



Speak up for nursing

Our campaign ambassadors are having media training. Pat Healy joined them at one of the courses and passes on some tips

CLINICAL NURSE specialist Marina Copping remembers that when she heard former RCN Scottish secretary June Andrews on the radio 'she always spoke well for nursing'. Ms Copping, who works in health informatics at West Lothian Healthcare NHS Trust, discovered the secret of Ms Andrews' success when she met her at a conference. 'She told me she had received RCN media training. So I wanted it, too.'

Now, thanks to our *Nursing the Future* campaign, Ms Copping has achieved her ambition. She recently went along with three other *Nursing Standard* ambassadors to the RCN to experience media training for herself. She was brimming with enthusiasm at the start, although, like the other ambassadors, she had virtually no previous experience of contact with the media and had little idea of what was coming. 'It is wonderful to be here,' she declared.

Less sure was Deborah Birtchnell, who works at The Mount prison in Hertfordshire as lead nurse for chronic disease management. 'I have not got a clue about this course,' she said when she arrived. 'I don't know what to expect and I didn't even know what to wear.'

Ms Birtchnell was highly commended in last year's *Nursing Standard* Nurse of the Year awards and so had some experience of being on the receiving end of media attention. She was photographed by *Nursing Standard* and held a telephone interview with a local paper. The subsequent coverage of her achievement resulted in positive feedback from colleagues who rang and emailed her with congratulations. But Ms Birtchnell was then talking about herself and her own work, which she found easy to do.

At the media training course, she found herself having to imagine different scenarios affecting nursing and the wider health service and be interviewed on them. This was more difficult. 'I am a nurse, not an actor,' she said.

Yvette Wells, a modern matron and children's nurse at Taunton & Somerset NHS Trust, took part in a local TV programme for the BBC in the late 1990s about children with complex needs. She came to the course hoping it would give her an insight into how the media works and build her confidence in talking on air.

Andy Schofield, lead nurse in A&E and medicine for East Kent Hospitals NHS trust, hoped the training would give him more confidence in dealing with the media. He wanted information on how to approach interviews, including what not to do and say.

The training itself began with Andrew Culf, home news editor of *The Guardian*, describing a day in the life of a national newspaper, including some discussion of when health stories stand a chance of appearing in the paper. Mr Culf had undertaken a similar presentation the week before, and he said he had taken nurses' comments that the paper tended to present nursing in a negative light back to *The Guardian*.

In at the deep end

Next, the ambassadors were thrown in the deep of an interview. Phil Longman, news editor of the London news radio station LBC, quizzed them on possible stories of the day. These included a hostile *Daily Mail* article about the standard of nursing care in a named hospital, a trust dropping from three stars to one, and the impact of

'This training has made me see interviewers as real human beings'





Nursing the Future



Nursing the Future is our year-long campaign to enhance the image and reputation of nursing and midwifery in the UK. With the help of our readers, we aim to rebrand the image of nurses and midwives for the 21st century. We will encourage readers to publicise what they do and celebrate all that is dynamic, complex and challenging about the professions. We will profile excellence and highlight some of the daily success stories of modern day nursing and midwifery. We aim to make 2004 a year for nursing and midwifery. Join us in nursing the future...

Campaign aims

- To enhance the image and reputation of nursing and midwifery.
- To challenge and dispel misconceptions about nursing and midwifery.
- To empower nurses and midwives to publicise what they do.
- To encourage nurses and midwives to 'sell' or talk up their professions to future generations.
- To raise the public voice and profile of nurses and midwives.
- To encourage more respect for the professions.

the new TV nursing drama *No Angels*. There was only one positive scenario – about a nurse-led project to get patients with eating disorders to overcome their fears about food by working on a vegetable garden and eating the produce.

Lucy Hamilton, the RCN press officer hosting the day, warned the ambassadors that these interviews would be the hardest they would ever do, because the first was always the worst. The ambassadors tended to agree with her when the recorded interviews, which lasted about three minutes, were played back and evaluated.

There was an initial tendency to use nursing jargon, but overall the ambassadors did get their messages across. By the time they were interviewed again, this time standing as if outside a hospital, they were much clearer and powerful in promoting nursing.

Ms Birchnell, for example, brought the interviewer to a full stop by insisting adamantly that in her 20 years of nursing no one had ever behaved like the nurses in *No Angels*.

The day ended with Adele Waters, *Nursing Standard* campaigns editor, explaining how the nursing press differs from other media – by essentially being on the side of nurses.

All the ambassadors found the experience useful. Mr Schofield said he now feels 'less daunted by any potential interview, locally or nationally', ►



Posed by model

although he would have appreciated more time to prepare for the interviews, which were the most popular part of the day.

All the participants were fascinated by the presentation in which Mr Culf talked about how the news agenda changed throughout the day as news broke and developed. He likened it to a car park's 'full' sign – one story in, another story out. 'I was surprised by the continuous fire fight it seems to be on a daily basis,' said Mr Schofield. 'In some ways it is surprising that you end up with a coherent newspaper the next day.' And he added that he could draw parallels between his own work and the pace of a daily newspaper.

Mr Schofield confessed that he had chosen to go first in the interviews because he was a little bit worried – but then he found that he really enjoyed it. 'I did not find it as difficult as I expected it to be. We had someone very experienced to help us and guide us through it,' he said.

A key message of the day for him was that experienced nurses 'are more than capable of dealing with the media and pushing their profession forward in terms of the good work that goes on'. He learned that 'it is not too difficult to get in touch with the local press' so that more promotion of the positive side of nursing can be achieved instead of just letting it go.

Ms Wells collapsed in giggles and came to a complete stop at one point during her first interview when she was being questioned on the impact on nursing of *No Angels*. Mr Culf had forecast that the programme would receive salacious attention from the tabloids because it had all the ingredients – a TV soap with sex and nurses. He admitted that the broadsheets would be interested as well, but would attempt to dress it up as a more serious issue.

Despite her nerves, Ms Wells was able to put across positive points about the issues. She insisted that the TV show is 'drama, not real life' and that real nurses are professionals who provide care for patients. By the time she came to do her second interview, she was fluent and calm and put her points across without a break. For her, the training had overcome her preconceptions about

being interviewed and about how the media works. 'I have the same stereotypical views as other people about the press, including the idea that they only want a story,' she said. 'But this training has made me see interviewers as real human beings. Phil was really good. He put me at my ease.'

She thinks that to be fully comfortable with interviews you need practice, and she found the comments about her performance useful.

'I felt more comfortable the second time, taking on board some of the comments,' she said. 'But I still had that apprehensive feeling inside.'

She now believes that 'the media are managed by people. They have a job to do in much the same way as everyone else. Being interviewed by the media gives you the opportunity to put forward your own key messages about nursing – and those are opportunities you need to take.'

For Ms Copping the day more than met her high expectations. She raised a question about the relationship between *Nursing Standard* and its owner, the RCN. Representatives of both sides insisted on their independence of each other, which they admitted could lead to tensions.

Ms Copping commented: 'I was amazed at how the whole thing works. Even speaking about the difference between the RCN and the magazine was fascinating.' She was pleased to have gained an insight into how to connect with the media, including local and national press, how to speak to them and make the first contact.

She found *The Guardian* presentation fascinating, too. She found Mr Culf 'sincere' and felt more confident about getting the nursing message across because she now knew how they do it. 'If you approach them on the right day, you have more of a chance. We are more likely to get our message across by highlighting an issue like nursing recruitment or the ageing population. You have to turn it that way and put a positive spin on the comment.' For her the main lesson of the day was: 'I can do it. If I have to I can. I had no previous experience, but I was interested, not fearful. I wanted to see what happens.'

Ms Birtchnell confessed that she had become more frightened as the day went on, although that did not show to her fellow trainees. She said the day had been interesting, although she found the interview practice sessions 'an alien situation'. 'I find speaking in front of people very difficult. This day has helped because it has made me a bit more aware of what to expect. Phil was marvellous. He was absolutely brilliant.'

She would have been more comfortable talking about caring for someone with diabetes because 'I like to have confidence in what my message is. In these interviews, I didn't know what the message was because I don't know the subject matter.' For her, the key message of the day was: 'Don't feel frightened and be as natural as possible.'

Pat Healy is a freelance journalist

What would you do if a journalist wanted to interview you? Would you panic and put the phone down, run to your manager and let him or her deal with it, or see it as an opportunity? *Nursing Standard* asked three journalists for tips on how to 'manage the media'.



Kate Williams
Health deputy editor
The Sun

When I was a news reporter at *Nursing Standard* in 1994 the national newspapers were awash with nursing stories every day. Today the

amount of media coverage nurses receive, good or bad, seems to be less than half. There are valid reasons, no doubt.

It may be because employers make it difficult for nurses to talk to the press or more than likely you are just too busy. Let's face it, caring for patients is your priority, but there is no doubt that ten years on it is more difficult for journalists to hear anything from the nurse's mouth.

Aha. I hear you say, but you work for *The Sun*. Why would a nurse want to talk to a tabloid newspaper? Well, here are just few good reasons why:

- *The Sun* is the UK's biggest selling newspaper with 8.5 million readers every day and many of them are, will be or have been NHS patients.
- If you don't talk to *The Sun* you are not talking to your patients.
- If nurses do not speak to the tabloids, doctors and patients will and the nursing voice will not get heard, which is a shame when there are so many of you.
- And last but not least, the public does love nurses and appreciates the work you do, but do not take the angel image for granted.

Sun readers need to hear from nurses about how they save lives, how they work double shifts to keep the NHS going and their views on the *No Angels* TV soap – if nurses do not tell them who will? So get in touch with your hospital press officer, the RCN or Unison press office and put pressure on them to talk to the tabloids. And ring us direct if you have a story.

Union press offices tend to be reactive rather than pro-active. It is usually fine getting responses from its media trained and highly paid senior staff, but when it comes to providing positive stories about individual nurses they are not as good as other professional organisations.

You can always talk to a journalist first to get a feel for what they want without committing yourself to helping them with an article – once you have built up a rapport they are more

Paul Stuart



On the hunt for stories: Philip Longman (second left) and Andrew Culf (centre) quiz the ambassadors

Tips on media management

likely to agree to read your quotes back to you. We will not change the style – and you might find ‘journalese’ very different from how you would describe something but reporters will always try to change an inaccurate detail.

Tabloid journalism is all about people, whereas with the broadsheets it is generally about issues. And if tabloids do write about issues, we always need people to illustrate them. There is no catch – it is simply how the paper is put together.

Plus we always need pictures. This is simply to do with the look and layout of the page. Time and again our stories have had to be pulled from the paper because the nurses involved will not pose for photos. Often nurses get upset when they are asked to wear a uniform for a picture, especially when they do not usually wear one. Again, we are not stereotyping. We just need to have different shots on a page and if everyone looks the same it makes for a boring layout. So please do not be

offended when we ask for this. Just putting on a name badge can help.

Be positive and stick to the points you want to make. Talk about the impact your work has on patients and find out beforehand what sort of story you are being asked to comment on.

If you do not feel comfortable talking about an NHS scandal do not, but make sure there is a senior nurse or union rep who will – it is truly pathetic when there is no nurse who can comment. A few months ago we did an NHS feature and spoke to different members of staff at a trust, including pharmacists, nurses, lab staff, doctors, surgeons and cleaners. The nurse was compassionate, honest and gave the clearest insight into what was really happening. We know there are thousands more of you like

that. Do not be scared. Give us the chance to tell your story.

To contact *Sun Health* ring 020 7782 4099 or email health@the-sun.co.uk

Philip Longman
News editor, London radio station LBC

‘It is eight o’clock in the morning and the radio newsroom team are getting ready for their morning meeting on what items to chase for their lunchtime programme. There is a big political story about the home secretary allegedly misleading parliament about immigration figures, a scandal about a group of premiership footballers on a foreign trip with their club and news of a major hospital facing the temporary closure of several of its wards because of an outbreak of infection, which critics are claiming was caused by inadequate cleaning and poor standards of nursing.

The pattern is pretty much the same, whether it is a local radio station, Radio 4’s *World at One* or the ITV lunchtime news. Editors and their staff usually have a blank sheet of paper to start with, so the pressure is intense to track down interviewees, either live or

pre-recorded and the race is on to meet the lunchtime deadline.

One of the producers is assigned to the hospital story. She rings the hospital trust, whose spokesperson is only prepared to issue a bland written statement. She knows that her editor will demand ‘actuality’, the technical term used ▶

‘Do not be scared. Give us the chance to tell your story’



Sound bite: whatever the format, make sure you have marshalled your facts

by people in broadcasting to describe interviews. So she despatches a reporter with a radio car to 'doorstep' the hospital to see if he can get staff to comment. The producer also rings the RCN's press office in London. The college is keen to put nursing's side of the story and gives a contact number for one of *Nursing Standard's* 'nurse ambassadors' at the hospital.

So, if you are that ambassador, what are you going to face? And what preparation should you make for the interview?

Find out exactly what the programme hopes to achieve. Is it a live interview or pre-recorded? Is it a one-to-one interview or a debate with someone else involved? If it is pre-recorded, it may be edited as a 'sound bite'. If that's the case, it is important to get your main point over as clearly and succinctly as you can. Whatever the format, make sure you have marshalled your facts and know what you want to say.

Most interviewers will play fair, especially with people who are not practised broadcasters. But they are looking for an 'angle' that will make the story stronger. So while answering the questions openly and honestly, try to bring the interviewer back to your points. Do not be defensive or lose your temper. But if you feel strongly about the subject do show how much you care. If mistakes have been made – as in the case of the infection outbreak at the hospital – point out the steps you and your colleagues are taking to make sure they do not happen again.

Try to conquer any nerves by proper preparation. Remember it is only one person talking to you. Ignore the fact that millions may be listening. There is an old expression in broadcasting that, whatever the pressure, however many things go wrong, 'no one dies'. That is not the case in your profession. So remember, it is only an interview.



Malcolm Rigby Freelance writer who has been contributing to local newspapers for the past decade

Make friends with your local journalists. Use them as they would like to use

you. The big difference between local journalists and those working for the national tabloids is that the local reporter will be looking to do a different story with you at a later date. Ideally, local reporters will be hoping that you come back to them with a story. When you have finished talking they will put your number into their contacts book. They want to be your friend.

The local paper is a community paper. Undoubtedly there will be a certain amount of doom and gloom, but there will also be a good number of 'happy people' stories about achievements and innovations. People buy the local rag to find out what their neighbours are doing.

Andy Warhol said that everyone gets 15 minutes of fame. Well in the local newspapers you probably get nearer to 50 minutes. Here are a few tips to make the most out of your time under the dim light that is local notoriety:

- If a journalist rings you up, insist that you have to get permission first from your line manager or press officer. There are still people in nursing management who are unnecessarily wary of nurses talking to local papers.
- Take the time before you actually do speak to the journalist to get your own thoughts on the issue in order. Preferably write down the chief points that you wish to get across.
- Keep your answers simple. Your story will be just one of many that the journalist is doing that day and the chances are he or she will not be a specialist in medical matters.

'A nice human interest story wins out every time against a dry company press release'

- Make it easy for the poor hack, try to think of your main points in sound bites. What the reporter is really looking for is catchy quotations. Clichés – we love 'em.
 - Speak slowly. This gives you more time to think about what you are saying. Journalists will not mind because there is less pressure on their shorthand.
 - Do not let reporters lead you out of your sphere. If they are insistent, recommend someone else better qualified.
 - If it is a feature length piece that is being written, ask the journalist to read you the finished product before going to print. Journalists are under no obligation to do so and may say no, but it is in their interest to make sure the details are correct.
 - Feed your local paper 'happy' news stories from your workplace – probably through your press officer. Even internal awards and career milestones are of interest. You may be surprised at what they are willing to include. A nice human interest story wins out every time against a dry company press release.
- By creating relationships with local reporters you can act as an outlet for 'happy stories' that will raise the profile of your department or trust and increase staff morale. But it will also mean that when someone is doing a critical piece you will have already established a bond, which will make it much easier for you to get your position across. Local journalists are taught to nurse their contacts, so nurse them back. ■

Interview preparation

- Find out exactly what the programme hopes to achieve.
- Will it be live or pre-recorded?
- Is it a one-to-one interview or a debate with others involved?
- Have your 'sound bites' ready.
- Get your main points over as clearly and succinctly as you can.
- Make sure you have marshalled your facts and know exactly what you want to say.