From the President

Safety: Practice of caring for the welfare of others

The National Health Service (NHS) born seventy years ago introduced a health care system which was then, as now, largely all about cost; public and personal. For those earning wages paid in shillings, paying half a crown, ie two shillings and six pence, was a lot of money to pay just to see a doctor!

The Second World War crystallised the need for good national health care. New centralised state-run emergency hospital service, employed doctors and nurses to care for the injured during enemy action and arranged for their treatment in whichever hospital was available; a blueprint for a post-war health service for all.

At its launch by the Labour Government’s health minister Aneurin Bevan on 5th July 1948, the NHS had at its heart three core principles: that it meet the needs of everyone, that it be free at the point of delivery, and that it be based on clinical need, not the ability to pay.

What would Edna Doreen Ayris (Daisy to her friends) have to say about those early days in theatres as a probationer nurse and state registered nurse? As a dynamic manager, educator and senior nursing officer, in the operating department at United Leeds Hospitals her vision, engagement and passion was recognised with the award of her MBE; for services to operating room staff remembered. How would you feel if this respected professional stepped into your theatres tomorrow, as a member of your own 2018 team?

I would imagine that Miss Ayris (I cannot imagine calling her Daisy!) would quickly fit into the team and ask to practice alongside you as a scrub practitioner; some things do not change. She would be amazed at the transformation of the old fashioned operating theatre into a modern, secluded, scientific space. Clearly technological changes would make her stop and think, where’s the cyclopropane, theatre steam sterilizer and my caskets of swabs and dressings? Why so much waste paper, peel packs and single use sutures? As for surgeons, they no longer enter the theatre arena as a matador strides into the ring! They arrive early for their operating list, participate and lead something called the WHO surgical safety checklist, are kind to the whole surgical care team, including his/her gasman, but still leaves as soon as possible. Leaving the surgical care practitioner to finish of the case!

It was my honour and pleasure to represent you all at this year’s Association of periOperative Registered Nurses (AORN) congress in New Orleans alongside thousands of delegates, speakers and posters. My visit, some 60 years after our Association’s founder (DA) own congress attendance, a light bulb moment that inspired her to challenge UK theatre staff to engage with each other, learn together and support the next generations evolution. We continue to be one of the world’s leading authorities on perioperative best practice. We are a learning organisation with education at our core.

As the longest serving health secretary in NHS history (2,099 days plus) continues to deal with increasing waiting times, cancelled ops, bed shortages and a 100,000 staff shortfall, I am sure Daisy, every past president and thousands of members, in our 54 years of shared perioperative practice, should probably pose a challenging question:

"Are you proud to be a 21st century perioperative practitioner? Then enjoy the honour of caring for the next patient of the operating list, with insight, compassion, commitment, integrity and skill! As a significant member of the surgical care team, aim to reinforce accepted, safety practices, foster better communication and team work between clinical disciplines.” Aim to a Chief Joy Facilitator! (2018 AORN Congress Outcome)

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