

## **37 years in mental health nursing: “patients are the best teachers”**



### **Clinical Risk Advisor Justin O'Brien reflects on his mental health nursing career.**

After 37 years of working in mental health nursing, Justin O'Brien has seen it all. He started his career as a nursing assistant at Springfield Hospital and is retiring from the Trust after spending the last five years as a Clinical Risk Advisor at SWLSTG.

Justin took some time to reflect on his varied career journey and how much the mental nursing profession has changed since he started in 1978. The one thing that has kept him engaged is the varied roles and opportunities mental health nursing has continued to provide.

Justin's first experience of nursing was in the US where he worked as a recovery room assistant in a general hospital, where the main patients were young amputees from the post-Vietnam war. He returned to England in 1978.

“When I first started as a nursing assistant the hospital had over 1100 patients in the hospital. The wings were split into male and female wards – the female wings were named after flowers and the male wings were named after trees.

“Juniper Ward was the first ward I worked on which had 26 male patients with long term conditions, mainly schizophrenia. Many patients were dealing with post trauma from having served in the armed forces during the Second World War. A number of them were diagnosed with the term General paralysis of the insane (GPI).

“For a lot of patients, the hospital was their home. A number of patients also had learning disabilities. One man has been in the asylum since he was 12-years-old.

There was originally a farm on the site as most asylums were self-sufficient back then. It was its own community. The down side was that patients became very dependant and institutionalised. Patients were treated as a number more than an individual. Not all of the old institutions were bad though, staff worked within the framework, training and knowledge available at the time. Something overlooked by many authors that have written about the asylums.”

Justin remembered his first mentor and the impact he had on his clinical skills.

“ Tom Barnes ( Charge Nurse, Juniper ward) was one of the most caring nurses I came across. He always made sure the patients physical and social, practical needs were maintained . He ensured they were safe, well-nourished had regular medical health checks and were dressed appropriately, he was a great teacher. He taught me basic but really important things in my work ahead, such as how to calculate medicines milligrams and micrograms, administering medication, pouring concentrate syrup eye level skilfully holding the bottle and lid in one hand whilst pouring the medicine, understanding the side effects of some of the drugs, with their parkinsonian symptoms, and understanding why medicines were stored in dark bottles in scientific detail.”

Aside from his mentors, patients have always been the best teachers.

“I was taught how to play chess by one of the patients, a Jewish man that was in the Holocaust as a child. It was a privilege to learn from someone who had been through so many traumas in their life. “

In 1980, he started training as a registered mental nurse at St Georges and became a qualified Registered Mental Nurse in 1983.

Justin said the difference in training then is that you received a lot more hands on experience as a student in the first few months of your training, which included a lot more responsibility: “You learnt an awful lot as you were thrown in the deep end.”

After working as a staff nurse, Justin did his general training at Springfield Hospital and the now defunct St James’s Hospital: “General training enhanced your chances of career progression”. In 1987 as an RMN, RGN he was appointed Charge Nurse in an acute admission ward.

He worked at Springfield Hospital for ten years before being appointed as a Senior Nurse at Cane Hill Hospital in 1989 (Coulsden, Surrey) where he as part of a team oversaw the closure of the hospital, moving 200 patients who had lived their lives in the hospital into supported accommodation.

“Patients went from living in a ‘nightingale ward’ to having their own bedroom, television, living in a small house with other residents. Each supported house provided 24 hour nursing and support care. Much of the early months was helping the residents to adjust to a new environment which anyone would find difficult.

In 1993 Justin worked as an operational manager at St Thomas’s Hospital where he managed inner city acute services, including outpatient services, emergency clinics, and in patient wards.

“It was about managing teams, staff, continuity of care, budgets, and trying to retain good staff. I always found the more you take an interest in your staff, their well- being and investing in them, in return you would get team work and loyalty.”

As a manager, he always tried to ensure that he worked some shifts on the wards.

“I tried to work on the wards, maybe once or twice a month. I think staff respected that, they knew you were aware of the challenges they were facing every day.”

After St Thomas’s, Justin took on the role of Director of a therapeutic communities where people with psychological needs were treated in a (therapeutic milieu) community setting. “The treatment was about learning to live together, to trust oneself, take on responsibilities to trust and be trusted by others, and be in psychological treatment. These principles of therapeutic process came from both during and after the end of World War 2 where officers (Tom Main, Maxwell Jones et al) observed how one army battalion were better at looking after each other’s health and wellbeing more so than another one.”

He describes that as the toughest role he held. “You were the Daddy, Mummy and director all in one. It was a challenging job”.

After 16 months Justin left this post and took up the role of Director of Nursing at the Priory Hospital for 5 years.

“It taught me about different treatment models. I learned about the 12 step programme (Alcoholics Anonymous Minnesota model). It was an interesting time because the hospital was very much in the media. The team was encouraged to be innovative and take a lead in different treatment areas.”

Justin returned to the NHS for an operational role at Kingston Upon Thames in adult mental health services.

“I wanted to come back to the NHS, it felt right for me”. He managed in-patient wards and community mental health teams. I had a diverse range of responsibility and one

of the real values of the Kingston borough was how well health and social care services were integrated.

Coming full circle, 11 years on Justin returned to Springfield and was seconded as Assistant Chief Nurse for a year then moved into risk management which involved managing complaints, incidents and emergency planning. He provides clinical risk training and support to teams on the ground.

Reflecting on his 37 year career, Justin says he feels privileged.

“The organisation has given me incredible opportunities. In 1996 I was part of the first group of Charge nurses (excellent nurses such as Gary Tubman, Sue Denby, Marcus Evans, Daisy Choy and others) to be enrolled on a one year Psychotherapy course developed by Consultant Psychotherapist Dr Patricia Hughes. It was an eye opener for me in terms of how the art of ‘just listening’ to people can be such an effective tool and part of the therapeutic relationship/ psychological treatment. We saw patients from the waiting list at the Psychotherapy department at Clare House St Georges Hospital. The course also involved attending the one year Institute of Group Analysis (IGA) Introduction to Group Psychotherapy course. It was also an opportunity to be in an experiential therapy group which was so insightful and of great learning in my own practice as a nurse.

“I also undertook a 2 and a half year training in Cognitive Analytical Therapy (CAT) in 2010, which I had always been interested in when I managed the service at St Thomas Hospital. Following this in discussion with the Wandsworth Complex needs team (Dr Jale Cilasun and Angela Humphreys- Hunt ) we set up a CAT service and I now supervise a group of CAT therapists who deliver this service, the first CAT service in SWLSTG.

“You need things to keep you enthused and engaged in patient care. Being involved on the ground is really important. I run Clinical Risk training and a CAT supervision group. I am also an MBT practitioner for the last 3 years which has helped me in my work with Ian Higgins (expert clinician) as a member of the Virtual Risk team that supports teams and also family liaison lead following serious incidents.”

Much of Justin’s learning throughout his career he contributes to the patient’s experience.

“As a mental health nurse we are privileged to have this role. Seeing people in despair and knowing they can trust you is a real responsibility. People know whether you are caring and genuine. Even when people are in their most distressed or volatile state they can sense it.”

After working in countless different roles within mental health nursing he is optimistic about the future of the profession.

“In comparison to other public health arenas, it’s still a job with direction and security despite a lot of changes and previous uncertainties. I enjoyed the people I’ve worked with and felt I was doing something valuable and that I was making some difference. Equally I have also eternally valued working with and learning from with a wide variety of such skilful and experienced clinicians some of whom have become lifelong friends who I would like to thank.

Justin will still be working on a consultant basis for the Trust, so it’s not goodbye forever. “I will be coming back to work within Nursing Directorate and doing clinical risk training and CAT work.”

### **Justin’s top tips for developing your Mental Health nursing career:**

1. Seek out supervision and mentorship – make it an ‘expectation’ and expect consistency.
2. Most people start off working at an in-patient setting which is really important as you get to be part of the patient’s journey. I would say try and stay at least 18 months and learn from patients and your peers. Learn to contribute to an effective team and after that period start thinking about other opportunities
3. Creating opportunities means learning new things – look for courses and opportunities outside the regular nurse management structure. There are so many different specialities out there.
4. Always remember to take care of your own well-being.

If you are interested in growing your nursing career at the Trust, read more here:  
<http://www.swlstg-tr.nhs.uk/about-the-trust/why-work-for-us/work-with-us/nursing-at-the-trust>

July 22 2016