has risen over the years, where possible setting aside ten per cent of my money.

Also, I started saving small amounts in a Building Society type fund. Nowadays, there are many such funds or ISAs. I chose ones from which I could not withdraw for a length of time, as a discipline! Alongside that, I set up an easy-access fund for the charges I knew

Putting aside small amounts became ingrained. It meant thinking about those little treats, such as coffees or pizzas.

I think contactless cards and paperless bank statements contribute to getting into real trouble. Rent, food, energy costs, travel, and car expenses easily run away with our money. Adverts scream temptation – you must have this! You're worth it! Work out how much you have each month and budget accordingly. Getting into debt is so easy and creates so much grief. Where possible, ask you bank for paper statements each month to make you check.

As Christians, we need to prioritise ensuring our money goes to projects led by Christians. Begging letters flood in for very worthy causes, but others can give to them.

We are all noticing the scary escalation of the cost of living, but we need to remember that, in contrast with the vast proportion of our world's people, we are well off. We are privileged, so be thankful to God and use his money wisely.

Liz Capper is a former Chief Nurse at Hammersmith Hospital in London, and a former CMF and NCFI Trustee

reference 1. stewardship.org.uk

were coming through the year. As the money went automatically from my bank, I got used to considering only the remainder as available expenditure.

So many things are deemed essential today: smartphones, TVs, laptops, holidays, etc. In the sixties, we had far fewer belongings. To give you an idea, we were instructed to bring a mug and a saucepan when we moved into the nurses home, as I started training. My Mother sent me off with four mugs so that I could be hospitable. I was considered rich!

coming to WORK in the UK

Spotlight interviews Dulce Dalangin-Rona about her experience of moving to the UK to work as a nurse

Spotlight: Tell us, why did you become a nurse?

Dulce: I had no background in medical things; I worked for years in a large mission organisation and when doing missionary trips, I began to see the huge need for medical help. In one country I went to, if a person was injured on the street, they were just left there, as the person who took them to hospital would be responsible for paying all the bills.

I knew there had to be a practical element to me sharing the gospel. So I trained as a nurse in my country, the Philippines, with the goal of becoming a missionary nurse.

S: Did you always want to work in the UK?

D: No. I had been to the UK with the missionary organisation I worked for, but I really felt that I wanted to be in rural Cambodia. However, God had other plans! While in the UK, he spoke clearly to me that he wanted me to nurse in Britain, but I was in denial. I was 40 and didn't want to be a nurse in a developed country. But I was really convicted by the Holy Spirit, and so, at the age of 43, after a lot of paperwork and hard work to get my NMC registration, I became a UK registered nurse. I didn't really plan to, but God did.

S: You came to the UK as a newly qualified nurse – how did you feel starting a new job in a new country?

D: I hadn't practiced for that long in the Philippines but had tried to get as much experience as possible so I could come to the UK. It felt scary, intimidating, like everything was new. No amount of searching online can prepare you mentally for what you face. I had to set aside everything I knew.

S: What were some of the challenges you faced and how did God help you in these challenges?

D: Language, culture, and people's expectations. Conversational English is very different, so I had to adapt and learn it quickly. Learning British history has been useful for adapting to the culture. I want to be faithful to the Lord in what he has put in front of me. If I had gone to the mountains with no electricity or running water it would be the same, I would need to be faithful to God. So I have bought a TV licence and radio, even though I naturally wouldn't do those things, so I can learn more about the culture. Although the pay is OK here, it is hard with the cost of living to deal with people's expectations. When doubting my capabilities in the middle of a shift, I always commune with the Lord, because I know he called me here to nurse. It is a privilege to be a Christian and a nurse!

S: What do you love about working as a nurse in the UK?

D: I love how safe nursing is in the UK compared with other countries. There are protocols and laws, and although these do not always get followed properly, the laws are still there! There are also good training opportunities.

S: What would you say to a newly qualified nurse or midwife starting out in the UK?

D: Hang in there! God did not make a mistake making you a nurse, and you should not give up just because there are obstacles or difficulties in the way. Always be teachable and have the humility to accept corrections. You need to believe in faith that as a Christian nurse you have the mind of Christ. You may make mistakes and have to complete all the paperwork that goes with that, but God called you into nursing and you will thrive if you walk with him and remember that your identity is in Christ. It is a privilege to be a Christian nurse or midwife! **S**: How can we best pray for internationally trained Christian nurses and midwives in the UK?

D: Pray that we remain true to ourselves. International nurses have three worlds – their own culture, the UK culture, and the Christian culture. Pray that we identify with where God has called us, but not lose ourselves in the process. Pray for confidence that we have something to offer. People put you on a pedestal for having passed all the exams and got registered with the NMC, but what is it? Just a number and a piece of paper! Pray we would be faithful and humble.

After all these years, God has brought me in a full circle. I always thought I would be serving in the community, and although I thought it would be in a very different community to the UK, God had other plans, and I am now a community nurse and phlebotomist. Trust God – you never know where he will lead you!

S: Thank you, Dulce, for taking the time to talk with us and share your experiences and wisdom.

you've made it! what now?

tips

Gemma Griffiths shares her top tips for newly qualified midwives

oo Hoo! You have survived your midwifery training and are now a newly qualified midwife (NQM)!

Praise God for bringing you through the ups and downs of placements, essays, and dissertations these past three years. And for the births you've witnessed, the forty plus babies you've delivered, and the hundreds of women and their families you've cared for in the antenatal and postnatal periods. How many times did you refresh that page on the NMC website as you waited for your PIN number to come through? Tens, if not hundreds of times? And now that green tick sits next to your name telling the world that you are a registered midwife! What a joy it is to receive that first job offer, attend the trust induction, and then get kitted out in a brand-new uniform, complete with a shiny name badge that says 'preceptor midwife' on it (cue selfies and Insta posts galore). But now what?

There is a good chance that you may be feeling a mixture of excitement, fear, and sheer dread at the prospect of looking after women and their babies without the comfort blanket of a qualified midwife mentoring you. Rest assured. That is very normal. Here are a few 'top tips' for an NQM:



Firstly, and most importantly, **know that you are meant to be a midwife**. You may be feeling completely out of your depth, like a fraud or an imposter, but Ephesians 2:10 says, 'For we are God's handiwork, created in Christ Jesus to do good works, which God prepared in advance for us to do'. God has planned for you to be a good midwife. He has given you the skills to get through the training and now he goes before you in that clinic, on that ward, or at that delivery suite. You are now working on God's PIN number, and he is the ultimate mentor. Secondly, you are not expected to know everything! Being a midwife involves continuous learning; new pumps, new guidelines, in fact every day is a learning day. The NMC principles of preceptorship state 'the preceptor should receive ongoing support and actively engage in professional development'. Do not be afraid to ask questions (more than once if needed!) and keep your preceptorship portfolio up to date to consolidate your learning and evidence your development. Remember to work on your spiritual development too; try and link up with other Christian healthcare professionals in your trust, and attend church regularly for support and encouragement.



Thirdly, **if it doesn't seem right, get help**. If you are on a ward, pull that call bell early. If you are in the community, escalate to a senior colleague or team leader. It is always better to have too much help than no help at all. And on the topic of escalation, try and underpin every part of your working day with prayer; before, during, and after a shift. God is our ultimate helper and will always be available when you call him. Finally, although being a midwife is a wonderful calling, **try and maintain a healthy work-life balance**. Invest time in a hobby, spend time with loved ones, and eat well to avoid work-related stress and burnout. And don't forget to protect time for Sabbath rest; rest is part of the order that God has placed in creation, and is a time when we can reconnect with God, re-energise ourselves by the Holy Spirit, and relax in God's presence.

May God bless you in your midwifery adventures!

Gemma Griffiths is a Growth Assessment Protocol (GAP) Midwife in Northampton and CMF Nurses and Midwives Staffworker practice

prioritise people

Jane Colling looks at the NMC code and how it relates to our faith



he reason I felt prompted to write this short article was to bless the reader with the fact that the professional standards we seek to uphold are, in many ways, reflective of the life of Jesus and the way he would have us honour him in our professions. Here are just a few thoughts to encourage you to revisit 'The Code' in the context of your work as a Christian healthcare professional.

prioitise people

Jesus was an expert at this, people were the very essence of his life. He had followers who he chose and valued individually. He spent time with all kinds of people, gave us the ultimate example of inclusivity and embracing diversity, and was respectful and responsive to the needs of the people he lived alongside.

listen to people Jesus spent quality time with people. In so doing, he showed them that he valued them. Jesus spent time talking to people (John 4:7-14), he dined with people (Luke 19:1-10), he went to visit friends (Luke 10:38-42), he relaxed with them, and he was available in their difficult and happy times. As nurses and midwives, we have the privilege of spending time with people, often in the most vulnerable seasons of their lives. If at these times we can be available, give time and listen authentically to their story, they may experience the love of Jesus, be blessed by our care, and come to a better understanding of what he can offer to them.

respond to the whole person

Jesus was concerned with the whole person, with their complete wellbeing. He cared about their physical needs, providing food for them when they were hungry (Matthew 14:13-21). He related to the stresses and strains that he could see in people's lives. Jesus showed us a unique way of empathising with people and showing them compassion. He was an advocate for the weak and vulnerable, reaching out to them.

In summary, I would like to reflect on our commission as Christian nurses and midwives. We are a part of the body of Christ on earth. Let's remember to truly prioritise people, because that is what our God does.

Jane Colling is an Advanced Nurse Practitioner in a general practice and worked as CMF's Peer Support Coordinator

dealing with mistakes, walking in light

Bethany Fuller explains that how we deal with mistakes is more important than the mistake itself

ave you ever made a mistake, and just wished that the ground would swallow you up. It can be devastating. I felt like an imposter anyway, and this

just confirms it – I definitely should not be qualified to do this job!

We will all make mistakes at some point in our practice – you may never forget the first one you make. God-willing, they will only be small ones, but he is able to help us deal with the big ones too. When I was two-months qualified, I looked after a patient having a blood transfusion and didn't check the infusion site for 40 minutes because I was a stressed, newly qualified, and on an understaffed unit looking after multiple complex patients – sound familiar? When I did check, I discovered the canula had tissued and the pump had failed to alarm, so my patient had a large haematoma that took weeks to resolve (but was otherwise OK!). A person who doesn't make a mistake at some point in their lives has either already reached perfection (!) or is totally unaware of self. Basically, we all make mistakes. But how do we deal with making mistakes in practice as a Christian? Does it look different to how our colleagues deal with it? Should I even make a mistake as a Christian? Shouldn't I be this faultless model of a nurse or midwife who does everything perfectly because I am being an example of Christ to my colleagues?

Thankfully, we don't have to look too far in Scripture to find out that God uses imperfect people to accomplish his perfect purposes. Just think of boastful Joseph, scared and lying Abraham, and impetuous Peter. But all these people have one thing in common – they came to know the Lord, and as a result were changed, beginning to see themselves as they truly were in God's sight. When we see God and know him, he brings us to our knees and makes us humble before his incredible majesty – and our response should be utter faith and dependence on him, knowing that any goodness we have is because of him, and not a product of our self-righteousness.

There are two sorts of mistakes we can make in our work. We can make an error in practice, but our response can lead to a second and more serious error of falling into sin. We can try to cover up an error, and somehow feel like we can atone for it, hoping no one notices. In effect, when we do this, we lie, not only to ourselves, but to all those around us. And lying is a far greater error in eternal terms than giving 1g of paracetamol when only 500mg was prescribed. It compromises integrity and dulls conscience, and in biblical terms, that's a big deal. Walk in the light, however tempted you are to save face and avoid embarrassment.

If you make a mistake in practice, remember these three things:

- Acknowledge it in humility you serve Christ and are called to walk in holiness and light. God has put your seniors there for your good, so ask for their help.
- Trust God it is God who validates you, not your colleagues or patients. Trust him for his grace.
- Pray for help ask God to help you learn to not make that mistake again and give you confidence to care for your patients well.

As you seek to walk in integrity and faith, God will help you. Remember, keep your ethical edge sharp and don't allow your conscience to become dull. Let's walk in the light as he is in the light, knowing that our worth and validation is in Christ alone!

Bethany Fuller is a Staff Nurse in Surrey, and worked as CMF's Peer Support Coordinator for Newly Qualified Nurses and Midwives during 2023 witness

welcomer's WhatsApp





to share or not to share

Georgie Coster looks at how we can be public with our faith in the workplace

f you're reading this, you're probably a newly qualified nurse or midwife. And I also hazard a guess that one of your most pressing questions is something like this: Can I share the gospel with my patients? You might have a longer list of questions about boundaries. Can I pray with my patients? Am I even allowed to tell my patients that I'm a Christian, or is that totally inappropriate?

Have you heard of the NMC Code? That's a rhetorical question. You and I both know that

you've heard more about it than you ever thought possible. And that's only right. It is our guide for professional practice and behaviour, designed to protect our patients from substandard care and malpractice.

The Code tells you that as a nurse or midwife, you must 'make sure you do not express your personal beliefs (including political, religious or moral beliefs) to people in an inappropriate way.'¹ Those words could send a shiver down the spine of even an experienced nurse or midwife, let alone one newly qualified.

sp_tlight

The prospect of having the PIN you've worked so hard for snatched from you straight away may make you want to vow never to mention the name of Jesus when you're on duty.

Did you know, that's how many of your Christian nurse and midwife colleagues feel? Silenced. Gagged, even. Knowing they have words of life – words that can point to the most reliable source of peace, joy, and hope there is – but feeling totally unable to share them. That can be very difficult. Must it be that way?

I think the mistake many of us make is forgetting those final four words of instruction from the NMC: *'in an inappropriate way'*. Take those words out of the sentence and the message changes entirely. But the NMC chose to put them there, and that tells me that they believe it is possible for nurses and midwives to express their personal beliefs (including political, religious, and moral beliefs) to people in a way that is appropriate. The NMC are not asking us to be undercover Christians. Isn't that encouraging?

I love these words of Jesus – as if he hears our sigh of relief and reassures us that we can indeed call off the search for a basket big enough to hide in. You are the light of the world. A town built on a hill cannot be hidden. Neither do people light a lamp and put it under a bowl. Instead they put it on its stand, and it gives light to everyone in the house. In the same way, let your light shine before others, that they may see your good deeds and glorify your Father in heaven. (Matthew 5:14-16)

Are you asking those questions I mentioned at the start of this article? They were pressing questions for me as a newly qualified nurse too. I found very practical answers by doing a Saline Solution course, aimed at equipping Christian healthcare workers to be witnesses for Jesus in the workplace. The course was so helpful to me that I later trained to teach it myself, and I think every Christian healthcare professional should do it at least once!

To find out more about Saline Solution, visit *cmf.li/Saline*, or to check if there's an upcoming course near you or online, visit *cmf.li/NAMEvents* or email *stephanie.moss@cmf.org.uk*.

Georgie Coster is a staff nurse in a midlands Critical Care Unit

reference

1. Nursing and Midwifery Council. The Code. January 2015. Updated October 2018. nmc.org.uk/standards/code

liturgy toolbelt

liturgy for the end of a shocker

Bex Lawton shares prayers for us to use at the end of a tough shift

end of a shocker

Today, as been one of the busiest shifts in my memory. It has been chaotic and unsafe. Yet, this I call to mind. This I put on my lips...

> 'I believe that you are Sovereign' I put my trust in you.

Today, I have prayed for healing but then watched my patient deteriorate. Yet, this I call to mind. This I put on my lips...

> 'I believe that you are faithful' I put my trust in you.

Today, stories of trauma were disclosed to me that have been disturbing and deeply distressing. Yet this I call to mind. This I put on my lips...

> 'I believe that you are good' I put my trust in you.

Today, I have heard your name slandered and misused. I've heard your people mocked Yet this I call to mind. This I put on my lips...

> 'I believe that you are holy' I put my trust in you.

Today, I have been shouted and sworn at. Disappointed and grieving relatives throw hate at me.

Yet this I call to mind. This I put on my lips...

'I believe that you are love' I put my trust in you.

Today, I have doubted my ability to nurse anymore. At times I have doubted who you say you are too.

Yet this I call to mind. This I put on my lips...

'I believe that you are the one true God' I put my trust in you.

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