

Face to face



From studying for a degree in philosophy to becoming professor of nursing at Swansea University, Gary Rolfe has taken an unconventional route in his career. He wants practitioners to find ways of treating patients as individuals instead of conforming to a 'gold standard' of practice imposed on them in government policies. He talks to Thelma Agnew

GARY ROLFE'S decision to study philosophy at university was based on a misunderstanding. 'I was a typical 18 year old who wanted answers to the secrets of the universe,' he says. 'Of course, philosophy does not provide answers but encourages you to ask questions.'

A questioning attitude has served him well in his career in nursing and education, and his philosophy degree has turned out to be 'far more useful than if I had taken a degree in nursing. Most professions need people like me to ask: "Why are we doing things like this?"'

After graduating from Surrey University in 1977, Professor Rolfe travelled and took up voluntary work before beginning, and quickly giving up, training to be a teacher.

In 1980, when he was 25, he took a nursing assistant post at St James's Psychiatric Hospital in Portsmouth. This time, he had no second thoughts: 'I knew straight away that this would be my career.'

Group therapy

After completing his mental health nurse training, Professor Rolfe worked in the hospital's innovative alcohol treatment unit. He spent his first day there taking part in a group therapy session with an experienced nurse and, the next day, he was left alone with the group. 'I was told not to lead because, sooner or later, the most anxious person in the group will speak,' he says. 'So, after three quarters of an hour of silence, I said something.'

He left the alcohol unit in 1987 to jointly manage the hospital's nurse-led

acute residential and community unit, which had taken the 'revolutionary' course of handing power from psychiatrists to nurses. Unfortunately, this left him struggling under the weight of three jobs: manager, nurse tutor and nurse.

'That is when I realised I did not want to be a manager,' he says. 'I felt bound by procedures and rules. It seems to me that you have much more power working from the sidelines than you do in recognised management roles.'

After an uncomfortable year, he left to study at Surrey University for a post-graduate certificate in the education of adults, the formal qualification he needed to become a nurse tutor. He already had an MA in education, and was able to take up a part-time PhD at Southampton University. The PhD 'opened doors' for him, but he does not believe it made him a better nurse or educator: 'I am sceptical about the value of PhDs for anyone except professional researchers.'

In the early 1990s, Professor Rolfe was working as a nurse tutor at Portsmouth School of Nursing, and began to publish papers drawn from his MA and PhD work. When the school was integrated into Portsmouth University, he found himself with a new title: senior lecturer.

'Everyone was talking about research,' he says. He set up a research centre in a spare room in St James Hospital's dementia unit, which was the topic for his first major study, on dementia care mapping.

He also worked one day a week in the family therapy clinic. 'It was tokenism.

Academics must stay in touch with practice but cannot maintain clinical expertise by going in one day a week.'

Far better, he says, for academics to be placed in practice development units where the 'practice, research and academic sides are mixed'.

Practice development

In 1996, he was promoted to principal lecturer and then, in 2001, he became a reader in practice development.

A professor's chair was within reach, but not at Portsmouth, which placed him in the science faculty. The ethos there was 'different', he says. 'I thought my career was going nowhere and I was ready for change.'

Swansea University appointed him professor of nursing in 2003. He was attracted by Swansea's commitment to 'action research' and multidisciplinary work. 'They have allowed me to opt out of the activities usually expected of professors: attracting big grants and publishing in the right journals.'

Instead, Professor Rolfe has been developing a consultancy role at his local health board: 'I am helping to develop a practice development accreditation system that we can sell to other boards.'

'I want practitioners to see practice as more than the implementation of policy and procedures, and to move away from the notion that there is a best way of doing things for everyone. We should look at what is best for the individual rather than following a "gold standard" treatment.'

Thelma Agnew is a freelance journalist