



IS NURSE EDUCATION GOING IN THE  
RIGHT DIRECTION?  
P7 OPINION

STUDENT MENTAL HEALTH  
P10 FEATURE

10 TIPS TO SECURE YOUR CPD  
P11 FEATURE

ISSUE NO. 367 SEPTEMBER 2018

# LOOKING BEYOND THE BURSARY

HOW DO WE CONTINUE TO ATTRACT  
STUDENTS LIKE RUPERT TO NURSING?

NURSING CAREERS  
AND JOBS FAIR  
18-19 SEPTEMBER, LONDON  
TURN TO P18 TO FIND  
OUT MORE

The RCN represents nurses and nursing, promotes excellence in practice and shapes health policies.

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## RCN consults on pay deal for Wales

Members working for the NHS in Wales have until 14 September to vote on a pay deal, which will see all staff receiving a meaningful pay rise. If accepted, it will align the NHS in Wales's pay scales with the England Agenda for Change rates by the end of the deal, and will mean the removal of pay band overlaps, as well as annual pay increases and faster pay progression over the next three years.

Further details can be found at [rcn.org.uk/wales/get-involved/nursing-pay-in-wales](http://rcn.org.uk/wales/get-involved/nursing-pay-in-wales) and a pay calculator can be found at [nhsPAYINCYMRU-WALES.ORG](http://nhsPAYINCYMRU-WALES.ORG). Members can vote at [smartsurvey.co.uk/s/DGVKM](http://smartsurvey.co.uk/s/DGVKM)

If you do not have access to the RCN website please call RCN Direct to request printed information.

## Overseas nurse?

The RCN is keen to hear from internationally recruited nurses to find out about their experiences of the immigration system and what they want to see changed.

We're running a survey to seek your views, as the Government looks to reform how our immigration system works post-Brexit. Complete the survey at [smartsurvey.co.uk/s/RCNPBIsurvey](http://smartsurvey.co.uk/s/RCNPBIsurvey) by 5 October.

## Who will you choose?

The RCN has announced the election candidates for RCN President and Deputy President. Eleven members have put themselves forward for the prestigious roles. They are Sue Hill, Celia Manson, Marion Mason, Professor Anne Marie Rafferty CBE FRCN, Robert Sowney FRCN and Professor Rod Thomson FRCN for the role of RCN President. And Liz Brasnett, Yvonne Coghill CBE FRCN, Paul Watson, Jeni Watts and Dr Sue Woodward FRCN for the role of Deputy President.

Voting opens on 11 October with papers sent in the post. The successful candidates will hold office for two years from 1 January 2019 and will succeed outgoing President Dr Cecilia Akrisie Anim CBE and Deputy President Professor Rod Thomson FRCN.

Cecilia said: "RCN Presidents have embodied the ambition, vision and values of members for more than a century. It is such a privilege to represent nursing and I encourage members to vote in this important election."



It is such a privilege to represent nursing

Find out more about each of the candidates by tuning into the livestreaming of a hustings event on 9 October. Visit [rcn.org.uk/hustings-2018](http://rcn.org.uk/hustings-2018)



## Safeguarding adults

The RCN has launched guidance to help safeguard adults at risk of abuse. Dawne Garrett, RCN Professional Lead for Older People and Dementia Care and the guidance's lead author, said: "Following a plethora of abuse scandals involving adults at risk, health care staff now have a set of competencies they need to meet to help them safeguard people from harm." Download the guidance from [rcn.org.uk/publications](http://rcn.org.uk/publications) (code 007 069).



“

**I started nursing to look after and care for people, but poor staffing levels mean that I struggle to give the best care.**

## Scotland safe staffing

This month the RCN in Scotland launches its 'Ask for more' campaign – gathering public support for staffing levels which can deliver safe and effective care.

In May, the Health and Care (Staffing) (Scotland) Bill was introduced to the Scottish Parliament. Throughout autumn, as Members of the Scottish Parliament undertake their initial work on the bill, the Royal College of Nursing in Scotland will be campaigning hard, asking for more for nursing so that patients receive excellent care.

RCN Scotland Director, Theresa Fyffe, said: “The RCN sees the bill as an opportunity for change. The message is that the right legislation can help to ensure that nursing teams have the right staff to provide safe, effective and high quality care.”

You can add your support to the campaign at [rcn.org.uk/askformore](http://rcn.org.uk/askformore). You can also follow the campaign on Twitter @RCNScot #askformore

## NHS Scotland pay deal accepted

A new three-year pay deal for NHS staff in Scotland has been accepted. It will see the vast majority of nursing staff receive at least a 9% pay increase by April 2021.

NHS staff on Agenda for Change contracts in Scotland will have received a 3% uplift in their July pay packets. Backdated pay from 1 April will be paid soon. 77% of members who voted in the month-long consultation voted “yes” to the deal. Read more at [rcn.org.uk/scotland](http://rcn.org.uk/scotland)

# Extraordinary General Meeting details announced

Members can now register to attend the EGM being held on Friday 28 September



The meeting will give members an opportunity to discuss the 2018 NHS pay deal in England.

You can register to attend by completing the online registration form at [my.rcn.org.uk/Application/egm2018](http://my.rcn.org.uk/Application/egm2018). You will need to enter your MyRCN login details to access the form.

Pre-registration closes at 12 noon on Wednesday 19 September. RCN members will also be able to register to attend at the venue on the day.

Details of the EGM, supporting information and a link to vote online will be sent to

members by the Electoral Reform Services (ERS) ahead of the EGM.

Members who are not able to attend the EGM in person will be able to watch online on the RCN website.

### Notice of Extraordinary General Meeting (EGM)

An Extraordinary General Meeting will take place on Friday 28 September 2018, 11.00am to 4.00pm at the Birmingham Repertory Theatre, Centenary Square, Broad Street, Birmingham, B1 2EP.

## Janet Davies steps down as RCN Chief Executive

After three years as RCN Chief Executive, Janet Davies has stepped down from the role. Janet joined the RCN in 2005 and left her leadership position at the end of August.

She said: “It has been a great honour to represent my profession at the highest level, and I am proud of the achievements the RCN has made over the past three years against a difficult political backdrop. I wish my colleagues and our membership all the best for the future, and look forward to taking on

some new challenges.”

Maria Trewern, Chair of RCN Council said: “The RCN and Janet Davies have decided to part ways by mutual agreement. We thank her for all her service to the College and wish her well.”

Dame Donna Kinnair has taken on the role of Acting Chief Executive. She is a widely respected executive and nurse of over 30 years' experience. She joined the RCN in 2015 as Director of Nursing, Policy and Practice.

# 4 GOOD NEWS

## Celebrating 50 years of student members

Nursing students were accepted into RCN membership on 1 October 1968, but a closer look reveals they've been part of the organisation since it began



Students march for fair pay

In the early days of the RCN, resistance to having anyone other than registered nurses in membership was so strong, that not even influential founding member Rachael Cox-Davies could change minds.

In 1919 she suggested associate membership for students, where they could enjoy the educational and social advantages of the College without the voting rights of full members.

However it took a nursing recruitment crisis in 1926 before the Student Nurses Association was finally set up as an affiliate organisation of the RCN. At its first annual meeting it had 1,413 members and activities included dances, whist drives, swimming, rambling and gymnastics clubs.

The debate over allowing students into full membership continued for more than half a century and it wasn't until 1 October 1968 that

the Student Nurses Association became the Student Nurses Section – officially part of the RCN. But while more membership privileges were now available, the right to vote in ballots or meetings was still withheld.

In 1976, another name change, as the Student Nurses Section became the Association of Nursing Students, but it wasn't until 1979 that students were recognised as full members.

The final change came in 2010 when the Association of Nursing Students was renamed RCN Students. Today the group is active on social media, has a network of student information officers, leads and directs RCN work through its own committee and membership of key governance committees and, of course, remains a vocal member of RCN Council (see page 12).

🔗 Find out more about RCN Students at [rcn.org.uk/students](https://rcn.org.uk/students). Read features from the magazine produced especially for student members at [rcn.org.uk/studentmag](https://rcn.org.uk/studentmag) or join the conversation on Facebook by joining the RCN Students closed group

## Get funding for your studies

With cuts to CPD continuing to bite, it can be difficult to get funding to attend training and continue developing your professional skills. RCN Foundation bursaries are available to help. The autumn bursary schemes are now open for applications, with up to £5,000 available to support a wide variety of learning, development and research opportunities for nurses and health care assistants.

Applications close at 5pm on 19 October. For more information and to apply visit [tinyurl.com/gszc2f8](https://tinyurl.com/gszc2f8)

## Could you make a difference?

Did you know RCN student members have the opportunity to develop their influencing skills while doing their nursing degree?

RCN student information officers (SIOs) are nursing students who work closely with the RCN to support and share information with fellow nursing students.

It's a role that can be done without having to take vast amounts of time away from your studies, but has wide-ranging personal and professional benefits.

Go to [rcn.org.uk/sio](https://rcn.org.uk/sio)



## The big picture



RCN members turned up in force to Belfast Pride, one of the city's biggest festivals with more than 100 events over 10 days, to celebrate equality, diversity and respect.

## MEET THE MEMBER



Each month *RCN Bulletin* asks a member to share a little bit about themselves.

**Name:** Maria Gribben

**Role:** Nurse education consultant

### Sum up what you do in a sentence

Design and deliver courses in mental health to a range of practitioners.

### Describe your job in three words:

Enjoyable, challenging, satisfying.

### If you weren't a nurse what would you be?

A hairdresser – but my dad wouldn't let me.

### What's the best bit about your job?

The team I work with.

**And the worst?** The travel. It's an hour commute to my base but I often have to travel and leave at 6am for a 9am start elsewhere.

**What helps get you through a difficult day at work?** Laughter, a cup of tea and the support of my team.

**How do you unwind?** A glass of wine and a good film at the weekend.

**If you could have a superpower what would it be?** To be able to run really fast.

### Who would play you in a film?

Mariah Carey.

[rcn.org.uk/myrcn](http://rcn.org.uk/myrcn)



## PATIENT PERSPECTIVE



**Gabs Gratrix finished chemotherapy for breast cancer last August and is now cycling 100,000km across the world with her fiancé Chris fundraising for Prevent Breast Cancer**

Since I was diagnosed with breast cancer in February 2017, I've experienced nothing but amazing care from every member of nursing staff that I've met.

What's stood out most is how accommodating they've been despite dealing with immense pressures every day.

I had my chemotherapy at The Christie Hospital in Manchester. On one occasion the nursing team were running behind with appointments. It can easily happen; they have 150 patients to see in one day and

people have different side effects so appointments can take longer than expected.

It was 5pm and my nurse had already been working all day. She should have gone home two hours earlier but she said she wasn't leaving until everyone had been seen. Not only did she stay but she treated me like I was the first patient of the day.

Nursing is understaffed and underpaid and yet nurses work so hard and show so much compassion for their patients. I didn't once hear them moan or complain.

I think you have to be a special type of person to become a nurse. I want to thank them all and give something back.

*Gabs and Chris set off on their world cycling tour in July. Read more about their fundraising efforts at [chrisandgabsworldcyclingtour.com](http://chrisandgabsworldcyclingtour.com)*



## THE VIEW FROM HERE



**Anne Corrin**  
RCN Head of Professional Learning and Development

Nursing and midwifery practice today is different from a decade ago and will continue to change. This is why the new NMC nursing standards were introduced earlier this year. The standards are the guidelines all nurses and midwives should adhere to. Their aim is to ensure that newly registered nurses and midwives have the increased skills and knowledge required for nursing practice today and in the future. They will also guarantee greater consistency of the student learning experience across the UK.

The standards offer an opportunity, if close collaboration between the universities and placement providers can be achieved, to allow for greater flexibility and creativity in pre-registration education programmes. They define what effective practice learning looks like. This includes the principles underpinning good practice learning environments, and the roles and responsibilities of practice supervisors, practice assessors and academic assessors in creating these environments.

The changes that will be required for the current nursing workforce to deliver this new curriculum cannot be underestimated. The RCN will support the implementation of the new NMC standards, because as a profession, we must not miss this opportunity to develop innovative, exciting and effective outcome-focused nurse education programmes.

[nmc.org.uk/standards](http://nmc.org.uk/standards)



## What you've been saying

### The wrong picture

Can someone explain why a tympanic temperature is being taken using something wholly inappropriate for the job (issue 366, p15)?

[Johnny Horley on Twitter](#)

*RCN Bulletin Editor Kim Scott responds...*

I'm sorry we used an unsuitable image in the August issue of *RCN Bulletin*.

The picture was from a website that sells stock images, which we often have to resort to when we have a limited collection of our own images.

*RCN Bulletin* is produced by a team of journalists, not nurses, and though we do seek the advice of nursing experts for our clinical content, this was not the case on this occasion.

We will look to improve our processes with the selection of images going forward.

### Bring back the bursary

As an experienced nurse, student mentor, part-time lecturer and a parent of a student nurse, I see the negative impact of the new funding system for student nurses. I'm concerned about the nature, calibre, product and future model of a nurse who can fulfil the highly expected 6 Cs of Care, Compassion, Courage, Competency, Communication and Commitment. There is just no time to sufficiently learn and meet the required levels of nursing competency. Morale is low as is the desire to enrol and progress on a course. Students juggle part-time jobs and completing university work.

The bursary system was and still is arguably the solution and surely the responsible stakeholders need to urgently review the funding system introduced for the September 2017 intake. As it stands, the future of nursing is very gloomy, unpromising and will not help rejuvenate the stuttering health care issues in the UK.

[Lovemore Mtetwa, via email](#)



### QUOTE OF THE MONTH

**Safeguarding requires careful judgement, emotional labour and sound knowledge**

**Dawne Garrett, RCN Professional Lead for Older People and Dementia Care, launching new guidance to help protect vulnerable adults from abuse**

### FOUR THINGS TO DO IN SEPTEMBER

1. Find out how to make your money go further with the latest Student Money Guide: [rcn.org.uk/publications](http://rcn.org.uk/publications) (code 007 125)
2. Bag yourself a last minute holiday with our preferential member rates through RCNExtra: [rcn.org.uk/xtra](http://rcn.org.uk/xtra)
3. Attend the RCN Extraordinary General Meeting on 28 September in Birmingham: [rcn.org.uk/egm](http://rcn.org.uk/egm)
4. Follow the RCN on Instagram with details on conferences, news and nursing stories: [instagram.com @thercn](http://instagram.com/thercn)

### GOT SOMETHING TO SAY?

The *RCN Bulletin* team is always looking for members to contribute to the opinion pages. If you're keen to share your views, email [bulletin@rcn.org.uk](mailto:bulletin@rcn.org.uk)

## HOT TOPIC



### Is nurse education going in the right direction?

I qualified last year and don't feel the degree prepared me well enough for qualifying. Nursing is practical and therefore the training should be more practical. **Hannah Hills**

We need the bursary back and there needs to be country-wide standardisation between the different programmes. **Kate Youngs**

Nursing is a practical course, and I don't feel as though I've learned anything from essay writing or sitting written exams. I've always felt that written exams are a test of memory, rather than knowledge and skill. So, more clinical skills sessions and practical assessments would improve training. **Gul Khan**

I feel like the degree is a good thing. It's provided me with a wonderful backing. I'm heading into my second year now and I don't feel like I could

have done this any other way. I feel 100% supported at both university and on placement. My assessments, essays and exams have all helped with my progression. **Sarah Fisher**

If nurse education is moving away from the very static degree-style, towards a much more flexible and accommodating approach as I feel I can see with the nursing associate role, then I would say yes, I think this style of education is more appropriate for those of us studying to become nurses. **Ellie Hall**

I think the support for student nurses really needs to be focused on in terms of the pressure of financial, physical and mental strain. **Ceri Sedgwick**

There is so much blurring of training and roles. And the number of newly qualified nurses I've had crying in my office and leaving wards within the first 12 months is crazy. They are not prepared for the reality of ward nursing as it is. **Katie Ashton**

## Supernumerary status

Craig Davidson is the RCN Students Committee Scotland representative

It's absolutely vital we retain supernumerary status for students as we need the time to maximise learning opportunities to become the best nurses we can be. It would be highly detrimental if we got to the end of our training and hadn't had the chance to become the safe, effective nurses we need to be.

Health care assistants (HCAs) can teach us students so much, but our roles and contributions are different; we are there to learn to become future registered nurses not as substitutes. When students make up the numbers, it's not safe staffing – it is against the Code, we simply aren't able to learn what we need to and it puts patients at risk.

Paying students a wage to be on the ward is not the right solution. As soon as you're paid you're there to do a job with associated responsibilities. We are then relied upon to provide a service rather than being supported to meet the standards required for us to register. Students should receive bespoke financial support packages.

It can be very stressful for students to be put in a position where they're expected to function as an HCA, rather than as a student nurse. Students can fear repercussions for speaking out which can lead to intense pressure.

We must make retaining supernumerary status a priority. We need to talk about it and act now. Staffing levels need fixing and safe staffing legislation put in place. We must also recruit and retain more registered nurses and HCAs to prevent a recurring problem.

## MESSAGE TO MEMBERS



### Donna Kinnair Acting RCN Chief Executive

The pages of this month's *RCN Bulletin* were inspiring to me as I stepped into this new job. And I hope you've found them the same. They offer concrete proof of what we know to be true - our profession has a truly bright future.

This month, thousands of new students begin their training. I've been fortunate enough to meet some of you and will meet more as I take on a new challenge myself. Your elected Council asked me to act-up as Chief Executive and General Secretary.

It is a privilege to hold this office and I do not underestimate the work we must do. For those of you in the NHS in England, the RCN's processes around the recent pay deal and its communication were not good enough.

An independent review has started and an EGM is being held in Birmingham, as you'll have read. Whatever the outcome, you will see lasting changes that root the College in its members again - whatever job you do and wherever you work. We will improve our listening and work with you and for you.

My eyes are firmly fixed on what's happening in the lives and workplaces of our members. I look forward to the campaigns we will fight together to make nursing the profession we all wanted to join - and to keep on inspiring the nurses of tomorrow.



# 8 FEATURES

## Looking beyond the bursary

What needs to happen to secure the future supply of nurses?



“

Ministers need to take decisive action to address the nursing shortage and keep patients safe

Much about the UK nursing workforce doesn't compute. Care needs are rising but there is a shortfall in registered nurses.

By 2020 nearly half of nursing staff will be eligible for retirement but entrants to the profession are in serious decline. And rather than providing incentives for potential recruits, it seems obstacles are being placed in their way.

A key factor in this lopsided equation is the withdrawal of the student bursary in England, a move described by the RCN recently as a “disaster”.

The bursary was never a cash cow for nursing students. It didn't make them rich or assure their financial security. But it helped, and it felt like an acknowledgement that nursing students, who face the highest total workload hours of all undergraduates, were a special case (see box).

The bursary is now gone and its renaissance seems unlikely. But two years on, the impact of its passing remains. According to the latest figures, the number of students who applied to start nursing programmes in England in 2018 is down 11% since funding was removed in 2016. “Government decisions on student funding have left nursing in managed decline,” says Acting RCN Chief Executive Dame Donna Kinnair. “We urgently need comprehensive workforce plans that safeguard recruitment and retention. This should include a range of incentives to attract more nursing students. It's time for ministers to take decisive action to address the nursing shortage and keep patients safe.”

And those ministers had better hurry. Aside from the overall shortage of registered nurses – 40,000 vacancies in England alone – patients or clients in particular areas of care may be especially vulnerable. Learning disabilities, for example.

Earlier this summer, a survey of higher education institutions in England showed almost half had discussed discontinuing their learning disability nursing programmes from this September.

Learning disability nursing programmes tend to attract a greater number of mature applicants, for whom the bursary may have proved more appealing than a student loan. Deterring those people, says RCN Policy Adviser Jonathan Barron, is a bad move. “Mature students are more likely to stay in the profession and bring a wealth of experience, which is so important for a role like nursing.

“More explicitly, they work in traditionally harder-to-staff areas, such as learning disabilities, and these are already areas where we have huge staffing problems all round the UK.”

Anne Corrin, RCN Head of Professional Learning and

🗨️ **What do you think?**  
Email your views to [bulletin@rcn.org.uk](mailto:bulletin@rcn.org.uk)

*Words by Daniel Allen*



Development, says courses in other fields of nursing may follow suit. “I think the next most vulnerable would be mental health. There is variation but certainly mental health is at risk in some geographical areas.”

For students who come late to nursing, the financial burden of training can be crippling, although as former accountant Rupert Davies explains (see column), the rewards inherent in being a nurse can still outweigh the hardship.

### Does this constitute a crisis?

As of August the bursary available to nursing students who first undertook a different degree was also scrapped, so many older students will be in the same position as those for whom nursing is their first degree. A package of “golden hellos” for mental health and learning disability nursing students with other degrees, announced by the Government in May, appears to have been delayed by at least a year, undermining any attempts to increase student numbers for 2018/19.

So does this constitute a crisis? “I think it’s very serious,” says Anne. “The bottom line is that too many people are leaving the profession and too few joining. Uncertainty over Brexit is another compounding factor and grounds for optimism seem limited.”

Yet elsewhere in the UK, the student bursary lives on. In Scotland, for example, the Scottish Government has committed to maintaining the bursary, however this is not enough for student nurses to live on and access to a broader package of student support is being called for as part of an ongoing review.

New routes into the profession, such as apprenticeships and nursing associates

may eventually plug some of the gaps, but these roles alone will not solve the workforce crisis. They constitute a trickle rather than a steady stream.

The most effective way to increase the supply of registered nurses is through the three-year degree programme and by extending the postgraduate route into nursing, insists Jonathan.

The Government promised to monitor, evaluate and intervene if necessary when it made the bursary changes, he adds. In the meantime, an RCN policy paper lays out costed options designed to increase the numbers of health care students.

They include:

- grants for students in recognition of time given during placements to the NHS and other health settings
- a stipend or fee paid by local employers to cover students’ living costs in return for a post-qualification contract, helping to meet local workforce needs
- means-tested grants, which would provide additional support to students from poorer backgrounds
- clarifying the criteria of the Learning Support Fund, which offers supplementary funding to the student loan.

“We’ve come up with these ideas which could potentially help,” says Jonathan. “But the key outcome here is an increase in patient safety. We must ensure the right number of registered nurses and nursing support staff with the right knowledge, skills and experience are in the right place at the right time to provide safe and effective care.”

## THE VIEW FROM HERE



**Rupert Davies**  
Adult nursing student

I’ve always been good at maths and fell into an accountancy career early on. But throughout my 13 years in finance, I never experienced the job satisfaction I craved or felt I was making a positive difference. Following some experience caring for older relatives, it took the birth of my children to make me jump ship and move towards a more fulfilling career in nursing. I especially wanted to be a role model for my kids to emulate and help them aspire to do something they believe in.

The main obstacle was the shift from a well-paid career to life as a student nurse, and the financial implications for my family. The bursary had ended, so I had to rely for the most part on student loans. Alongside this, my very supportive wife went back to work and we’ve had to dip into savings on occasion. We’ve had to scrimp in all areas but at the same time have the flexibility to deal with unexpected life events.

Friends and family have been essential, especially in terms of child care, and the support and understanding of my university has been a huge help.

I look back on my first year as a student nurse with a sense of pride and can safely say I have no regrets. The satisfying feeling after a long placement shift outweighs anything I felt in my previous career. I feel privileged to have found my calling and can look forward to a rewarding nursing career.

## Why are nursing students a special case?

The RCN argues that nursing students require extra financial support because:

- they spend up to half of their degree on placement
- their courses are typically longer and extend beyond normal university semesters
- their placements come in blocks, meaning their opportunities to find part-time employment to support themselves are limited
- they are more likely to be from lower socio-economic backgrounds.

[rcn.org.uk/students](https://rcn.org.uk/students)



# 10 FEATURES

## It's OK not to be OK

Deadlines, dissertations, placements, money worries. They can all take their toll on student nurses' mental health and, in some cases, have fatal consequences. For those struggling, it's important to talk



In May this year nursing student Nelson took his own life. He was in the final year of his learning disability nursing degree. He was 44 and married with two children. He died after a time extension to complete his dissertation was denied.

The day following Nelson's memorial service, his friend Mick posted on the RCN Students Facebook group. "He never left a note to explain and he never showed any sign of struggling or needing help," Mick said. "Please, please, please talk to each other. We all know how tough a nursing degree is and all the added pressure that goes with it. We qualify this year and I'll try to be the nurse he wanted us to be. I'm writing this because I don't want to see other people going through this again."

Tragically, Nelson is not the only nursing student to feel he couldn't

go on. In February last year, Liz de Oliveira's daughter Lucy, a second-year student nurse, took her own life following a period of depression. Liz is now calling for universities, the NHS, the NMC and government to work together to help avoid more nursing students getting to crisis point.

### Juggling too much

"Lucy was working 12-hour shifts on placements in the NHS and also had a job in a restaurant and as a health care assistant in a care home to earn extra money," Liz says.

"She would get back from the restaurant at 1am and wake up at 5am to go in on a shift. I know the students are trainees but they are still doing a job, an emotionally and physically exhausting job. They can be helping to care for patients in the aftermath of road traffic accidents, nursing babies

on life-support and having to deal with the death of patients.

"They should be able to study, work on placements and that's it. We all know that when you're exhausted, as Lucy must have been when juggling three jobs, things can seem really hard. If she hadn't been so tired she may have coped."

There needs to be a change in attitude towards mental health difficulties among nursing staff, Liz believes. Since Lucy's death, almost 100 people have contacted her saying they're afraid to speak to their managers or mentors about having anxiety and depression.

"They fear losing their jobs or being reprimanded by their bosses," says Liz. "We must move away from this outdated way of thinking about mental health. People who enter a caring profession may be prone to depression precisely because they do care and empathise, which is what makes them good at their job."

If you're struggling to cope, the RCN's counselling service can help arrange free, confidential telephone sessions.

"It's completely normal to have suicidal thoughts during times of stress," says counsellor Tanja Koch. "But if someone having these thoughts doesn't reach out then nobody can help. It's so important to talk about what you're feeling. There's support out there. But breaking that silence is the first, crucial step. It can be the difference between life and death."

“

Breaking the silence is the first, crucial step

☎ Call 0345 772 6100 to make an appointment with the RCN Counselling Service. Lines are open between 8.30am and 8.30pm, seven days a week, 365 days a year. Universities also offer student support services. For urgent support outside these times, call the Samaritans on 116 123 or go to a GP out of hours service or A&E if you don't feel safe.

## 10 tips to secure your CPD

Trusted techniques to help you get the continuing professional development (CPD) you need

### 1 Be clear

Say exactly what you want and why you need it.

### 2 Be positive

Explain how the training you've requested will fit into organisational priorities and will have a positive impact on patient care.

### 3 Think outside the box

Thinking creatively about solutions will help. You don't always need to complete a formal training course to get the development you need. Consider online training, appropriate reading and shadowing.

### 4 Refer to your appraisal

If training was discussed and agreed in your appraisal, make sure you say this when you make your request.

### 5 Remember revalidation

If you're on the NMC register, explain why CPD is essential for your revalidation.

### 6 Make things easy for your manager

Everyone is busy. If your manager has less to do, they may be more willing to agree to your request, so get as much in place as you can before you speak to them.

### 7 Be flexible and don't give up

If you can't get the training when you first apply, think about how else you could do it. There might not be funding for a course at the time of asking, but could you shadow a professional in the area before you apply again?

### 8 Be prepared to source your own funding

Funding isn't always easy to source, but there are still opportunities out there. Consider applying to the RCN Foundation. Their scholarships and bursaries fund a wide variety of learning and development opportunities. Visit [rcnfoundation.org.uk](http://rcnfoundation.org.uk)

### 9 Remember why you're requesting CPD

Without it you're at risk of falling behind with the latest developments in practice, with patient safety at risk as a consequence.

### 10 Use the RCN library

It's a huge source of free information. You can access thousands of e-journals and e-books as well as a wide range of nursing and health care databases from your home or mobile phone. Visit [rcn.org.uk/library/support/library-services-from-home](http://rcn.org.uk/library/support/library-services-from-home). Find out about how the library team can help you with literature searches at [rcn.org.uk/library/support/literature-searching](http://rcn.org.uk/library/support/literature-searching) and take a look at the RCN's subject guides at [rcn.org.uk/library/subject-guides](http://rcn.org.uk/library/subject-guides)

### Employers must do more

Latest stats from the NMC show the number of nurses who failed to meet CPD requirements for revalidation went up by almost 50% last financial year. A total of 114 nurses didn't complete the minimum 35 hours of CPD over three years that is required to re-register.

The RCN says employers must ensure nursing staff have access to CPD and guarantee protected time for it. But there's been a significant drop in the number of courses available and nursing staff say they're increasingly forced to abandon training because of work pressures caused by staff shortages.

“

**Maintaining and improving practice is ultimately a patient safety issue**

RCN Head of Professional Learning and Development Anne Corrin says: "We can't ignore the fact that cuts to CPD budgets have left many nurses concerned about their ability to stay up to date, and advance their careers. Maintaining and improving practice is ultimately a patient safety issue. Employers must find a way to fund training, and guarantee time to learn."

The RCN has called for data on funding for CPD to be published and urged politicians to reverse cuts and boost opportunities.

Read more in *Investing in a Safe and Effective Workforce: Continuing Professional Development for Nurses in the UK* at [rcn.org.uk/publications](http://rcn.org.uk/publications) (code 007028).



# 12 FEATURES

## Five minutes with...

Charlotte Hall, outgoing student member of RCN Council, who says the role offers a once in a lifetime opportunity



### What inspired you to stand for election to RCN Council?

I started off as an RCN student information officer and it made me even more determined to influence change. I wanted to be on the RCN Students Committee but couldn't as I was at the end of my degree. So I rang the RCN and asked if there was anything more I could do. That's when I was told about the Council role and I thought "wow". It seemed a lot of responsibility, but also very exciting. Representing 40,000 students on a national scale is incredible. I was scared at first but now I'm so glad I didn't take the safe route.

### What has the experience done for you?

It's helped me grow personally and professionally, and deepened my self-belief. I never stood for the role for my own self-purpose but it's benefitted me in ways I never

anticipated. I've met so many people and worked alongside some amazing colleagues as well as MPs, Lords and health campaigners – people bursting with knowledge and wisdom.

### What have you had the opportunity to influence?

So much. I don't know where to start. I was a huge part of the campaign to scrap the cap on NHS pay and have fought for the rights of students at every opportunity. We may not have always had the outcome we desired but we had the drive and we put the work in and for that I am so proud.

### What's the best advice you've been given?

Experience isn't everything. Not all good leaders have vast experience and not all great activists have years and years behind them either. What they do have is a passion to advocate for those who can't

express their voices. I remember being in terrible fear of not having the answer to everything but that's actually not relevant – in my role you are there to put forward what members want and you don't have to have all the answers. Sometimes your job is to ask the questions.

### Why should students, and all members for that matter, engage with RCN Council?

We say a lot that the RCN is its members but people often don't realise it's them. It's you reading this – every single person that takes action on anything – be it rehydration and the RCN's healthy workplace initiative or campaigning to change perceptions of nursing, it's all important. It's everyone's responsibility to make the profession better and that's the goal of the RCN.

### What would you say to someone considering going for your position?

Forget your doubts and go with your gut. You only get the chance once – you won't lose by doing it but you will lose a once in a lifetime opportunity by not doing it. We need more people who are new to the profession to bring their unique perspective.

“

It's helped me grow personally and professionally, and deepened my self-belief

### Could you be next?

RCN Council oversees the running of the RCN. It's made up of 17 members elected to provide leadership and direction for the organisation. Charlotte will step down from her role in December and nominations to replace her are open now. If you're keen to be the next student member of RCN Council, fill in a nomination form by 4.30pm on 1 October. It's your chance to influence RCN strategy on student issues and nursing education. Visit [rcn.org.uk/elections](https://rcn.org.uk/elections)

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## Speaking up for sexual health

Amid increasing concerns about the future of sexual and reproductive health services, the RCN Public Health Forum is taking action



“There’s a nervous edge around sexual health currently,” says Su Everett, a Public Health Forum member and senior nurse lecturer. “Nurses who work in services that have lost funding are leaving the specialty. This is a loss of expertise that could have dire consequences for the future.”

Following changes to the commissioning and provision of services, all areas of public health have been suffering from cuts. In particular, staff working in sexual and reproductive health (SRH) have reported growing concerns as lack of funding, education and recruitment have led to increased pressures.

Specialist areas are often the first to suffer, even though they can’t simply be absorbed elsewhere. “It is a highly-skilled person who works with cases such as sexual abuse, rape and child protection,”

says Su. “As cuts continue to squeeze services and experienced staff are lost, where will these patients go?”

Despite advances, there is still a stigma surrounding sexual health clinics and building up trust with patients is vital. By reducing clinical services, patients will have less choice and are therefore less likely to access the help and treatment they need. “With increasing incidence of antibiotic-resistant gonorrhoea and other sexually transmitted infections, this is not the time to reduce services and it will ultimately lead to an increased financial burden on the NHS,” says Su.

Infection rates are already rising. Chlamydia diagnoses have increased to 128,000 among high-risk 18-24-year-olds, despite a drop in the numbers getting

tested. There has also been a 12% rise in syphilis diagnoses and new STIs such as MG are adding further pressures to services.

### Forum action

In response to these issues, the RCN carried out a survey of health care staff working within SRH services.

Nurses reported significant staffing pressures without any clear planning for the future and a lack of education and opportunities for staff development.

Several key pieces of forum work are in progress to begin addressing these issues. New sexual health resources are now live on the RCN Public Health Forum webpages. To improve access to education and training opportunities, a page detailing a selection of courses across sexual and reproductive health, contraception and HIV is available at [tinyurl.com/yau4f646](https://tinyurl.com/yau4f646).

Experts from the forum are also sitting on a working group with colleagues from across the specialty to develop best practice for online SRH services. “The development of online services is a welcome means of widening accessibility to care,” says forum chair Jason Warriner. “But it is important to ensure that safety and quality of care are maintained and that vulnerable patients continue to be protected.”

Other work on sexual health subject guides, raising the profile of SRH nursing and increasing training opportunities is also planned.

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There’s a nervous edge around sexual health currently

🕒 Sexual Health Week runs from 24-30 September. The theme this year is consent. Find out more at [fpa.org.uk/campaigns/sexual-health-week](https://fpa.org.uk/campaigns/sexual-health-week)

Download the RCN report on SRH services at [rcn.org.uk/publications](https://rcn.org.uk/publications) (code 006962).



# Writing an effective abstract

RCN professional conferences and exhibitions provide a platform for nursing staff to share experiences, ideas, knowledge and best practice. While attending is highly beneficial in itself, submitting an abstract to present at the conference offers an opportunity to push yourself outside your comfort zone and enhance your skillset.

To put yourself forward to present at a conference, you are required to submit an abstract. This is a short document that describes your work and will be used by the conference committee when deciding who to select to present.

## Top tips

Ahead of the RCN Education Forum's next conference in Bristol on 12 and 13 March, forum members Dr Debbie Porteous, Jane Cantrell and Helen Stanley share their advice on how to write an effective abstract.

- Follow the abstract guidelines to the letter, keeping to the exact word limit, following any specified format and meeting the deadline.
- Consider where your work fits within the conference themes and make these links clear.
- Make sure your title is engaging but most importantly clearly describes the subject you are writing about.
- Open with a clear statement of the topic of your paper and your research, evaluation or innovation question. For example, is it empirical or theoretical? Quantitative or qualitative? What value do your findings have and who will find them useful?
- The body of your abstract should then briefly describe the work to be discussed in your paper and give a concise summary of the findings.
- Don't include diagrams.
- Including key references can be helpful.
- Remember, writing an abstract that is likely to be accepted takes time!

The theme of the RCN Education Forum Conference is leadership. It will share the pioneering work going on across the UK in supporting nursing and developing the next generation of nurse leaders. Keynote speakers include Professor Laura Serrant on leadership diversity and Professor Steven West on mental health and wellbeing.

The abstract deadline for the conference is Monday 8 October. For further information and to submit, visit [rcn.org.uk/RCNED19](http://rcn.org.uk/RCNED19)

## Calling all students

The Education Forum Students in Partnership scheme will be running again in 2019. Any pre-registration nursing student members submitting an abstract for the conference are welcome to apply under the scheme. The top two scoring accepted abstract submissions will be supported with the costs of travel and accommodation up to a maximum of £300. Contact [education@rcn.org.uk](mailto:education@rcn.org.uk) for further details.

## WHAT I'M THINKING



### Suman Shrestha

RCN Professional Lead for Acute, Emergency and Critical Care

Thursday 13 September is World Sepsis Day and a number of events will be held to raise awareness.

In the UK, around 147,000 patients are admitted to hospital with sepsis each year and it is responsible for killing around 44,000 people, making it one of the most common causes of death. The annual cost of treating sepsis in the UK is estimated to be as high as £10 billion. Over 70% of cases are believed to arise in the community. Much more needs to be done to tackle this, not only through providing resources, training and education for health care professionals but also through improving public awareness.

Over the years, there have been differing opinions and recommendations on how best to recognise sepsis, which has caused confusion and made diagnosis challenging. However, recent guidance from NHS England recommends using the latest National Early Warning Score (NEWS2). Patients should be screened for sepsis if their NEWS2 is 5 or more and treatment should be started within an hour if sepsis is suspected.

This early recognition and treatment is vital; sepsis can not only lead to death but can also have a severe impact on the lives of survivors too.

[rcn.org.uk/sepsis](http://rcn.org.uk/sepsis)



# 16 EVENTS

For details of more events visit the region and country pages of the RCN website or go to [rcn.org.uk/events](http://rcn.org.uk/events)

## London

### Ophthalmic nursing conference

**3 November**

RCN HQ

20 Cavendish Square  
London W1G 0RN

This annual learning event is for all health professionals involved in advising, treating and caring for those with ocular health needs.

As well as accumulating seven hours of CPD, attendees will learn about new techniques, discover the latest innovations in the field and network with like-minded colleagues.

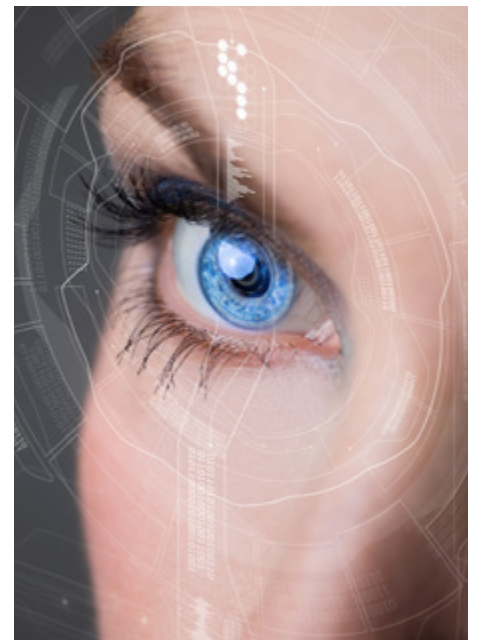
The event will focus on recognising the way services are delivered and how they must

adapt to meet the current and future needs of an increasingly diverse population.

Find out how colleagues are changing what they do to meet these challenges and how you can use their experiences to improve patient care.

Katie Pedwell, from the RCN Ophthalmic Nursing Forum Committee, says: "Whether you are new to this niche field of nursing or an experienced professional, this event gives you a platform to reflect on how you can improve your practice and the patient experience."

📍 Book at [rcn.org.uk/on18](http://rcn.org.uk/on18) or call 02920 546 460



## Newcastle

### Black History Month conference

**17 October**

Life Science Centre

Times Square

Newcastle upon Tyne NE1 4EP

All members are invited to this free event to celebrate the contribution that black, Asian and minority ethnic (BAME) people make to health and social care.

The varied programme promises to be an exciting mix of speakers, workshops and entertainment.

There will also be achievement awards for those who have made outstanding contributions to the care of people in the BAME community.

📍 Contact Mandy Clark on 0191 511 5810 or email [mandy.clark@rcn.org.uk](mailto:mandy.clark@rcn.org.uk)



## London

### Building better partnerships

**1 November**

RCN HQ

20 Cavendish Square

London W1G 0RN

This free conference is for RCN members who want to deliver better outcomes for patients by promoting equality and inclusion in the workplace.

Wendy Irwin, RCN Equalities Lead, says: "Now more than ever, we need to make sure that what shapes our experience at work is inclusion rather than exclusion. Equality experts will be sharing tips and hints about making positive change in this area. We will also be launching practical tools to create accountability and foster positive culture change."

📍 Book at [rcn.org.uk/better-partnerships](http://rcn.org.uk/better-partnerships)