

Winter 2021

for today's Christian nurses
& midwives

spotlight



- the roller-coaster ride of nursing & midwifery
- celebrating the highs
- commemorating the the lows

spotlight

is the nurses' & midwives' journal of the Christian Medical Fellowship

A company limited by guarantee
Registered in England no. 6949436
Registered Charity no. 1131658

Registered office:

6 Marshalsea Road, London SE11HL

Tel 020 7234 9660

Email admin@cmf.org.uk

Web cmf.org.uk

President

John Wyatt MD FRCPCH

Chair

Euan McRorie FRCP

Treasurer

Philip Taylor MA (Oxon)

Chief Executive

Mark Pickering MRCCP

Subscriptions

Spotlight is sent to all nurse and midwife members of CMF as part of the benefits of membership.

Contributions

The editors welcome original contributions, which have both Christian and nursing or midwifery content. Advice for preparation is available on request.

Authors have reasonable freedom of expression of opinion in so far as their material is consonant with the Christian faith as recorded in the Bible. Views expressed are not necessarily those of the publishers.

Editors

Steve Fouch

Bex Lawton

Pippa Peppiatt

Design

S2 Design & Advertising Ltd

020 8771 9108 s2.design

Copyright

The Christian Medical Fellowship, London. All rights reserved. Except for a few copies for private study, no part of this publication may be reproduced, stored in a retrieval system, or transmitted, in any form or by any means, electronic, mechanical, photocopying, recording or otherwise, without the prior permission of the Christian Medical Fellowship.

Unless otherwise stated, Scripture quotations taken from The Holy Bible, New International Version Anglicised Copyright © 1979, 1984, 2011 Biblica. Used by permission of Hodder & Stoughton Publishers, an Hachette UK company. All rights reserved. 'NIV' is a registered trademark of Biblica.

UK trademark number 1448790.



inside

4 letter to my newly qualified self

6 on this our battle ground

10 Jesus also wept

12 he's coming for me

14 a patient I rejoiced over

16 a patient I learned from

19 is our God able?

22 lead us to the rock

24 the numbers game

26 the good, the bad & the ugly

29 work hard, play hard

30 under the spotlight: midwifery overseas

33 liturgy toolbelt

editorial: ticket to ride

I am not one for heights, yet a couple of years ago, my daughter persuaded me to join her on a terrifying rollercoaster ride named the Rip Ride Rockit (at Universal Studios). This rollercoaster travelled at 65 mph speeds, 90-degree angles, and the only thing that kept me going was having Gloria Gaynor's '*I Will Survive*' blasted through my headphones – but still not quite drowning out my shrieks!

I overheard some nurses recently talk about their job as a rollercoaster ride, full of ups and downs. Being with patients at the most vulnerable and significant times of their lives as a nurse or a midwife is a precious, unique, and rich thing. It can bring such joy and job satisfaction.

Yet the struggle of 'too much to do in too little time', of compassion fatigue, disappointments or deaths, while repeatedly returning home exhausted, can be real lows.



Pippa Peppiatt, CMF Head of Nurses & Midwives

Pippa trained as a nurse. She has planted a church for students with her husband, set up a charity for street kids in Uganda, and has been a Friends International Student Worker.

In this edition of *Spotlight*, various nurses and midwives have written short articles reflecting on some of these ups and downs, patients they rejoiced over, and patients they wept over.

Although we may have peaks and troughs, joys and discouragements in our roles, thank God that his love is constant, and his grace and help are steadfast. On the days when our hearts are troubled, he promises to '*quiet [us] with his love*' (Zephaniah 3:17, ESV); at times of grief, he promises to '*heal the brokenhearted*' (Psalm 147:3); and at times of life and healing, he rejoices with us (Zephaniah 3:17).

Didn't you realise that God likes a rollercoaster?! 🎢

Pippa

Pippa

keep updated

Keep up to date with on our events like National Student Conference or NAMfest at cmf.org.uk/nurses/events.

✉ nursesandmidwives@cmf.org.uk

📷 [cmf.nurses.midwives](https://www.instagram.com/cmf.nurses.midwives)

📘 [cmf.nurses.midwives](https://www.facebook.com/cmf.nurses.midwives)

🐦 @CMFMidwifeNurse

A woman with dark curly hair, wearing a blue surgical cap and blue scrubs, is focused on writing in a notebook. She is holding a black pen. The background is a bright, clinical setting. The image is overlaid with several teal-colored circles of varying sizes. In the top left corner, there is a circular graphic made of black dots surrounding the word 'starting'.

starting

letter

to my newly
qualified
self

Onahi Idikwu encourages her younger self as she looks back to her first day as a staff nurse

Firstly, well done! You've done it. All those hours spent acquiring new nursing skills has led you to this moment. You stand at the doors of your new hospital on your first day. Now all that is left to do is walk in. Where excitement once sat, anticipation now stands, and you feel dread lining up to take its place. How many times will you get lost in this unfamiliar environment? How often will you have to reach for for the notebook tucked securely in your scrub pocket for the code to the staff room? How many times will you feel out of your depth this week? What if this team doesn't like you?

You feel your breathing quicken and your palms grease with sweat as these questions race through your mind, almost as loud as the traffic that zooms past behind you. Someone honks their car and reminds you that you're no longer in the tranquil childhood town where you trained.

You are now in the Capital. Everyone seems to be in a rush here, which you will be too if you don't walk through these doors now. You feel the gentle presence of your Heavenly Father usher you forward. Just take one step after the other. It's normal to feel intimidated. God is holding you. It's normal to wonder if you will be good

enough. God is with you and will help you. He who brought you this far will not desert you now.


You venture into the hallway. The bright lights, a little harsher than you remember from the open day, reflect off the spotless floors. These pristine hallways that once inspired you to excel when you visited as a student now make you want to shrink back and hide as a newly qualified. What if it's too hard? What if these lights just expose how much you don't know? Imposter syndrome trickles down your spine like the sweat dripping down your back.

Spoiler alert: you will be okay! Yes, it might be very uncomfortable at first, but who grows in their comfort zone anyways? Show up shift after shift, and in due time, that dread you feel in the pit of your stomach will fade, and you will thrive. Yes, some people will be short with you But others will be kind and warm and will spend time teaching you.

You will do great! It's okay that you won't get it all first time around but just keep learning, bending, stretching. That is how you grow.

And never forget, God goes before you. He is beside you. And he goes behind you. He will help you. Lean on him always. 🌟

Onahi Idikwu is a paediatric and neonatal nurse in London



strength

On this our

battle ground

Victoria Hutchinson shares
some tips for thriving, not just
surviving in a pressurised clinical
environment

PART
1tips
for being
BATTLE
READY

Is it just me, or does each shift currently feel like entering a war zone? Steeling yourself before you dare set even one foot out of bed, dragging your body shower-wards weighed down by a heavy backpack of dread and clumsy hobnail boots? There's new chaos. New flaming arrows.

And whilst we wear the obligatory uniform, we didn't sign up as soldiers, did we? The Midwifery Army. And yet, going into the unit over the past year feels increasingly like serving in an ever-decreasing army. Our numbers are decimated. Casualties, stress, isolation, ill health, those looking for another route out. Escape while you can.

And all the time, as any good soldier will know, we remain ever prepared, on the ball and in active service, smiles and zeal on our faces, with alarm bells and call bells our backdrop of sirens

ACTION

Cast
ALL
your
ANXIETIES
on **HIM**
1 Peter 5:7

Fix your eyes on
JESUS
Hebrews 12:2-3

DELIGHT
in your
WEAKNESS
2 Corinthians 12

FEAR
NOT
Isaiah 41:10

BUILD
each other up
1 Thessalonians 5

Lie down in
GREEN
PASTURES
Psalm 23:1-4

PART
2

tips

for being
BATTLE
READY

HE
LOVES
YOU.
HE DIED
FOR YOU

WHY?

HE
CARES
FOR
YOU

HIS
POWER
IS MADE
PERFECT
IN WEAKNESS

HE WILL
HELP
YOU.
HE WILL
UPHOLD
YOU

WE
ARE THE
BODY
OF
CHRIST

HE IS OUR
SHEPHERD.
HE CALLS THE
WEARY
TO COME TO HIM

amidst the distant, shocked and vulnerable cries of new life and tears of joy.

This comparison might sound extreme, but I find myself on this battleground.

And on this battleground, I find myself crying out, *'Lord, I've nothing left to give'*.

The vocabulary in the Bible makes no mistake as we are told to *'put on the full armour of God'*, to *'remain steadfast under trial'*, to *'fight the good fight of the faith'* and to *'run with perseverance the race marked out for us'*.

Jesus does not whitewash over the less palatable truths of our earthly existence. Rather, he says to us *'in this world you will have trouble'*.

Maybe this difficult time on our wards isn't really unexpected. Maybe it's part of our fallen and broken world, in which disease and pandemics can take hold and turn our comfortable worlds upside down. And maybe the burning question right now is simply this: how do we, in faith, keep marching on?

We must never beat ourselves up for our implicitly human emotions of feeling spent, exhausted, incapable. But we do have

PART
3tips
for being
BATTLE
READY

someone to turn to. A Father who does not ask us to prove ourselves by what we do.
A Saviour whose grace has saved us.
A Lord, who provides us with armour.

In the place of burnout and weariness, God may be leading you beside quiet waters. Time out to refresh your soul. Take it!

On a day off, he may be inviting you to cease your chores and to sit at his feet. Be enveloped in his love!

As you park your car, he wants you to ask him for help and protection. Cry out to him!

As panic rises, standing at the full handover board, he whispers, *'do not be afraid, for I am your God; I will strengthen you'*. Receive him!

If you've absolutely nothing left, hear this: *'I am with you always.'*

He is ministering to us in every circumstance, never leaving us, urging us on with his resounding, glorious cry, *'But take heart, I have overcome the world!'*

Onward Christian soldiers! 🚩

Victoria Hutchinson is a Continuity of Care Team midwife in the midlands

HOW

READ A
GOSPEL.
READ JUST
ONE VERSE.
SING PRAISE
ON YOUR WAY TO
WORK

PRAY ON ALL
OCCASIONS
SHORT
ARROW
PRAYERS
HELP ME, LORD!

REMINDE
YOURSELF THAT THE
BATTLE
IS NOT YOURS BUT
GOD'S

ACKNOWLEDGE
THAT WE DO ALL
THINGS
THROUGH HIS
STRENGTH

MEET
TOGETHER.
PRAY FOR ONE
ANOTHER.
SEND VERSES TO
ENCOURAGE

TAKE
ANNUAL
LEAVE.
CUT DOWN ON EXTRA
SHIFTS.
REST IN
HIM



weeping


Jesus also wept

Victoria Hutchinson relates how the grief of a stillbirth led her back to reflecting on how Christ shares in our tears

We don't tend to cry in public. It's just too raw. Too honest. Too embarrassing for words. This was the battle I had one Sunday, sitting shoulder to shoulder, hemmed in before and behind, by my church family. Rejoicing in our Lord Jesus. Blasting out his praise with gladdened hearts and faces glowing with sabbath smiles. And how I love this time of corporate adoration and worship. And how I was struggling to suppress the deep, engulfing waves of grief that were pulsating through the very core of my being. I mustn't cry in church. I mustn't cry. I'm church. I mustn't cry in church.

I was a newly qualified midwife back then. The feelings I share are as real and powerful to me now as they were ten years ago. I sat with streams of sorrow spilling down my cheeks and splashing onto the open page of my Bible, blurring the very word of God. Blurring the truth momentarily, as I grappled with resisting the tears that were falling.

And this wasn't even my grief. This pain belonged to someone else: the mother and the father whose baby had never cried. Never drew breath. Whose cheeks never turned pink or curled its little fingers around their one index finger. All this was their anguish. And the more I recognised this, the more wracked I was by



pain until I was sobbing uncontrollably, unable to put a voice to the words I wanted to cry. Lord, this is so unfair. Lord, this is so unfair. Lord, this is so unfair!

But our Lord is a Saviour who is familiar with grief and with sorrow. He too wept tears at the death of Lazarus. He too gave way to this most basic and physical act of sadness. And, as we release our tears sitting at his feet, we are bringing him our most authentic prayers. Our teardrops yielding the most vulnerable part of ourselves to him, entering his very throne room. And these tears become our wordless prayers as the Spirit intercedes for us when we do not know what or how to pray.

He treasures every teardrop. Drop by drop by drop. As my tears subsided, I was filled with such calm and peace. I found myself in a place to give voice to the words I wanted to pray for these young parents.

All these years on, I still think of them, and I still pray for them when I do. They have three other children now. Praise God. But baby boy, you will never be forgotten. Crying in public might be too embarrassing for words, but our teardrops can be our wordless prayers before the one who brings healing and who restores. Jesus also wept. 🌟

Victoria Hutchinson is a Continuity of Care Team midwife in the midlands



weeping

he's coming for
me

Georgie Coster reflects on what
one patient's death taught her
about salvation

Patients die. That's a fact. You'll get used to it. Until, every now and then, you don't. It's fresh; it's new; it's raw; almost like it's never happened before. The pain cuts deep, and you weep, and you weep.

Why does it happen like that? You can lose patient after patient and maintain your decorum. You can be the one who's not crying so that you can wipe the baby nurse's tears as she gives last offices for the first time. You can be the one who can speak quietly and calmly to the family as you explain to them that we did everything we could; that she seemed very peaceful as she went; and that the procedure for collecting the death certificate is explained in the booklet. Quiet. Calm. Composed. And then it happens. That death that cuts through your professionalism like a butcher's knife, and there's no quiet, or calm, or composure. You crumble.

I was alone in the room with her. She knew she was dying, and she knew it wouldn't be long. Lying on her bed, cold flannel draped across her forehead to mop up beads of sweat as they poured out, she looked me in the eyes, terrified, and I'll never forget what she said.

Four words that changed me. *'He's coming for me.'* She was in torment. The fear in her eyes, apocalyptic. The agitation in her spirit as she contemplated what was about to happen to her was far beyond the reach of midazolam. *'Please don't let him come for me. Please...he's coming for me.'*

That night I was meeting the in-laws for a carvery straight from work. Instead, I sent apologies and wept all the way home. And in the shower. And in bed. Tears of agony from a glimpse into an eternity without a Saviour. Tears of overwhelming gratitude for knowing that a glimpse is all I will ever get. Never more than that. Child of God, how often do you forget the magnitude of the wrath that ought to be poured out on you but never will be?

Four harrowing words, now ingrained in my mind, offer a sobering reminder. He is coming for me, but there will be no fear in my eyes. Perfect love has cast out fear. In my spirit, there'll be no agitation, only celebration, when my Saviour comes for me. 🍀

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



rejoicing

a patient I
**rejoiced
over**

Rachel Denno looks at how attending to the spiritual needs of a patient and his family transformed their situation

work as a psychiatric liaison nurse in the emergency department of a big hospital. We assess people in mental health crises and are at a high risk of harming themselves and or others.

Recently on a night shift, I assessed an acutely unwell gentleman who had never had contact with mental health services before. His wife, Nina, had brought him to A&E concerned about his rapid decline in mental state and ability to keep himself safe. She was extremely concerned about him and anxious that the situation at home was now unpredictable and no longer manageable.

After assessing Ajay, I took Nina aside and sat in the family room of the A&E whilst another member of staff stayed with Ajay. I spoke with her to gather some collateral information about Ajay's decline over the past month and to offer her some carers' support.

The moment we left the room, Nina asked me, 'Are you a Christian?'. When I replied 'yes', she began to pour out her heart in the corridor, expressing how she and several others from church had prayed for weeks for God to heal Ajay. Once in the family room, I offered to pray with her in the name of Jesus, which she gratefully accepted. So we prayed together on

the blue plastic chairs, simply and sincerely. God allowed me to show his comfort to another believer in a time of distress and for us to pray together for his peace in a chaotic hospital environment.

I was reminded very poignantly that we are placed in our jobs for particular moments.

I realised that just my presence itself was a reminder to Ajay and Nina of God's presence with them. God had not removed Ajay from his circumstance of suffering, but he had met him in it. Ajay was one of the most acutely unwell and high-risk people I assessed that month. He wasn't healed there and then, nor did he recover quickly; his symptoms weren't any less severe than other patients who weren't believers. But God heard our cries, and they were not alone.

What a privilege we have working in healthcare to be there at landmark moments in peoples' lives. Often this is at their most vulnerable, most painful, most uncertain. We are placed to sit in tragedy with them, to be present in times of fear. What an opportunity we have, in the rollercoaster of our roles, to show Jesus' love through offering timely presence and simple prayers. 🙏

Rachel Denno is a Liaison Psychiatry Nurse in Southern England



rejoicing

a patient I learned from

A nurse reflects on a high
dependency patient who
showed her the true meaning
of joy and courage

You go into nursing to make people better, right? Well, what do we imagine that looks like? Have we done our jobs well if our patients leave our care with seemingly greater needs than they had before? Or is that an inevitable, natural progression of illness, injury, and life? Is our role rather to come alongside them in that journey, easing some of the burden?

Sometimes I wonder if I will remember my patient's time with me more than they'll remember my time with them?

Reflecting on a very challenging season for one of our long-term patients on our respiratory High Dependency Unit (HDU), I'm struck again by the qualities I admired in her.

Maya (pseudonym) was joyful and resilient. Many afternoons, I'd sit with her, singing a Mr Tumble song and trying to interpret her Makaton. I'd witness her simultaneously sensing everything around her, whilst maintaining her focus on her video or colouring book – and boogieing in her chair – and I'd think back to the contrastingly scary clinical situations I've also witnessed in her room.

Maya has muscular dystrophy and learning

disabilities. Months before she turned 18, she was admitted to our adult HDU for the first time, to manage her secretions and provide non-invasive ventilatory (NIV) support. Understandably, she hated it when she needed suctioning, nebulisers, 'cough-assist' and her tight mask fitted to her face, especially in a deteriorating situation. If her monitoring screen was beeping and her oxygen level was dropping, the 'tough love' side of nursing would come out as we firmly but gently repeated *'Maya, we need to put this mask on...'*

It must have been terrifying when the beeps and noises got louder, the ITU team rushed in and, amidst serious but focussed voices, laid her flat, inserted lines, tubes, and drugs to put her to sleep, whisked her to ITU before waking her up a few weeks later. Then, the reverse, until eventually she 'stepped down' to us on HDU.

Sadly, this sequence of events happened more than once for Maya, and each time our concern grew. On her final return from ITU, Maya looked winsomely better, but there was one distinct change: she had a permanent tracheostomy. We cheered as she entered our unit, but questions rang in our ears: can we be hopeful? Will we ever wean her off the ventilator? Will she ever be her playful, cheeky self again? Will she survive this admission?

Over the following weeks, and months, Maya made me smile countless times. She showed incredible adaptability to breathing and living with a 'trachy', including many trials and chest physio sessions. But most profoundly, she learnt to adapt to life without an audible voice, communicating with Makaton instead! She used her infectious, warm, hilarious energy to express her emotions and encouraged us to feel them too. She welcomed every visitor to her room with a silent but warm 'hello', asked them their name, and invited them into her activities with an affectionate handhold or a hug.

Despite so many setbacks, Maya showed me what joy and courage are. I can rejoice over her and thank God for the privilege I had to be on this journey with her. And although she may not have looked 'better' than when she came in, she had grown and adapted through the challenges she faced. She had found the strength to face the challenges that lay ahead. I hope I have eased some of the burdens in that journey, as she certainly eased some of mine.

Anon

MAKATON

MAKATON
is used by over
100,000
ADULTS +
CHILDREN
in the UK

MAKATON
is used in over
40
countries

it uses
**SIGNS,
SYMBOLS,
SPEECH**
for communication
& supports the
DEVELOPMENT of
essential
COMMUNICATION
SKILLS

FIND OUT
MORE AT
makaton.org

it helps
PEOPLE
who struggle with
CONCEPTS or
LITERACY
or who have English as an
additional Language to
COMMUNICATE

rejoicing

is our God able?

Bethany Fuller tells how a 'chance encounter' with a patient was a great mutual blessing

A quick sigh escaped my lips as I shuffled through the sea of paper on the desk to find the new admission's notes. He had only been in the side room for five minutes, but already his notes were deep under a pile of documents, dressing packs and pharmacy bags.

I was really not in the mood for a new admission. My head was hurting, my feet were aching, and I just wanted the shift to end. I felt chronically drained of all my energy. One dear patient had

passed away that morning already, and several others were quite sick. I had asked God on the way to work for some encouragement; I wasn't sure he had answered that prayer.

Suddenly I spied the notes and gathered them up. Now to find a place to sit, my feet were killing me. I had not received a handover for this patient; in fact, I hadn't even met him yet as I had missed seeing him being whisked into the side room. Glancing quickly over the notes, I was pleasantly surprised to see an entry saying the patient's church provided him



with meals twice a week. As I made a mental note to ask him about his faith, I finished preparing the notes and stood up to go into the room.

He was an oncology patient in his 80s with the cancer having recently spread to the larynx and was having trouble speaking above a whisper.

After introducing myself, I started the admission process. Vital signs were stable, and we were nearly up-to-date with all the risk assessments. *'I saw on your notes that your church does meals for you; are you a Christian?'* I asked. His eyes lit up, *'Yes. So am I! What church do you go to?'* He actually went to one I knew. When I mentioned the name of my church, he suddenly became excited and asked me if I knew a particular couple. I was so surprised when he said their names – it was my parents!

This man, this patient, who I could have so done without admitting that day turned out to be someone who had been praying for me all my life, despite having not seen me since I was a baby, having known my grandparents for many years. He and his late wife had prayed faithfully for many, many people for decades and our family – from my grandparents to my youngest cousin were among those blessed individuals.

I was humbled and in awe of God's ways right there and then in that hospital side room with all the risk assessments and admission paperwork spread out across the table. God had done it. This man could have been admitted on any other day by any other nurse, but it was now, at this time, and I was there. God had answered my prayer, and in a way that I could never have dreamed.

I was staggered that God would bring a patient to me who had been praying for me my whole life on the day I asked him to show me his love and care. But why should I have been so astounded? This is our God. He cares for the sparrows – how much more for you?

And this beautiful occurrence is but a shadow of the astonishing truth that even at this very moment, Jesus is sitting at the right hand of the throne of God, praying for you. The glorified, risen Lord is praying for you.

If I was so encouraged to meet a fellow pilgrim who had prayed for me my whole life, how much greater joy is there in knowing and meeting with the one who has known and loved us since before the foundation of the earth and who prays for us at God's right hand! God answered my prayer. He is able to answer yours too. 🙏

Bethany Fuller is a Staff Nurse in Southern England

SC2022
4-6 February 2022
Yarnfield Park, Stone, Staffordshire

WEEKEND

LIGHT

IN THE DARKNESS

LIVING IN THE GLORY OF CHRIST

book online at:
cmf.org.uk/studentconference





devotional



lead us to the rock

Onahi Idikwu reminds
us of the source of our
hope and strength in
difficult times

How are you feeling? Tired? Have you been stuck in a sense of perpetual exhaustion for most of this year like me? As if nursing was not hard enough

before, many of us have worked through a global pandemic, our shoulders gradually slumping from the weight of the broken hearts we carry. Even still, many of us continue to stretch to fill the staff shortages as we shuffle onwards towards winter. No wonder we feel tired, or angry or numb or however, you may feel.

Nonetheless, how do we change the overwhelming narrative pouring out of our hearts from one of pain, frustration or desperation to one of hope and compassion?

How do we break this cycle of fatigue littered with resentment, apathy or misdirection? How do we find the motivation to go above and beyond to help our patients feel comfortable and safe in their time of vulnerability again? How do we resist the temptation to snap at that family member who has asked for the fourth time 'how long till the doctor?'. Instead, how do you look them in the eye, take in a deep breath, and breathe out grace? Something that once came so naturally takes more effort now in your fragile state.

What do we do with these feelings? We acknowledge them, and we take them to the rock that is higher than us.


Psalm 61:1-2 says:

*Hear my cry, O God; listen to my prayer.
From the ends of the earth I call to you,
I call as my heart grows faint;
Lead me to the rock that is higher than I.*

The passage goes on to describe God as our refuge and a strong tower that brings my heart comfort because it reminds me that there is one higher than I. When my heart is weary and overwhelmed, I remember I have a God who hears my cry. God is our refuge and rock to whom we can take all our complaints. We do not have to feel strong enough to carry it all.

Be led to the rock that is higher than you, and let your burdens roll off your shoulders into God's very capable hands. He is *El Roi*: the God who sees. He knows your name. He knows your story. He knows each disappointment engraved on your heart because he has your name engraved on the palms of his hand. Those same hands are spread open to embrace you today. My prayer is that we will each be led to the rock that is higher than us and let our Heavenly Father saturate our souls with his love there. 🍁

Onahi Idikwu is a paediatric and neonatal nurse in London



counting

the numbers game

Aditya Naidu reminds
us that God does not
count as we do

In this day and age, our lives are governed by numbers, and we, as nurses, are not immune to it. It's fascinating how important numbers are for us. Especially as an ITU nurse, I have been conditioned to the extent that living by numbers is a habit, a subconscious act.

On a typical day at work, I am engrossed with information like what size endotracheal tube my patient has and the FiO₂, PEEP, and Pressure support. How about Saturation? Heart rate? Temperature? How many micrograms per kilo per hour is Norad running at? What is my patient's GCS? Any idea on the

BMs? What's the RASS score? How many invasive lines and drains are there per square meter of my patient's body? How many mils was the urine output? Bowel openings today? Type of stool, 5-6-7? How many desperate calls from the family? Truthfully, a thousand more objective observations can be added to this list. I do this every day, judging my patients based on numbers, prioritising and planning my care.

We are in the numbers game.

On a fine day at work, while noting down observations, it occurred to me – what if God would one day change his mind and start assessing us based on numbers? How many times did I sin today? Was I faithful and honest to God? How many deeds of kindness were added to my account? How many minutes in prayers did I spend? How many chapters of the Bible did I read? What amount did I give for his ministry and church? If this became a reality, I wish the earth would swallow me up first. The chasm created by the abysmal numbers between our Holy, Holy, Holy God and me would be unfathomable.


What an imperfect match, Jesus and me. I often stop thinking about closing this gap, craving my sinful life, and then the Spirit of

God reminds me, aren't the very hairs on my head numbered? Jesus taught us to forgive our brothers seventy-seven times, so how much more he being God and Father, can and will forgive us? Probably infinite times.

Didn't he feed the five thousand with only five loaves of bread and two fish in the wilderness? Then why am I worried about the balance in my bank account? Weren't the widow's two mites greater than the entire wealth of Israel? Doesn't it show he is hungry for hearts and not money pots? Didn't he die on the cross bearing the wrath of God for zillions of people from the first-born Adam to the last to be born?

His grace is greater than my works.

He defeated death on the third day and then met the twelve to give them the one comforter he had promised. Yes, his love for us is incomputable. He completed his transaction, took our sins, and gave us his righteousness. What's left in my account of sins now? Zero.

Jesus is not in the numbers game. He is in the Love game.  Champion!

Aditya Naidu is an ITU Nurse in the East Midlands



nursing &
midwifery culture:
**the good
the bad &
the ugly**

Georgie Coster looks at the importance of celebration in transforming our workplaces

Culture: the customs and social behaviours of a particular people. And as nurses and midwives, we certainly have our own. What first comes into your mind when you think about the hallmarks of our culture – good things or bad things? At CMF, we often talk about being *counter*-cultural and shining like lights in a dark world. That is undoubtedly important. But if we focus solely on what is bad, might we be in danger of missing the chance to celebrate an awful lot that is good? Reflect with me on our nursing and midwifery culture.

At 7 am on your first day, you don't know them from Adam. By 11.30 am, you've resuscitated a patient together, given somebody their very last bedbath together or tackled an 'I don't even know where to start' kind of code brown together. We do it together. In the hospital and primary care, teamwork is key.

However, the hard fact remains that we live in a fallen world. Long gone are the Genesis days where everything was 'very good'. Now even the 'very good' things that remain are tainted by sin. The byproducts of close teamworking can be truly ugly – gossip, cliques, bullying. Even the way we break into a team in the first place.

I've recently moved to a new clinical area with a much bigger team than I'm used to working in. *How on earth am I supposed to find my place here?* I've noticed something interesting. The moments when I most feel a sense of belonging – like I'm actually being accepted as a team member – are the moments when I moan about the things my colleagues moan about.

To be frank, I've quickly learned what sucks about this working environment and when I pass comment about a particular frustration which is then shared and affirmed by an established team member, we bond. Moaning is a glue that binds us together. I feel like one of them, and as a new member of a gigantic team, that's all I want.

What my pacified insecurities don't understand is that moaning isn't the superglue it makes itself out to be. It's Pritt Stick. Long-lasting, strong bonds in a team are built on mutual respect, trust, and genuine care for one another. That only comes over time. So, let's not rely on venting shared grievances as a shortcut to approval. Let's be those who patiently build genuine and solid relationships, even if that means feeling like an outsider for a while because we intentionally minimise our moaning!

In our culture, there is so much more than teamwork to celebrate: hard work, self-sacrifice, striving for excellence, compassion, courage, dedication, humour.

But every 'very good' thing tends to brokenness. A culture where hard work and sacrifice is prized can lead to neglecting rest and burning out. Striving for excellence can lead to a blame culture, where we're so terrified of being labelled incompetent or even facing fitness to practice allegations that we throw colleagues under the bus to keep our own record clean.

The challenge for us as Christians is to celebrate the good while being aware of the bad and the ugly and swim against the tide when it comes to those things.

Three ways to celebrate:

1 admire

Actively look for the 'very good' at work and thank God when you spot it.

2 encourage

Tell your colleagues when you've seen something in them worth celebrating! Tell them when you've seen them reflecting God's image. Even if they don't know Jesus, they bear their Creator's image in myriad ways. Ask God to show you, and when you find it, tell them.

3 celebrate

Tell the rest of the team too. When you're eating your lunch in the staff room, are you more likely to praise somebody or to gossip about them? Instead of talking about who has annoyed you today, tell the team who has impressed you, who has helped you, who you've really appreciated.

Celebrate each other. It might be contagious. 🌟

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

poem

work hard, play hard

Nurses are known for working hard
and playing hard.

And as a Christian nurse?

I work hard and play hard too!

You see, when I turn up to work,

I am there to serve

You will get my best, and I will go above
and beyond

Because I'm here to serve God too

I will work like a dog and run around like
a blue-arsed fly

But I will rest.

I prioritise breaks for me and my team

We eat lunch.

And at the end of the day

With an aching back and sore feet

I pray, and I let go

My best is enough

And I walk away.

As a Christian nurse, I know when to say 'no'

No to the extra workload

No to the overtime shift

My identity isn't in how busy I am

How needed I am

I am not invincible, I am not God

I need sleep; I need food; I need drink; I need rest.

And as a Christian nurse, I play hard too!

I know how to feast and enjoy life

How to enjoy good food and good drink

and good company

To belly laugh, to dance and sing and celebrate

I know how to be thankful.

I don't overindulge

And I'm not trying to numb pain or grief

To find peace or release

But I do know how to delight in God

And him restore my soul. 🌿

Bex Lawton is a paediatric nurse in Oxford
and CMF's 'Poet in Residence'



global

under the spotlight:
**midwifery
overseas**

Ruth Sloman shares with us
some of the highs and lows
of working overseas

Spotlight: *Hello Ruth! Thank you so much for agreeing to be interviewed for our magazine, we really appreciate it.*

How did you become a midwife?

Ruth Sloman: I studied nursing to begin with because I felt God calling me to work in resource-poor settings. During my student elective, an African doctor told me that to have the most significant impact on a community, you need to help the women. *'By helping the women, you help the family, you help the community, and you help society.'* That really stuck with me and was an answer to prayer because I had been praying about whether to do midwifery or not.

S: *How did you end up in Burundi?*

RS: Initially, when I reached out to this organisation, they told me the maternity unit hadn't been built yet! So, I left it, worked in London and got some experience helping set up a home birth team. Then, when I contacted them again, they replied, *'this is really funny, you're the third Ruth to get in touch, and our*



current midwife called Ruth is leaving soon'.

So, I organised a visit for two weeks as part of my CMF Global Track¹, and I felt this is where I should be. I loved their vision.

S: *What has been your most memorable birth?*

RS: At the end of May, we had a woman come in who was having her first baby. I heard her say, *'There's something coming out!'* and it was a foot! It ended up being an extremely difficult breech birth. The baby was not coming, and the manoeuvres we did...well, it was difficult to watch. The baby needed extensive resuscitation, and I thought maybe she wouldn't breathe for herself. But thankfully, she responded. We prayed that she'd have no problems, no damage to her brain and what a miracle! I saw this baby at a party, and she was smiling! She's reaching her developmental milestones. It's amazing what God did. Really incredible.

S: *If you could have one piece of extra equipment, what would you have and why?*

RS: A neonatal reusable sats probe and some Guedal airways. Oh, and a ventouse machine! We don't need it right now, but we're opening a caesarean section unit, so we'll need it then.

S: *What do you truly enjoy that's unique to working in Burundi as opposed to the UK?*

RS: In some ways, it's good that there is no pressure on health practitioners to write essays of documentation; however, here people don't document enough, which is something we're trying to work on. But also, I think in the UK we can practice quite defensively. We have a lot of people holding us to account; the NMC, the patient, our employer. Partly it's what drives good practice, but it's nice to have freedom to work without the fear of litigation looming over you. It's also lovely to work in a community where people are so sociable. Not everything has to be private and individualised. We have lots of group discussions. It's a good use of your time so you're not repeating yourself to lots of different people. The women here prefer to talk in groups rather than one-to-one, as it's less intimidating.

S: *What piece of advice would give out midwifery members who are thinking of going overseas?*

RS: In a resource-poor setting, one thing I've realised most is that the poorest resources are the human resources. You don't need loads of equipment and fancy things to make a huge impact. You can do a lot with very basic materials. But you do need to be confident in your own skills. Get any extra little bits of training you can. Remember we're really blessed in the West to have a good education and one-on-one mentors. Here they can't give a good quality education. Their classes are packed! You are going to be seen as the expert. If you're not so confident, go somewhere where there's someone who can mentor you.

S: *Lastly, what does it mean to you to be part of CMF?*

RS: The more I've felt God calling me to mission, the more valuable it's been to me to know and meet people who have a similar heart. Healthcare mission is quite niche in a way, so it's great to have supportive people that understand what your issues might be or the challenges you might face and who can advise you.

Thank you so much, Ruth. May God bless you. 🙏

Ruth Sloman is a midwife working in Burundi

1. See cmf.li/GlobalTrack for more information about the CMF Global Track for those interested in global health and mission.




prayer

liturgy toolbelt

Bex Lawton introduces a new, regular feature for *Spotlight*; prayers for our everyday working lives

There's nothing wrong with 'arrow prayers'. Sometimes quick, short pleas for 'Help' or 'Come Lord!' are all we can muster in the high pressure or busyness of our workplaces. God loves to hear from us, whatever form our prayers take. But on the *Spotlight* team, we have come to value prayers that others have written and faithfully crafted outside of the busyness.

The background of the page is a photograph of two hands clasped in prayer, with fingers pointing upwards. The hands are positioned centrally and are the primary focus of the image. The lighting is soft, and the colors are muted, with a lot of blue and purple tones. Several large, semi-transparent purple circles of varying sizes are overlaid on the image, creating a modern, abstract design. The overall mood is peaceful and contemplative.

So that we can have rich liturgies to hand that help us practise a mindfulness of God's presence in all our everyday activities.¹

With that in mind, you will find a new prayer to add to your 'toolbelt' in each edition. Feel free to cut them out so you can stick them in your pocket or wallet. We hope that these liturgies will be tools that serve to equip and enrich your prayer lives at work. 🍇

Bex Lawton is a paediatric nurse in Oxford and CMF's 'Poet in Residence'

1. Mckelvey DK. *Every Moment Holy*. Nashville: Rabbit Room Press, 2019
2. Christians Against Poverty *CAP Job Clubs*. bit.ly/3nu245u

Liturgy for journeying to work

Heavenly Father, thank you for this job. What a blessing it is to work! To do something useful with my hands and for the money it earns me.

I lament for the million-plus people in this country who don't have jobs to get up for today.²

For those who lack the security and sense of purpose employment can bring.
For those needing to choose whether to eat or to heat their homes.

God of Justice, forgive us for our neglect of the poor.

Have mercy on our nation, I pray.

And as I journey to work this day, I say,
I'm on my way, Lord Jesus! I'm coming to join you in your ministry
In caring for the broken, sick and marginalised.
On this ordinary Monday [or insert day]
I follow in the footsteps of saints who have worked for a century of Mondays before me
Like nurses and midwives who worked in monastic orders since the Middle Ages.

On this day
In this age
I devote myself to you.
I may not live in an Abbey, but my ward [or insert workplace] is my monastery
My place of prayer, of worship and service.
Holy Spirit, prompt me with this truth in the less inspiring moments of my day
When I'm stuck on the phone or doing admin
Stressed or under pressure
Whatever I do today, I do it whole-heartedly
for you, my Lord.

And thank you that I am not on my own.
I pray for my nursing and midwifery sisters and brothers in Christ.

Making their journeys to work now all over this country, even as I do.
And for those overseas who walk roads less travelled.

Use us as a 'Force for Hope' we pray
Agents of change for health services across the world.

May your favour rest on us and establish the work of our hands for us (Psalm 90:17)
Amen.

national conference
29 April – 1 May 2022

Yarnfield Park Conference Centre,
Stone, Staffordshire

Knowing, feeling & living
well as a disciple of Christ



new times: OLD AGENDA



cmf.org.uk/nationalconference