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## Spotlight on: Shirley Ingram



SHIRLEY INGRAM is an advanced nurse practitioner (ANP) in cardiology working in Tallaght Hospital. Her primary focus is assessment of patients who come to the emergency department with chest pain. It is her role to rule out acute coronary syndrome or heart attack. After these have been ruled out, she then assesses the patient for angina or other cardiac complaints. Her aim is to discharge the stable patient to a nurse-led chest pain clinic for further investigations.

Ms Ingram runs the chest pain service in Tallaght Hospital with two clinical nurse specialists and another ANP. As an autonomous practitioner, many of her patients will not need to see a doctor, however she practices as a part of a multidisciplinary team, for case management if needed. The the team includes both cardiology and emergency doctors and nurses. She knows she can always rely on them for clinical support. A key part of her roles is a taking a comprehensive heath history and advanced physical assessment, which included cardiac auscultation. These advanced skills assist her is forming a diagnosis.

Ms Ingram and her team started the chest pain service in 2012 and within the first two years they had reduced admissions due to chest pain to the hospital by 36%.

"Evidence shows that a nurse-led service can really have a powerful impact, not only on the patients journey through the hospital, but also on bed capacity and admissions to the hospital."

Ms Ingram admits that at 17 she had little choice but to go into nursing as university was not an option for everyone at the time. Her mother really helped her to decide what she wanted to do with her life and played an instrumental role in steering her along the path to nursing. Her ultimate motivation, however, was to care for people, and this has stayed with her throughout her career.

She feels the caring role is vital for nurses, although there is a perception that the nursing/caring part of the advanced role is diminished. Ms Ingram however believes that the caring component is at the core of role.





Shirley Ingram: "Nurses should always be ready because you never know when the circumstances could change."

"You bring that with you all the way through nursing even as you advance your skills and role. Caring for the patient is the ultimate reason why I'm still in nursing."

Caring is a major part of all health professionals' work and healthcare is changing rapidly. There are more interdisciplinary teams now than ever before and this model of integrated care works well. However Ms Ingram would like to see clinical nurses play a greater role at national level on boards, steering committees and national review groups.

"As nurses we're so busy clinically that we don't think of the potential for us to play a greater role at a more strategic level. At present there is a national strategy reviewing the whole of cardiology services in Ireland and there is currently no clinical nurse on the working group. I would like to see this change. In cardiology we have many nurse-led services such as heart failure, arrhythmia, heart surgery, chest pain assessment, cardiac rehab, the cath lab, and yet it is very difficult for nurses to have a voice at that national level. Nurses bring ground up experience that can influence national service provision."

Ms Ingram has always been part of a nursing union. In the 1990s Shirley and her colleague went to the Labour Court with the support of the INMO to fight for their right to practise and be recognised as clinical nurse specialists. Now as an ANP, as she practices autonomously, it is very important for her to know that she is supported by her union. She feels that while the INMO provides a collective voice for nurses and midwives, it is not just for crisis times but also for the educational opportunities and the networks it provides.

The collective voice, however, is extremely useful and Ms Ingram believes clinical nurses have the solution to many health service problems but often don't have a voice.

"Nurses should always be ready because you never know when the circumstances could change, for example Sláintecare, and your voice may be heard. If you see somewhere you can make a difference for patients, don't give up on it. I would like to see nurses play a greater role in strategy and planning. It can be very difficult so my advice after 34 years of experience would be to use your nursing networks, use your national associations, use your union and make your voices heard."

This article is part of our series on Nursing Now, a global campaign that aims to achieve recognition of nurses' contribution to healthcare, gender equality, the economy and wider society. The campaign's aim is to improve health globally by raising the profile of nurses, influencing policymakers and supporting nurses to lead, learn and build a global movement – www.nursingnowireland.ie