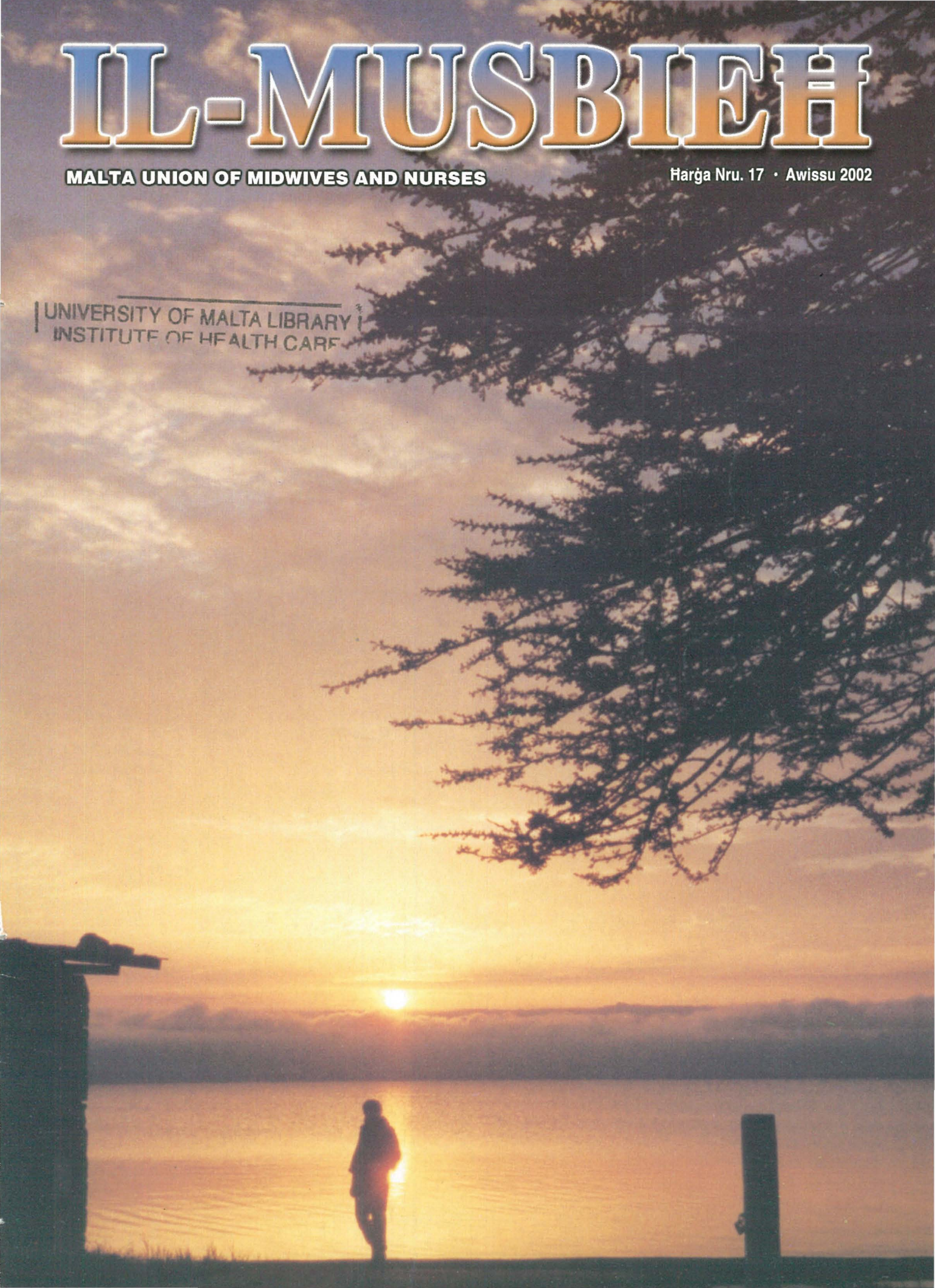


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MALTA UNION OF MIDWIVES AND NURSES

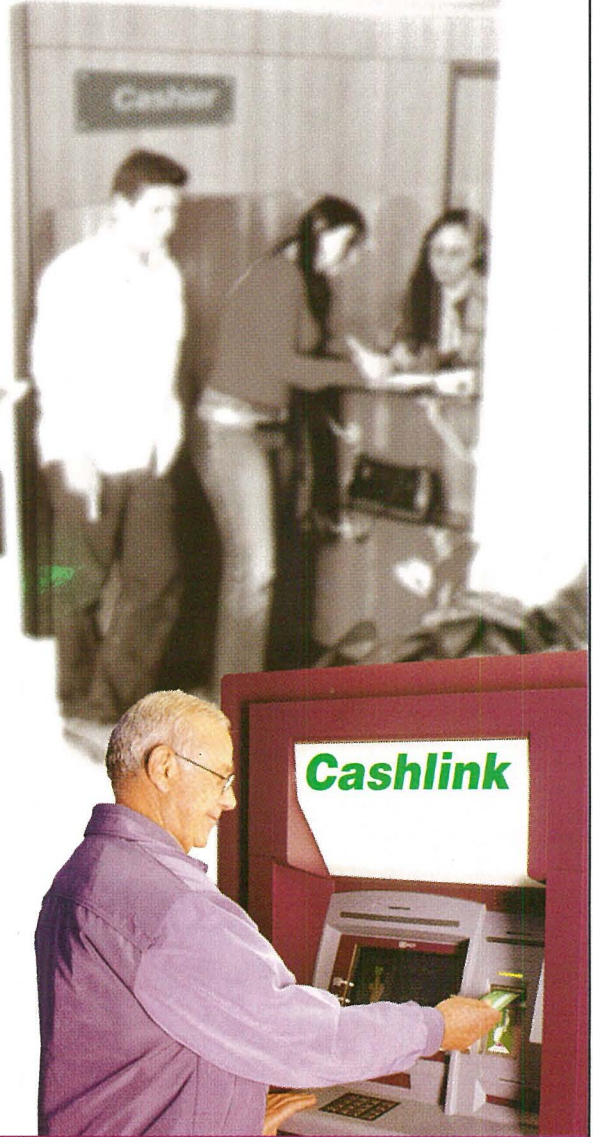
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# IL-MUSBIEH

Nru.: 17

Awissu 2002

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## Editorjal

### Il-'Constant Watches'

Aktar minn qatt qabel qed naraw zieda ta' pazjenti li ghal diversi raġunijiet qed jiġu dikjarati li ghadhom b'zonn 'constant watch'. Hemm każi fejn din il-proċedura tinhtieg zgur, iżda f'każi ohra qed tintalab bl-ament u għall-ebda raġuni speċifika.

Dan qiegħed johloq inkonvenjent għaliex hafna drabi n-numru ta' 'staff compliment' ma jkunx adekwat u mhux garantit li aktar staff ser jiġi allokati għas-swali fejn naħdmu. Il-problema tikber aktar meta mhux l-ewwel darba jkun hemm aktar minn pazjent/a waħda li tehtieg 'constant watch'.

Ta' min wiehed jibda jirrifletti ftit per eżempju, jekk kull każ ta' 'overdose', ikun xi jkun il-każ, aċċidentali jew mhux, isirx 'constant watch' fejn vera hemm b'zonn. Dan għaliex kif wiehed jista' jirrealizza, bix-xogħol voluminuż li illum issib fis-swali, mhux dejjem hu possibbli li staff talloka ma pazjent/a waħda. Dan qed johloq tensjoni żejda u bla b'zonn fost in-nurses. Wasalna f'estrematijiet li 'constant watches' ġew dikjarati fuq pazjenti li huma konfużi jew 'senile' anke jekk dawn qegħdin go sodda u viċin tan-nursing station.

F'dawk il-każi li huma 'level 1' u allura hemm element ta' suwiċidju, dan bla dubju għandu jsir 'constant watch' kif suppost u b'attenzjoni kbira. Minhabba li hafna drabi s-swali fejn naħdmu huma ffullati, il-'constant watch' qed issir f'post bla privatezza u b'nuqqas ta' facilitajiet. Il-'waiting list' biex dawn il-pazjenti jiġu ttrasferiti għall-unit apposta, aktar ma jgħaddi ż-żmien aktar qed tkun diffiċli u twila, u għalhekk qed jithallew jistennew mhux ftit bil-'constant watch' b'kolloxx mal-lejl u bi nhar. Minhabba li l-posizzjoni u l-infrastruttura tas-swali, kemm qed naħdmu f'post sigur(safe), għandna d-dubbi tagħna. L-awtoritajiet għadhom jaraw li dawn il-problemi jiġu rmedjati mill-aktar fis possibbli.

L-anqas hu ċar x'tip ta' restrizzjoni jew trażzin jista' jsir fuq dawn il-pazjenti. Per eżempju, tista' iżżomm lil xi hadd milli jimxi barra mis-sala, jew twaqqfu fizikament milli jagħmel xi haġa? Hemm aktar mistoqsijiet... staff ta' sess oppost mill-pazjent/a j/tista' tagħmel 'constant watch' magħha/ miegħu? Meta verament 'Police case' huwa każ ta' pulizija? X'informazzjoni għandna nagħtu lil pulizija fuq il-pazjent jekk niġu mitluba?

Il-proċeduri u linji gwidi jridu jkunu ċari għal kulhadd. Il-pazjenti tagħna jafu drittijietom sew, aktar u aktar meta l-'Patients' Charter of Rights and Responsibilities' huma stampati u aċċessibbli għal kulhadd. x'hinuma id-drittijiet tagħna fuq dawn l-affarijiet? Legalment, qegħdin nagħmlu kolloxx kif suppost?



## **Message from the President**

Dear members,

It is once again prime time to share a few words together and to convey information regarding the Union's activities by means of our journal "Il-Musbieh". As you may notice I am writing my message in English due to the fact that several requests have been made by our colleague members who are not Maltese Nationals and therefore find it very difficult to understand Maltese. We must appreciate that all members have the right to be informed of all the Union matters and should do our utmost to make sure that no one is left out. Being our second language English is the only way out to make sure that this journal is the right source of information to you all. The editorial board made this decision also in the light that our journal is posted overseas to international organizations within which the MUMN is an affiliate. MUMN is constantly evolving and moving on, changing and adapt to the present demands. After all the Union is what we make it. MUMN officials are constantly keeping in touch with all members so that our main aim which is to keep united, protect, support each other and speak up for our rights are maintained. Another move forward is the preparation that is underway to introduce the Union's Web Site. MUMN will launch this official website and all relevant information will be found at your fingertips. This website has the intention to broaden our frontiers and MUMN will be exposed throughout the whole planet. Constant update will be taken care of and irrespective in which part of the globe you will happen to be, this site is available. The Union's intention is that eventually even "Il-Musbieh" will be in this website.

Our new offices will be officially inaugurated on the 26th. September 2002 by His Excellency the President of Malta. These offices represent the sound foundations of a stabilised Union and an indication that MUMN is here to stay.

MUMN is also preparing for its third General Conference to be held in March next year. Time passes quickly and now the executive committee is in the process to start the organisation of this Conference. Motions and amendments to the statute will be presented for approval by the Conference but definitely the exciting part of this Conference is the election of the new Executive Committee for the coming three years. I urge all those who believe that they can contribute to the continuing development of the Nursing/Midwifery Professions to take a step forward and be nominated for candidates for these elections. The present Executive Committee is very dynamic and made considerable progress especially putting our house in order and setting an appropriate structure within MUMN. Now our Union is more defined and composed, merit to the hard work of all members in the Committee and the support of all group committees.

MUMN needs to keep its strength especially at this moment were politicians and authorities are speaking of radical reforms. Unfortunately no discussions have commenced with MUMN with regards the new hospital and its management even though the Prime Minister announced in July 2001 that discussions would start imminently. MUMN is worried about this situation and hope that the proposed reforms will be given due time for discussion and eventually agreement.

The present type of management leaves much to be desired, Nurses/Midwives are doing all jobs and the saga for enrolment of support staff is still going on. This problem was solved within the Department for the Care of the Elderly by involving the private sector, MUMN urges the Health Department to follow suit.

MUMN will not budge from what it believes is the best for the development of our professions. No high temperatures or hot summers will stop us from going on. We shall find the right time to enjoy the summer season but our struggle for achieving what is right and just will continue.

*Rudolph Cini*

# Flimkien

Gheżiež Kollegi,

Jaqbel li minn żmien għal żmien nagħtu rendikont tal-hidma tagħna biex intom tkunu aġġornati fuq dak li jkun qed isir. Bhala kumitat inhossu dan id-dmir, għax l-impenn tagħna hekk jitlob:-

- Dan l-aħħar (wara hafna qtigh il-qalb) twarrbu l- 'skips' minn fejn il-lifts u b'hekk indafu l-kuruturi. Il-pazjenti u n-Nurses mhux ser jibqghu esposti għaż-żibel kull darba li jkollhom jużaw il-lifts.

- Intlaqgħet it-talba biex il-muturi ta' l-impjegati jibdedw jidhlu ġewwa l-isptar u b'hekk l-impjegat ikollu aktar serħan il-mohħ dwar il-vettura tiegħu, apparti li l-entrata tal-isptar tiegħu dehra isbah.

- Sar arrangament biex il-parkeġġ ta' quddiem l- 'Outpatients' ikun riservat (wara li jispiċċaw mix-xogħol il-konsulenti u t-tobba) għall-impjegati tax-

shift ta' bil-lejl. Dan sar għax n-night Nurses ma kienux qiegħdin isisbu jipparkjaw waqt il-hin tal- vizitaturi ta' fl-ghaxija.

- Qed jintalab biex l- 'operation gowns' ikunu ta' kwalita' li ma jassorbux fluwidi bhal demm ecc. Dan biex jitnaqqas kemm jista jkun ir-riskju ta' kontaminazzjoni.

- Tlabna wkoll biex il-post fejn niffirmaw ahna n-Nurses jiġi rranġat, fis-sens li jkun hemm aktar spazju / imwejjed u aktar kotba fejn niffirmaw u mhux kollox fuq xulxin.

- Minn żmien għal żmien inlaqqgħu xi gruppi ta' Nurses. Dan l-aħħar laqqajna nurses ta' l- 'Outpatients' u smajna l-ilmenti u s-suggerimenti li ressaqnihom għand id- 'Departemental Nursing Manager' is-Sur Lawrence Azzopardi. Dan bi hsieb li nkomplu ntejbu l-

'performance' u l-kundizzjonijiet tal-impjegat għal ġid ta' kulhadd.

- Intlaqgħet it-talba tagħna biex fuq ir-roster tat-tobba jibdedw jitniżżlu wkoll l-ismijiet tad-Departemental Nursing Managers biex tkun ta' faċilita' għan-Nurses f'każ li jiġu bżonn xi ufficjal amministrattiv.

Dawn huma xi affarijiet li saru bil-hidma tal-kumitat. Żgur li xejn ma jiġi wahdu. Inridu nkomplu nahdmu bhala familja wahda flimkien magħkom. L-akkwisti msemmija ġew bl-ghajnuna ta' hafna ufficjali u ta' dan nirringrazzjahom. Pero' ma nistax ma nsemmiex u ngħid grazzi lis-supretendent ta' l-isptar, Dr. Frank Bartolo li huwa Chairman tal-grupp li dan sotto-kumitat tal-MUMN niltaqgħu miegħu ta' l-anqas darba fix-xahar.

Thomas Aguis

Sotto Kumitat Sptar San Luqa - MUMN



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# **The Munich Declaration – June 2002 (2)**

**Tommy Dimech (Vice President - MUMN)**



It was a great experience to participate in the 6th Annual meeting held by the European Forum of Nurses and Midwives of WHO in Copenhagen last March. More of interest for Maltese Nurses and Midwives were the questionnaire filled separately by the Maltese Ministry for Health and MUMN regarding the Munich Declaration.

When it was announced that our Health Ministry asked WHO for information about “family health care Nurse”, I took a deep breath. Surely this was a step in the right direction. MUMN worked for something like this to happen. However the answer given in the Ministry question for the following question was puzzling “Provide family- focused community programs and services: What services are already established?”

The answer reported by WHO was “Generally under-developed, but some activities are adopted by specific private and no governmental entities”.

It continues “If none, what are the reasons that no programs and services have been established?”

The answer again was “Underdeveloped for the important medical dispute”. In my opinion, this does not make sense. Asking for information about the family health care nurse is a positive step. Nevertheless, declaring that our services and programs are under developed because of the medical dispute does not make ends meet. If the family health care Nurse is going to work in the traditional medical domain environment, it is not going to render its professional aim effectively.

A colleague of mine, who participating in the conference quoted William Shakespeare “Knowledge is the wing wherewith we fly to

heaven. Ignorance is the curse of God “. Our educational and professional standards are quite developed in our country. Our post-graduate learning has to be based more on knowledge, and a sense of commitment and acceptance of responsibility and accountability. Our in-service courses should be tailored for the needs of the Maltese Nurses and Midwives. Learning programs should be based on our demands, so as to develop our skills and understanding and reflect our essential professional values. Knowledge is best acquired by somebody enjoying learning about the specific subject and not by somebody pushed to learn about a specific subject.

MUMN embraced the news that finally the Health Division is accepting the principle that specialisation should be introduced for Nurses and Midwives in Malta. Our only concern lies within the fact that this should be done within a strategic plan and not by issuing sporadic applications for Nurses and Midwives to become specialists. MUMN mobilized the education committee of our union to create a framework for this plan and they did a great job. The plan was passed to the Management and Personnel Office of the Prime Minister and also to the Director General at the Division of Health. Let us keep the track of the Munich Declaration and not waste this opportunity, it would be a waste of Maltese Nurses and Midwives if left inactivated.

When it comes to legislation, this should specify or clarify roles and responsibilities, and rights for Nurses and Midwives to practice. A framework of clear definitions of competencies to facilitate working in partnership with other members of other professions. This means cooperation on a professionally equal footing. The new “Professional Health Care Act” will serve as a tool

for Nurses and Midwives in Malta to develop their profession with a vision of moving forward, so as the Maltese people will live a prosperous, healthier, productive life.

Gender equality and gender sensitivity is also an interesting subject dealt in the Declaration. Some months ago I was invited to attend a seminar organised by the Permanent Secretary in the Health Division. I really enjoyed the seminar and participated with an intention to get things moving. A question in the WHO questionnaire was related to obstacles, such as those relating to gender status issues and our Health Ministry's answers was "It is underdeveloped as yet". In fact I am very sad to see foreign Nurses working in our country, by contract, not to benefit from maternity leave like other Maltese / foreign Nurses do. If a Nurse is pregnant, whatever her nationality, is it not going to become a mother like all the others? So, yes in Malta we still need to become more gender sensitive. To organise seminars is good, but one should not stop there!

Another question with a more shocking reply was "Are there workforce planning strategies in the country?" the reply from the Ministry side "Underdeveloped. Different entities keep separate records and strategies". In my opinion this is contradictory because we either have an underdeveloped workforce planning strategy or have nothing. We should all make up our minds about this issue, since by 2003 we should be moving to the new hospital - the 'Mater Dei' Hospital. This is some food for thought.

But then I really felt proud to be a Nurse. This was when my mentor Kirsten Stallknecht (former ICN president) spoke in the conference at Copenhagen and mentioned the language spoken by Midwives and Nurses. The same language with which we speak to patients throughout a whole day's work, during the night and on every possible occasion. A language which we spoke with for ages and which we still communicate with today. It is also the same language that historically was spoken by the Knights of Saint John to comfort, cure the sick and the injured.


The WHO assembly in Denmark ended with a recommendation to the regional director from the Forum of National Nursing and Midwifery associations and WHO. It was strongly recommended that a post for regional advisor for Nursing and Midwifery on permanent full time capacity be to be created. The role of such

an advisor should be to provide strategic and policy guidance and help member states to develop better health for the people of Europe. A global plan of action is to be part of the European Contribution and a meeting is to be organised between Government Chief Nursing Officers, European Forum for Nursing and Midwifery Associations and WHO. This should lead to an agreement on activities for the next 4 to 5 years following the Munich Declaration and also to report regularly to WHO Regional Committee for Europe on the strategic planning for Nursing and Midwifery national activities. ■

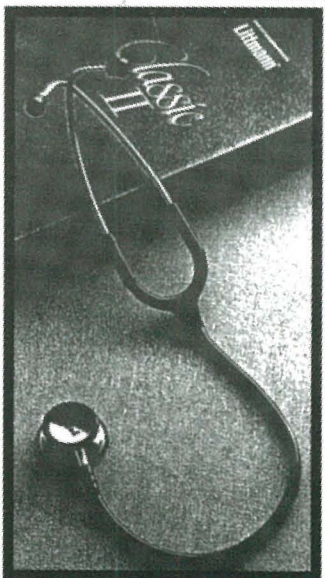
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## **Gozo General Group Committee Report**

### ■ Manpower Plan at G.G.H.

On 8th July 2002 a meeting was held at the Gozo Ministry regarding the manpower plan for Gozo General Hospital. Agreement has been reached on the majority of the requirements for nurses and vacant posts for G.G.H.

Some of the requirements that agreement has been reached are the following:

- ✓ Increase in the overall amount of nurses (SN & EN)
- ✓ Established a minimum amount of staff requirements for the newly refurbished Female Geriatric Ward (including 3 Deputy Nursing Officers)
- ✓ New posts for Infection Control Nurse and Professional Development Nurse (officers in scale 8)

- ✓ New posts for Night Supervision (Nursing Officers)
- ✓ New post for Deputy Nursing Officer for the ITU/CCU/Renal Unit
- ✓ New proposal for a vacant post for Assistant Director Nursing Services (Gozo Ministry)
- ✓ The immediate filling of vacant posts in the Departmental Nurse Manager grade, Nursing Officer grades and Deputy Nursing Officer grades.

All this was possible with the full co-operation of all concerned including the Gozo Group Committee, the MUMN Executive Council, Mr. Denis Tanti (MNS), Mr. Saviour Attard (DNM), Mr. John Cremona (DCS), and last but surely not the least Mr. Frank Psaila, Permanent Secretary for Gozo.

This shows that the MUMN has a constant and continuing support from members, and for this we are grateful.

*Atanasio Degiorgio*

Chairperson

MUMN Gozo Group Committee

## **Who takes care of me?**

One in three US hospital nurses under the age of 30 plans to quit within a year. The figure for all nurses who work in hospitals is two out of ten. The reasons cited are stress, frustration, burnout, 'ward rage' and, at the bottom of it all, the disparity between wanting to do a good job and the ability to do one. The US Occupational Safety and Health Administration rates nursing as the third most hazardous occupation in the country. There are enough nurses around, but they prefer not to work in hospitals. Older nurses fear that it will be difficult to find replacements once they reach retirement age. As one of them said in an interview: "We're going to be moving out and no one's coming in after us. Who's going to take care of me?"

SEW News

## **Benefits of a Healthy Nursing Workplace**

Research findings released in June confirm that Canada's nursing shortage is "at least in part due to a work environment that burns out the experienced and discourages new recruits". The report Commitment and Care: The Benefits of a healthy workplace for nurses, their patients and the system was authored by Dr Andrea Baumann and Dr Linda O'Brien-Pallas. Some recommendation highlights:

- Job satisfaction of nursing staff is a strong determinant of overall client satisfaction. Nurses' job satisfaction can be improved through manageable workloads and opportunities for nurses to balance work and home life.
- Nurses' absentee and disability rate is higher than that of almost any other profession. There is almost a perfect correlation between overtime and sick time.
- Nurses work best and have more loyalty to their employers when their expertise is respected and they are free to practice to the full scope of their education.
- Retaining staff is easier in a less stressful, more supportive workplace. Good relations on the care delivery team benefit patients and may even reduce death rates.
- Minimising staff turnover and letting nurses practice independently within a cooperative setting could go a long way to improving the work atmosphere.
- Nurses and employers need new ways of relating, including frequent, informal communication among hierarchical levels.

SEW News

# *Florence Nightingale* MUMN *Benevolent Fund*

BENEFICCJI MILL-1 TA' JANNAR 2003

- ◆ Jithallas il-passaġġ ta' l-ajru tal-Membru u ta' persuna li t/jakkumpanjah meta l-Membru j/tintbaghat mill-Gvern għall-kura barra l-pajjiż.
- ◆ Jinghataw Lm100 kull 15 il-ġurnata *sick leave without pay* għal darbtejn skond mard iddikjarat fiċ-Ċirk. OPM 38/98.
- ◆ Jinghataw Lm200 lill-eqreb qrafa tal-Membru f'każ ta' mewt.
- ◆ Jinghata rigal ta' rikonoxximent lill-Membru li j/tirtira bil-pensjoni.

Dawn il-beneficċji sejr in jizdiedu perjodikament. B'dan il-Membri tal-Fund sejr in jiġu nfurmati personalment. Dan huwa biss il-bidu, aktar ma l-Fund jikber finanzjarjament aktar kbar sejr in ikunu l-beneficċji li minnhom igawdu l-Membri.

Kull talba għall-beneficċji għandha ssir bil-miktub liċ-Chairperson tal-Florence Nightingale MUMN Benevolent Fund fl-indirizz tal-Union.

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## ■ A Word from the General Secretary

It's bad enough that we have a twelve hour stretch at work, but to have to do it in this heat definitely takes its toll. Well one can certainly find one positive thing to say about the new "Mater Dei", hospital and that's air conditioning.

Since we're on the subject of the new hospital, isn't it shameful that after all the talk on Autonomy from the Prime Minister 13 months ago not one meeting has taken place on the subject to date? The Health Division has promised a start to negotiations so many times now that it's become a bit of a joke!! One thing you can be sure of dear members is that the MUMN will be there to look out for your interests as always. We will accept nothing less than quality conditions, whilst consulting with you on the proposals and welcoming your input every step of the way. Ignore any hear says, nothing has been presented and nothing has been accepted.

After many a meeting I am proud to say that the Florence Nightingale Benevolent Fund is now up and running. It was on your, the members, insistence that this fund was designed and developed, and even if it did mean a lot of extra work for us to establish, we're satisfied that our members are happy. At least we can now do away with having to go around wards and departments making different collections for individuals who at some stage were experiencing a hardship of sorts. Not to mention the indignation of having your private business made public to one and all. Our office had many calls from people interested in knowing more about the fund and we are happy to say that in the first phase of this fund only 8.6% of our members have opted against joining. Whilst I cannot understand what difference this LM1 a month will do to a person I am confident that we will eventually reach everyone.

I would like to share a thought with our Nurse friends at St Vincent de Paul. The MUMN fund is designed to help people with problems of the living. Anything after that can easily be covered by various private insurances. The benefits of our fund, which as time goes by will only increase, are aimed at offering help that a private insurance is not able to provide and this can only be achieved by solidarity amongst our selves. I would personally see more sense in investing in a fund of 1116 shareholders than that of 250. After all the benefits are liable to be better when you have more funds coming in, but each to his own I suppose!!

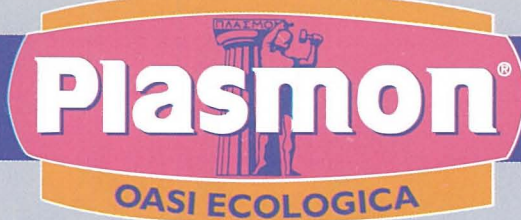
What about the Car Park I hear you say and so you may well ask! After numerous meetings at the Local Council offices and Parliament we were offered the charge of 30c instead of 35c. Well that was just not good enough. We are now walking a different path, which will hopefully get the fee down to 25c. I would like to take this opportunity to thank Dr. Louis Deguara and Dr Lawrence Gonzi for their input in the matter, without which we would not have come this far. The Opposition was of no help, as one would have expected some sort of comment on behalf of fellow workers. Sometimes I wonder if we have two political parties or one happy big one.

The MUMN 7 a-side Summer Football League was a great success again with all participants from various hospitals showing a lot of interest. Most probably next year's league will entice more interest as we aim to make it a joint effort between BOV employees and MUMN. We'll wait and see.

We've done well with the Nursing Officers and Deputies promotions this year in so far as we managed to increase the number of posts originally allocated by the Division considerably. With Deputies alone, the number will reach at about the 60 mark. Another satisfactory result for the Union is the four posts created for Deputy Midwifery Officers at the Labour Ward, which will somewhat, widen the circle. Not forgetting of course the specialisation posts, we have a Breast Care Nurse/ Midwife and will be moving on to Practice Development and Haematology next.

I close on a negative note, Collective Agreement 2002-2004. Up to now, although the Government has accepted to sit around a table and discuss a Sectoral Agreement, is still declaring a no change in salaries as a condition at this time. This is not acceptable to the MUMN and once all chance of negotiation is lost we will turn to you once again to show our disapproval at the way Nurses and Midwives are being treated in this country.

Colin Galea



## WHY DO PROFESSIONALS RECOMMEND OUR BABY FOOD?

All Plasmon foods are made with the freshest and finest ingredients you can find. Plasmon foods are made under stringent quality standards through the OASI ECOLOGICA system. Here agricultural experts strictly monitor each phase of cultivation and production. Produce is grown in fields and orchards, away from heavy traffic and industrialized areas. All water used is from uncontaminated sources and pest control is biological. The OASI ECOLOGICA PLASMON also boasts of excellent farm-animal rearing techniques where cows are left to roam freely in unspoilt pastures; chickens are free-range which means that all animals are reared in as natural a way as possible. Animals here are not given antibiotics and hormones to fatten them up; such chemicals leave a residue in the meat and dairy produce, which can have adverse effects on the human body. Plasmon has invested heavily so as to ensure maximum quality but above all safe and completely nutritious food for infants. Each Plasmon product carries the unique guarantee of the OASI ECOLOGICA where our raw materials are grown and reared in a fully protected and natural environment.



Product	Variety Available	Age	Preparation
Camomilla	<ul style="list-style-type: none"> <li>Sachets * 24</li> </ul>	Any Age	Diffuse in boiled water
Cereals	<ul style="list-style-type: none"> <li>Crema di Riso 200 gr</li> <li>Semolina 200 gr</li> <li>Crema Di 4 Cereali 200 gr</li> <li>Crema Di Mais e Tapioca 200gr</li> <li>Pappa Lattea Biscotto con Frutta Mista 250gr</li> <li>Pappa Lattea Riso Mais Mela e Banana 250gr</li> </ul>	4th Month	Mix with pre-boiled water, milk or broth  Must be mixed only with water
Prima Pastina	<ul style="list-style-type: none"> <li>Sabbiolina 320gr</li> <li>Forellini Micron 320gr</li> <li>BebiRiso 300gr</li> </ul>	4th Month	Cook in broth or boiling water
Pastina	<ul style="list-style-type: none"> <li>Puntine 340gr</li> <li>Gemmine 340gr</li> <li>Anelline 340gr</li> <li>Fili D'Angelo 340gr</li> <li>Astrini 340gr</li> </ul>	5th Month	Cook in broth or boiling water
Jars Fruit	<ul style="list-style-type: none"> <li>Mela 120gr</li> <li>Bananas 120gr</li> <li>Mixed Fruit 120gr</li> <li>Pera 120gr</li> <li>Prugna 80gr</li> </ul>	4th Month	Spoon out desired amount into baby utensil
Jars Food	<ul style="list-style-type: none"> <li>Mixed Vegetable &amp; Chicken 120gr</li> <li>Mixed Vegetable &amp; Beef 120gr</li> <li>Filetto di Salmone con Verdure Miste 80gr</li> </ul>	4th Month	Warm jar in bain-marie & feed
Concentrates	<ul style="list-style-type: none"> <li>Manzo 80gr</li> <li>Vitello 80gr</li> <li>Coniglio 80gr</li> <li>Tacchino 80gr</li> <li>Pollo 80gr</li> <li>Prosciutto 80gr</li> <li>Vitello e Pollo 80gr</li> </ul>	4th Month	Warm jar & add to pastina, cereal, vegetables or fresh broth
Formaggino	<ul style="list-style-type: none"> <li>Formaggino 80gr</li> <li>Formaggino con Mela 80gr</li> <li>Formaggino con Banana e Pera 80gr</li> </ul>	4th Month	Serve alone or with pastina Serve after dinner or as a snack
Yoghurts/ Desserts	<ul style="list-style-type: none"> <li>Yogurt con Pera 120gr</li> <li>Yogurt con Albicocca 120gr</li> <li>Yogurt con Banana 120gr</li> <li>Banana, Mela, Miele e Biscotto 120gr</li> </ul>	5th Month	Serve as mid-day snack May also be served chilled
Juice Drinks	<ul style="list-style-type: none"> <li>Bebifruit Pera 125ml</li> <li>Bebifruit Albicocca 125ml</li> <li>Bebifruit Pesca 125ml</li> <li>Bebifruit Mela 125ml</li> </ul>	5th Month	Can be given in a beaker
Biscotti	<ul style="list-style-type: none"> <li>Primi Mesi 300 gr</li> <li>Biscotti 180gr or 360gr</li> <li>Junior Yoghurt con Cacao 320gr</li> </ul>	3rd Month 5th Month 1st Year	In bottle (on professional advice) As first finger food As a snack

# From Our Diary...



MUMN, represented by the President, Rudolph Cini and the Financial Secretary, Mary Ann Bugeja, attended for a meeting with H.E. Archbishop Joseph Mercieca on the celebration of the Workers' Day together with other constituted bodies.



MUMN, on the same occasion of the Workers' Day, attended an activity to remark this special day organized at the Workers' Monument in Msida. Thomas Dimech, Vice-President and Colin Galea, General Secretary attended this activity where they bestowed honour to this Monument.



At St.Vincent de Paule Residence Nurses protested against the continuous shortage of staff by participating in a strike organised by MUMN. This strike ended up in a press conference held by the Department for the Elderly and the Union where they announced an agreement in which once and for all this shortage would be solved.



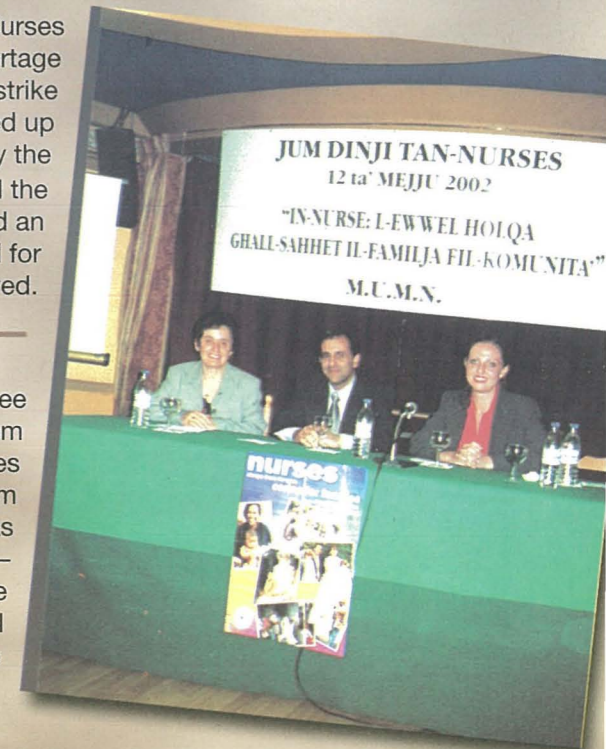
Once again this year MUMN organized the 7 a-side Summer Football League at the Pieta' Hotspurs F.C. in which 16 teams participated in this tournament. It was great fun seeing the enthusiasm on all the players' faces. A big thanks goes for the sponsors – the Bank of Valletta p.l.c., the Foundation of Medical Services and the Pieta' Hotspurs F.C. who all promised their support for next summer. In the first photo Mr. Jonathan Fenech Adami, Head, Business Development Dept, Bank of Valletta is presenting the MUMN League Cup to the ITU Team, this year's crowned Champions while in the second photo Mr. Emmanuel Attard, Chief Executive of the Foundation of Medical Services is presenting a generous donation to



Nicholas Cassar, the Chairperson of the MUMN Group Committee in Mount Carmel Hospital retired from work after 43 years of service in which he delivered care to psychiatric patients and at the same time defending Nurses at their place of work especially during the one year dispute MUMN had with the Health Division over the Deployment Exercise. A small reception was organised to mark this occasion.



Nurses and Midwives working at St. Luke's Hospital showed their anger at the new higher prices introduced at the Car Park, by participating in a 2 hour strike. This was the first strike organized by MUMN in St. Luke's Hospital.



The Education Group Committee within MUMN organized a Forum to mark the International Nurses Day. This very interesting Forum dealt with several topics such as the theme announced by ICN – Caring for Families. After the Forum a buffet took place. Well done to all those who participated.

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## Iż-Żejjed Hu n-Nieqes

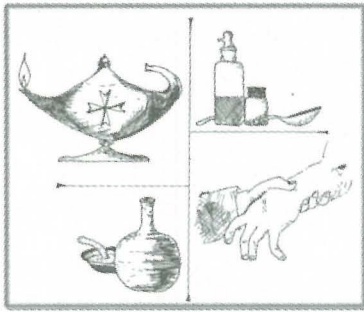
Fid-dinja tax-xoghol issb minn kollox. Issib min jiskarta kif u meta jrid hu, issib min jahdem iż-żejjed u bla nifs, waqt li ssib min jikkontrolla. L-estrem dejjem huwa hażin ghaliex ma jkunx hemm bilanċ, waqt li jhalli xi konsegwenzi fuq dak li jkun stess jew/ u fuq haddiehor.

Qed nikteb dan, ghaliex il-haddiema li naħdmu fil-qasam tas-saħħa nistgħu naghmlu bhal haddiehor. Sfortunatament issib xi inezattezzi fir-regola. Hemm min, bhala eżempju, jabbuża mis-sick leave. Ghaliex qed ngħid hekk? Is-sick leave huwa mportanti u tajjeb fih innifsu, biex jintuża mill-persuna li timrad. Izda, kulhadd jużah tajjeb u fiż-żmien propju bżonnjuż? Issib ukoll, li hemm min jużah biex ma jiehux ġurnata leave biex il-ġranet tal-vaganzi ma jonqsux. Hemm min jiehu s-sick leave ghaliex persuni ohrajn tal-familja ma jkunux jifilhu. Waqt li ssib min jgħidlek: "mhux ġewwa se nibqa jien!" Dawn it-talin ma tiġhomx f' mohħhom kemm, minhabba fihom, jistgħu jinqalghu diffikultajiet kemm lill-amministrazzjoni, kif ukoll lill-kollegi, forsi jkun hemm min tassew ikollu bżonn il-leave u mbagħad ma jagħtuhulux, u anke fit-tqassim tax-xogħol, waqt li jkun hemm inqas attenzjoni lejn il-pazjent. F'dan l-abbuż, insibu wkoll dawk li jagħmlu ċ-ċertifikati tal-mard lil dawn il-haddiema. Altru hemm haddiem li ma jiflahx u altru persuna li trid tuża s-sick leave għal għan iehor.

Minn naha l-ohra, insibu lil dawk li jridu illaħqu ma kollox, 'ma' Alla u max-xitan'. U allura tarahom jagħmlu hafna over time li hu żejjed. Fih innifsu l-over time huwa tajjeb izda mhux iż-zejjed. Gie li tibda taħseb jekk x-xogħol full time sarx part time, u jiġu l-isptar ghajjenin kemm fiżikament u kemm psikoloġikament. Tiltaqa' ma' persuni li jidhlu ghax-xift ta' bil-lejl wara ġurnata xogħol. Hawn min qed ibati tassew. Insibu diversi konsegwenzi. Il-persuna stess li tkun qed tagħmel l-over time aktar milli tiflah, gie li tant tghejja kemm fiżikament u kemm mentalment, fejn tista' taqa' fi stress u t-tensjoni. Dan ikun rifless fuq il-kollegi ghaliex ikollhom jahdmu għal haddiehor, li jfisser ukoll nuqqas ta' attenzjoni lejn il-pazjenti. Konsegwenza ohra, hija li l-familja tal-persuna konċernata tibda tixpakka. Hemm min jagħmel aktar żmien ma' shabu fuq ix-xogħol milli jkun biżżejjed mal-familja. Hawn jistgħu jibdedw ukoll il-problemi għall-familja, speċjalment bejn il-miżżewġin, fejn gie li l-flus jiġu qabel il-persuna u l-familja. B'riżultat ta' dan, dak li jkun jista jhossu wahdu jew thossha wahidha u jibdedw ifittxu kumpanija ma' persuna ohra. U l-problemi flok jonqsu, jizdiedu b'pass imghaġġel.

Mela l-aħjar, l-aħwa, ejjew naghmlu saqajna ma' l-art, anke jekk inkunu imġieghlin. Inkunu realistiċi u naraw fejn huma l-valuri tagħna bhala bnedmin. X'kuxjenza għandna? Mhux biss nieqfu ftit, izda wkoll jeħtieġ li niehdu azzjoni bl-akbar responsabbiltà, ghaliex jekk ma nibdewx minna nfusna ma nibdew qatt. Dan ifisser ir-rispett lejn id-dinjità tal-bniedem. Irridu nibdew minna w malajr kemm jista' jkun.

Fr. John Vella ofm cap.  
S.Th. Lic. (Pastorale Sanitaria)



Kitba ta' JOE CAMILLERI

# L-ISTORJA TAN-NURSING F'MALTA

## MIS-SITTAX IL-SEKLU SAS-SITTINIJIET

....Ġabra ta' storja ricerkata dwar l-evoluzzjoni tan-Nursing f'Malta mill-eqdem żminijiet sa era aktar moderna. Harsa analitika dwar kif in-Nursing stabilixxa ruhu fil-hajja medika Maltija ta' Gżiritna.....

## IS-SACRA INFERMERIA

Is-Sacra Infermeria kien jimpjega 'ospedaliera' u 'sotto-ospedaliera' li xogħolhom kien li jiehdu hsieb lit-trabi ltiema li kienu jhalluhom fl-Infermerija u kienet tagħmel is-supervizzjoni il-'balie della casa' jew wet-nurse u 'balie di fuori' jew 'nutrici forastiere' (foster-mothers). L-'ospedaliera' kienet generalment tiġi mhaddma minn membri tal-istess familja. Mara anzjana bl-esperjenza msejha 'donna per la tigna' kienet ukoll impjegata biex timmedika lil dawk li kellhom il-hniex (ringworm).

L-Ordinanza Kapitolari, ippublikata mill-Ordni ta' San Gwann fl-ewwel ta' Ġunju 1631 ittrattat, fost l-oħrajn, it-tmexxija tas-Sacra Infermeria. L-Artiklu 24 kien jitratta fuq l-obbligu li kull Kavallier kellu biex iservi li kull pazjent personalment. Biex ma jkunx hemm konfużjoni, u mhux kull Kavallier imur l-Infermerija fl-istess hin, gie deżiċ li kull nazżjon jew 'langue' kellha taħdem għal-ġimgha mal-marid fil-ġħodu u fl-ġħaxija. Xejn inqas minn seba' Kavallieri, servjenti jew novizzi kellhom jattendu. Dawk li kienu jfallu mix-xogħol kienu ikkastigati bis-'septaine'. Dan ifisser li l-kavallier misjub hati kellu jsum għal-sebat ijiem shaħ. Fir-raba u s-sitt ġurnata kien jithalla jiekol hobż u jixrob ilma biss u kien jiġi msawwat fuq spallejh b'qasba.

Fil-ktieb tiegħu 'Malta-An account and an appreciation', Sir Harry Luke kiteb li fid-djarju

tiegħu r-Reverendu Henry Teonge, il-Vigarju ta' Sperrall ġewwa Warwickshire, meta kien abbord l-H.M.S.Assistance, fit-2 t'Awissu 1675 kiteb hekk bl-Ingliż originali ta' dak iż-żmien, fuq is-Sacra Infermeria *'The hospitall is a vast structure, wherein their sick and wounded lye. Tis so broade that 12 men may with ease walke a brest up the midst of it; and the bedds are on each syd, standing on 4 yron pillars, with white curtens, and vallands, and covering, extremely neate, and kept cleane and sweete: the sick served all in sylver plate; and it containes above 200 bedds below, besyds many spacious roomes in other quadrangles with in; for the chiefe cavaliers and knights, with pleasant walkes and gardens; and a stately house for the chiefe doctor and other his attendants.*

Fl-1725 ix-xogħol tal-Kavallieri



ġewwa l-Isptar gie spjegat aktar fid-dettall. Ir-regolamenti ppublikati f'dik is-sena, kienu jagħmluha ċara li l-assistenza tal-kavallieri lejn il-marid kienet biss fit-tqassim tal-ikel. Fil-fatt il-kavallieri u n-novizzi kellhom jaslu fl-Infermerija waqt il-hin tal-ikel biex iservu l-pazjenti, isahħnuluhom il-porzjon tagħhom u anke jibdlu l-ikel jekk il-pazjent ma kienx iħobb dak li kien ippreparat għalih-m'għandniex xi nġhidu, dejjem bil-permess tat-tabib. Xi kulltant anke l-Gran Mastru nnifsu kien imur l-Infermerija 'biex iservi l-morda sabiex jonora id-dmir tiegħu bhala ospedallier reliġjuż u biex jagħti eżempju tajjeb lil-oħrajn'.

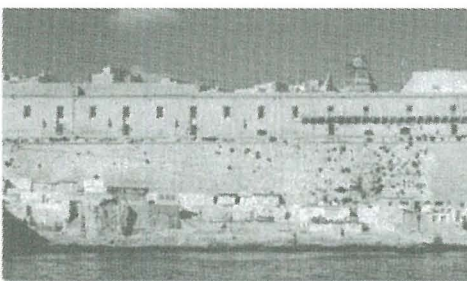
Xi snin wara, roster ġdida t'attendenza għall-kavallieri giet riveduta; minflok wiehed jaħdem għal-ġimgha, kull 'langue' kienet assenjata ġurnata fil-ġimgha għas-servizz ġewwa l-Infermerija. Il-Hadd kienet riżervata għall-'langue' ta Provence, it-Tnejn għall-Auvergne, it-Tlieta għall-Franza, l-Erbgħa għall-Italja, il-Hamis għall-Aragona, il-ġimgha għall-Germanja u s-Sibt għall-Kastilja u l-Portugall.

Skond ir-regolamenti tal-1725 kellu jkun hemm erbatax-il servjent (servi) jew gwardjani (guardians), li tnejn minnhom kellhom ikunu mal-kavallieri morda. Peress li l-popolazzjoni medja fl-isptar kienet tvarja bejn 350 u 400 raġel, kull servjent kien jieħu hsieb hamsa w għoxrin sa

tmienja w għoxrin pazjent. In numru ta' servjenti żdied sa għoxrin fl-1796. Ix-xogħo tagħhom ġie ssimplifikat bill kienu msejha 'jattendu 'l morda fil-ghodu u fl-ghaxija'. Xogħo dispregġattiv kien isir minn erbghin skjav Mislem u Kristjar li kienu jiġu skortati lejn l-Infermerija, mill-habs tal-Iskjavij fil-viċin.

Is-servjenti kienu taħt il-kontroll tal-'Infirmatur', li kien kavallier li ha l-professjoni u li kellu l-awtorità li jhaddem u jkeċċi lil impjegati u li jikkastighom meta ma jobdux ir-regolamenti. Ir-regolamenti kienu speċifikament jitolbu li s-servjenti kellhom jifirxu s-sodod kull fl-ghaxija u biex jibdlu l-friex ta'spiss u kemm hemm bżonn 'anke jekk jirrikjedi li jinbidlu aktar minn darba mal-ġurnata'. Hafna mis-sodod kellhom il-purtieri u dawn ukoll kellhom jinbidlu minhabba l-indafa li kien hemm bżonn, waqt li s-sodod u l-friex tal-pazjenti li kienu morda b'mard serju u kontagġuż, kienu jinharqu 'mingħajr riserva'. Is-servjenti kienu jinżammu responsabbli għat-telf tal-platt tal-fidda waqt li kien jintuża fis-swali.

L-istat tal-Ordni tal-1588 jixhet obbligu fuq l-Infirmatur biex jimpjega, bhala attendenti, dawk l-irġiel li 'kienu hawtiela u ta'reputazzjoni tajba'; iżda l-livell tan-nursing jidher li għodos f'livell baxx sa nofs is-seklu tmintax. Fil-fatt fl-1765 ġiet appuntata Kummissjoni Venerabbli biex tistharreg il-finanzi tal-infermerija u ddikjarat li l-attendenti 'itraskuraw lil morda fqar, u saħansitra immaltrattawhom, sakemm il-pazjenti kienu jixtruhom bil-flus jew bil-hobż'. Ittiehdu passi fis-snin ta'wara biex iwaqqfu dawn l-abbużi li kienu 'kontra l-Ispirtu tal-Ordni'. In-numru tal-attendenti ġie miżjud u s-salarju tagħhom żdied fl-1770 iżda l-imġieba tagħhom ma tjebitx matul is-snin.



Il-gwardjani ġew imqassma fi tlett kategoriji bi tlett skali ta' pagi differenti. L-iskop kien li fil-futur jimtlew postijiet tax-xogħol vakanti minn fost il-gwardjani bl-anqas skala ta'salarju, u biex jiġu mpjegati nies godda fl-anqas kategorija. Għalhekk lejn l-aħħar tal-hakma tal-Ordni, in-'nursing staff' kien jikkonsisti:

**Fl-ewwel klassi ta' gwardjani-**

4 fis-Sala l-Kbira

2 fis-Sala ż-Żghira (Saletta)

**It-tieni klassi ta' gwardjani-**

4 fis-Sala l-Kbira

2 fis-Sala ta'San Ġużepp għall-ekwipaġġ tax-xwieni u rġiel 'ta' klassi baxxa'

1fil-'falanga'

1fis-Sala tal-Magazini

**It-tielet klassi ta' gwardjani-**

2 fis-Sala tal-Feruti

1 fis-Sala l-ġdida.

Fil-kitbiet tiegħu Howard jispjega lil attendenti, fl-aħħar tas-seklu tmintax b'mod ikrah immens, pero' tajjeb ngħidu li Howard żar l-Infermerija fi żmien li l-ordni ta'San Ġwann kienet qed tbatti lejn it-tmiem xejn gloriuż tagħha. Huwa għalhekk jispjega l-attendenti u l-kundizzjonijiet tan-nursing fl-Isptar tal-Ordni bhala: Il-pazjenti (li n-numru tagħhom kien żdied għal-510-532) 'kienu servuti minn persuni l-aktar mahmuġa, imraqqa', bla qalb u inumani li qatt rajt. Darba sib 8 jew 9 minnhom f'xalata shiha ma pazjent moribond li kien f'dillierju. Il-Gvernatur qalli li kellu biss 22 servjent u li hafna minnhom kellhom jagħtu xi flus jew kienu kriminali u harbu biex isibu refuġju'. Biex nifhmu għaliex dawn id-delinkwenti ġew jahdmu bhala attendenti, wiehed irid jiftakar li sal- 1828,

knejjes u ftit postijiet ohra speċjali kellhom il-privileġġ li jagħtu protezzjoni lil dawn in-nies. Dan ifisser li persuna li għamlet att kriminali kienet tfittex refuġju mill-Uffiċjali tal-Liġi f'xi knisja jew f'wiehed minn dawn il-postijiet u l-pulizija eżekuttiva ma setgħetx tidhol fil-post biex tarrestah jew tiġbru. Fi żmien l-Ordni, is-Sacra Infermeria kienet tgawdi minn dal-privileġġ però nies akkużati bi krimini serji bħal qtil jew serq kienu miċhuda minn dil-protezzjoni. Dawk li kienu jsibu refuġju kienu jitpoġġew abbord l-ewwel vapur li kien se jhalli Malta u għalhekk mibgħut il-bogħod minn gżiritna. B'dan il-mod l-Infermerija helset minn dawk li ma rieditx, iżda l-vapuri ma kienux jitolbu kuljum u għalhekk kien inevitabbli li nukleju ta'delinkwenti kienu jiffurmaw b'mod jew iehor presenza kostanti tal-istituzzjoni, li n-numru tagħhom kien jiddependi mill-incidenza tal-kriminalità u t-tbāħhir.

B'kuntrast man-numru inadekwat ta'attendenti fl-infermerija, Howard osserva li madwar erbghin impjegat 'kienu jiehdu hsieb madwar 23 žiemel u l-istess numru ta' bhula fl-istat tal-Granmastru u li kienu jinżammu kollha nodfa'. Irrimarka wkoll li s-sodod tal-isptar kienu tant mahmuġa u mnittna li kien hemm bżonn li jifawhom il-fwieha'. Evidenza indipendenti ta'kemm l-istandard tan-nursing iddeterjora, kien meta djarjist Malti iddeskriva iż-żjara tal-Granmastru fl-isptar fis-6 ta'Marzu 1773, u dan kiteb li l-Granmastru 'ordna t-tneħhija tas-sodod li kienu madwar l-artal u li fihom kienu jorqdu s-servjenti(u innota li servjent ma nehhiex xi hmieg li kien hemm, għajjat lill-Infermatu u għedded li jibgħat lil gwardjani fuq ix-xwieni jekk ma jnaddfux u jibdlu l-lożor tal-morda'.

*Ikompil għall-harġa ohra.....*

# L-Isptar Monte Karmeli....

## Il-futur....

### Sehem Il-Haddiem

Ghal snin shah hafna ghadhom jistaqsu jekk l-isptar ghandux jinghalaq jew le? Mhux qed ngħid dan biex nohloq xi polemika izda żgur li ma naqbilx li naslu fi stat fejn dawk fil-bżonn, jiġru fit-toroq għaż-żufjett, abbuż, atitudini degradanti min nies ta' kull xorta, bħal ma gara f'pajjizi hekk msejjha żviluppata.

Allura x'inhi l-alternativa? Inqeghduhom f'xi dar fil-komunità jew f'xi hostel eċċ...?

Tentattivi kieku mhux neqsin minnhom izda per eżempju ir-rwol tal- 'Community Psychiatric nurse' ... dan jekk forsi jsir (għax hemm min forsi ghandu nteress li l-ghajnuna fil-komunità lill-marid ma ssehhx għal raġunijiet ovvjji ) meta ser nagħmlu pass pożittiv? Haġa wahda hija żgura, li jiġri x'jiġri u sakemm nilhqu dawn l-ghanijiet b'mod sew u xieraq u mhux sfurzati, il-haddiema f'dan il-qasam iridu joffru servizz xieraq li hafna drabi qed jiġi kkritikat ingustament. Nuqqas minn ftit m'ghandux iħassar il-hidma tajba li ssir minn bosta. Hemm hafna xi jsir mill-kbir saż-żgħir sabiex dak li jkun jagħti sehemu b'aktar dedikazzjoni u kuxjenza f'dan il-qasam ta' riforma fil-qasam tas-saħha mentali.

Sew jekk tkun Kok, Tabib, Infermier, Terapista, Social Worker, Skrivan eċċ... nuqqas jew dewmien fid-doveri rispettivi tagħhom johlqu nkonvenjent għall-marid u hafna drabi l-qraba tiegħu. Il-marid jew ahjar il-persuna, li minhabba s-sistema mhix żviluppata f'pajjizna jinsab f'dan l-isptar, iħares lejn il-haddiema bħala l-uniċi nies li jagħtu kasu.... forsi anke bħala membru ta' familja.

Ir-rwol ta' kulhadd huwa li jeduka ruħu fl-oqsma neċessarji speċjalment fejn jidhlu responsabbilitajiet filwaqt li n-nies fl-awtorità huma fid-dover li jaraw li jkun hemm :

- Tahriġ u tagħlim siewi
- Għarfien tal-kapaċità tal-haddiem
- L-ghodda biex taħdem
- Kundizzjonijiet sodisfaċenti fuq il-post tax-xogħol
- Tqassim tax-xogħol xieraq

- Opportunità u faċilità li tavvanza fil-qasam speċjalizzat jekk hemm potenzjal.

Il-flus huma bżonnjużi izda mhux kollox. L-għarfien u r-rispett lejn xulxin huma hteġa jekk irridu nħarsu finalment l-interessi imminenti u dawk futuri tal-persuni li jgħixu f'kull sptar. Xi haddiema huma passivi, jaħarbu mir-responsabbiltà/doveri u ma jsemmgħux lehinhom jekk forsi mhux f'xi forma ta' zekzik.

Jekk ma nagħrfux li rridu nissieltu, nikkumbattu kostruttivament għall- għarfien tal-professjoni, speċjalment fejn jidhlu l-infermiera, ser nibqgħu servjenti ta' haddiehor, nies tat-tindif u aġġettivi oħra degradanti b'detriment għal dawk li jgħixu fl-isptar.

L-interess fl-edukazzjoni, tahriġ, informazzjoni u formazzjoni huma l-kolonna għall-gejjieni tal-Isptar. L-edukazzjoni professjonali hi ta' investiment għall-futur tagħna lkoll.

Xi whud forsi jgħidu li qed nesagera, jekk huwa hekk staqsu lilkom infuskom din id-domanda:

*"Tbagħti minn dipressjoni professjonali ?"*

Fil-qosor, 'Kuntent li tiġi għax-xogħol ?' .... 'Xi jzommok li tagħti sehem akbar?' ... 'Tagħraf xi jfixxklek ?' .... jekk inti amministratur tithalla tagħmel dak li inti mħallas għalih?

**"Il-Vokazzjoni ma tfissirx li ttini bis-sieq u li naċċetta kollox" jgħidu xi whud.**

Kulhadd għandu x'joffri u b'għaqda, żgur li jistgħu jintlahqu għanijiet akbar. Kulhadd huwa mportanti u bżonnjuż u min jahseb li huwa akbar minn haddiehor nagħti biss dan l-eżempju.

**"Hu barmil bl-ilma, dahhal idejk fiħ u ċaqlaq l-ilma.... issib li wara xi ftit li tneħhi jdejk, l-ilma jerga joqghod bħal li kieku qatt ma ġara xejn.... daqshekk tista' tghid li tiswa inti wahdek f'dan il-baħar ta' xogħol."**

**R. P. D.**



## Large Harvard Study Results: More Registered Nurses Translates to Saved Lives

**Geneva, 4 June 2002** – Hospitals staffed with more qualified, registered nurses are safer for the patient and deliver higher quality care. These are the findings of a huge study, led by the Harvard School of Public Health. The study analysed the discharge records of 6.2 million patients, from 799 American hospitals. Results were published in the 29 May 2002 edition of the *New England Journal of Medicine*.

“This important study confirms what nurses, hospitals and patients have long known – higher levels of staffing by qualified, skilled nurses result in better and safer patient care,” commented Judith Oulton, Chief Executive Officer of the International Council of Nurses. “These results are applicable to hospital settings world-wide and should contribute to appropriate policy recommendations for the retention and recruitment of nursing staff as well as for nurse staffing ratios.”

The lead researcher for the study, Harvard economist Dr Jack Needleman, was quoted as saying that “Nurses are the eyes and ears of the hospital. If something goes wrong, they can catch the signs early before the problem gets worse.” He went on to say that problems could not be spotted if nurses did not have time to observe patients and added, “I estimate that hundreds or perhaps thousands of deaths each year are due to low staffing.”

The researchers found that in hospitals with higher nurse staffing, patients' stays were up to 5 per cent shorter and their complication rates were up to 9 per cent lower than in hospitals with lower staffing levels. A higher proportion of hours per day of care by registered nurses also resulted in fewer urinary tract infections and incidences of upper gastrointestinal bleeding and lower rates of pneumonia, shock and cardiac arrest.

The International Council of Nurses is a federation of 124 national nurses' associations representing the millions of nurses worldwide. Operated by nurses for nurses, ICN is the international voice of nursing and works to ensure quality care for all and sound health policies globally.

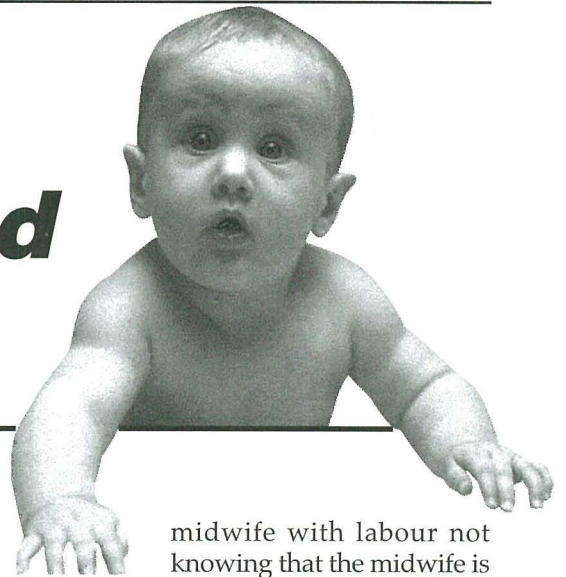
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**email: [carrwalk@icn.ch](mailto:carrwalk@icn.ch) - Web site [www.icn.ch](http://www.icn.ch)**

Press Information • Communiqué de presse

### International Council of Nurses

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 Website: [www.icn.ch](http://www.icn.ch)

# Born in the Twenty-Second Century



Modern technology has much comfort and ease of mind to our homes. Our lives seem to be surrounded by gadgets of all sorts; indeed our lives revolve around them. We feel lost and helpless when there is a power cut or a power failure. We seem to have lost the natural ability of dealing with minor everyday chores. Even cooking, washing clothes and cleaning the house seem unbearable. Our lives have become a far cry from that of our ancestors who had only their hands, some crude tools, and their imagination to help them along. We wonder how the pyramids were built or how such fine and delicate gowns were sewn with such patience and care. We also wonder how teeth were extracted or how babies were born without the help of modern technology.

Yet childbirth is one of the most natural experiences a woman can go through or rather should go through. Today, most women in labour are likely to be pinned to their beds, attached to machines, and told what to do in a situation which should be as natural as life itself. No longer can women follow their natural instinct. Instead, they are closely monitored almost as though undergoing a surgical procedure. The midwife has now become the doctor's assistant whereas, in the past, she was a queen in her own realm. She was known to everyone in the area and treated with great respect, almost with vulnerability. She had the full command, making all the decisions while the doctor was called in for very remote cases. Indeed, the doctor's presence was considered almost ominous and meant that something was terribly wrong, while caesarean section was only very rarely performed and then only in matters of life or death.

Today, almost from conception, the growing baby is seen by ultrasound and heard first with the doptone and later with a fetal monitor. True, women like to hear and see their baby but abdominal palpation and the Pinard's stethoscope are increasingly being pushed aside to be replaced by more sophisticated technology. These natural skills particular;ar to the midwife are being threatened and can even be forgotten. More and more pregnant women turn to their doctor or obstetrician, forgetting that the midwife is also a practitioner and also capable of following normal pregnancies and detecting abnormalities, when the doctor will then take over. Most women associate the

midwife with labour not knowing that the midwife is an expert in her own field and is also capable of caring for women both during pregnancy and after birth. Much counselling can be given by the midwife amongst which include advice on diet, lifestyle, exercises, baby's layette, pain relief in labour, breastfeeding and care of the baby in the first weeks of life. Most midwives give such advice in group sessions or 'Parentcraft lectures'. Here ,parents-to-be learn much what to expect during pregnancy and labour and their fears of the unknown are greatly alleviated gaining much confidence in their own ability of having a baby. Even in this field, the midwife has acquired competition through childbirth educators, nutritionists, physiotherapists and breastfeeding counsellors all wanting their say in the matter.

Midwifery is one of the oldest professions, yet its value is being threatened by modern technology. It is true that many babies' lives have been saved thanks to fetal monitoring while maternal death at childbirth is almost unthinkable. Women no longer have to bear the agony of labour but can even choose their own method of pain relief. One type of pain relief becoming increasingly popular is epidural anaesthesia where the woman has hardly any sensation from the waist down and therefore feels no pain at all while delivering her baby. Such pain-free labour is indeed to be applauded but, for most women, childbirth can be short and uncomplicated whereas, with epidural anaesthesia, the second stage of labour tends to be prolonged and sometimes the baby may have to be delivered by forceps or ventouse delivery.

Science has made giant steps in the obstetrics field and babies not only come when we want them but also how we want them. But in our scurry of development, we may be turning pregnancy and birth into a medical condition, forgetting that these are a natural part of life and women should have confidence in themselves when having a child and not feel that they have to rely on modern technology to do so.

*M' Louise Bugeja*  
SRN SCM

## PLASMON - A QUALITY SYSTEM

In 1902, Plasmon embarked on an important mission: that of giving infants specialised food with a correctly balanced nutritional value but also being rich in taste. This also gives parents the security of knowing that their young are being fed well.

This has always meant preparing safe and high quality infant food using production methods of the most advanced nature. In order to meet the nutritional demands of babies and also the demands of discerning parents, the OASI ECOLOGICA was launched in the 1980's. This is a specialized program, which encourages and directly involves farmers and animal breeders with the end result of total quality control of our products. With this having been made possible, all our products are not only safe and natural and with a high nutritional value, but they are also free from any contamination that can arise from a polluted environment or from farming malpractices.

The OASI ECOLOGICA program is a very broad and complex system of monitoring and direct control over all of the production line. The idea behind this is really very simple and consists in ensuring that our raw materials are 100% genuine so as to yield products that are of the highest quality and which are nutritionally correct. Only in this way can the OASI ECOLOGICA guarantee the highest quality in every Plasmon product. In order to achieve such high standards, Plasmon has identified farms and pastures even on international territory. These are situated far from sources of pollution and contamination and also chosen soils, which are rich and fertile. It has established a strong working partnership with farmers and animal breeders who believe in its mission and together with expert agronomists and veterinarians strives to produce excellence in quality.

The Plasmon Quality System, which is rigorously practiced in all of the OASI ECOLOGICHE found worldwide, consists mainly of the following:

- ❑ Control and management of methods of production of raw materials through strict control in the choice of location. This is supported by direct supervision by Plasmon experts of every phase of production.
- ❑ Prevention of all possible risks of contamination of the raw materials through rigorous control of environmental qualities.
- ❑ Origin of all raw materials can be traced back to source i.e. the apple to its orchard and the beef to its herd.
- ❑ Constant validation following modern principles of Quality Assurance from cultivation to packaging and storing.

The following are some vital statistics...

Here is how the OASI ECOLOGICHE Plasmon, are distributed in Italy and worldwide:

- ❑ 1137 fields in France and Italy for the growth of wheat for the production of Plasmon cereals
- ❑ 510 pastures in Bavaria where cattle are reared for the production of Plasmon milk products
- ❑ 334 pastures in Uruguay where cattle are reared for the production of Plasmon beef and veal products. 3 sites have also been identified for rearing pigs in Holland
- ❑ 326 Fruit orchards in Italy, Spain, Brazil and Bulgaria for the growth of fruit
- ❑ 69 breeding sites where the rabbits and poultry are reared for the production of Plasmon chicken and rabbit products
- ❑ 17 Fish Farms in Italy for growth of trout. 5 other farms have been located in Chile for the growth of salmon.

Plasmon has taken great care in identifying the best possible methods and resources to bring us the wide range of infant food, which is available. No corners have been cut, and so, every health professional should feel reassured that what they are recommending is of superior quality, and can not just be considered as any infant food found in the market.

# Ejjev Nieqfu Ftit...

## Kieku Inti X'Tagħmel ?

Kieku fid-dinja jien nerga niġi  
Tgħid nerga nahdem l-isptar?  
Jew naghzel xi sengħa ohra  
Għax nahseb li nkun ahjar?

Hanut ta' barbier niftah  
Fih indum sa fil-ghaxija  
Jekk widnejh jiena naqtagħlu  
Mhux tiegħi ser tkun il-htija?

Ta' bennej kieku jien narma  
'Ma trid titla taħdem fl-gholi  
Gebel tqil iġġorr fuq spalltek  
Jien nahseb li dan mhux xogħli

Kieku hanut tad-deheb niftah  
Naqla' flus kemm jien irrid  
Izda x'jigri jien u naghlaq  
Jekk kannha jien ma rasi nsib?

Fuq tal-linja immur nahdem  
Minn fil-ghodu sa fil-ghaxija  
Inzommilhom tal-biljetti  
Imma le nagħtihom bqija

Forsi narma ta' mekkanik  
F'dawk iż-żjut ta' mal-karozzi  
U mbagħad jekk xi waħda niżloq  
Żgur nispiċċa jien bil-krozzi

Spizerija mbiegħ il-pirmli  
Mhux taċ-ċajt dil-pożizzjoni  
Alla hares xi żball tieħu  
Għax dan xogħol ta' attenzjoni

Bosta domt nahsibha sewwa  
Infermier jien hsibt l-ahjar  
Għax jekk wara kollox twegġa'  
Tispiċċa żgur ġewwa l-isptar

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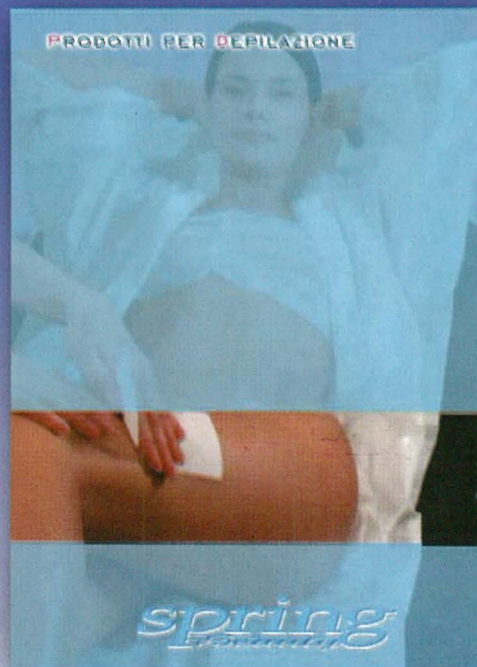
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