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Royal College of Nursing

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NEWS DIGEST

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

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Celebrate in style

A new badge celebrating 100 years of the RCN has been launched. Based on the original College of Nursing Ltd membership badge, the new design mirrors the 75th anniversary badge produced in 1991. It is part of a range of souvenirs released ahead of the RCN's centenary in 2016. Other commemorative items are available. The badge costs £5.50. Order at www.rcn.org.uk/RCN100

Help with costs

RCN Council will now lobby employers to assist in relieving the financial burden facing nursing staff after a heated debate at RCN Congress last week. Following below inflation pay awards and professional fee increases, members argued that the costs incurred in being a nurse were challenging the profession. Watch the debate in full at http://tinyurl.com/o723vfc

Wales staffing boost

The National Assembly for Wales has taken the first step to introduce legislation on safe nurse staffing levels in Wales. The RCN has been supporting the bill which was voted through stage one of the four stage process to pass into law and could set a precedent for the rest of the UK. Tina Donnelly, Director RCN Wales, said: "The delivery of high quality patient care depends on the skills and experiences of nurses delivered in a safe environment with safe nursing numbers."

Deaths caused by hot weather will increase by 66 per cent in the 2020s

For more information on the RCN's sustainability work email mark.platt@rcn.org.uk

Visit www.rcn.org.uk/elections

For a full list of this year's Congress award recipients, visit http://tinyurl.com/oabxj7n

Climate challenge

RCN members and staff took part in the Climate Coalition lobby of parliament last month to demonstrate their concern about the damaging effects of climate change on health. A week later, during a debate at RCN Congress in Bournemouth, members said health services must prepare now for what will be inevitable challenges. "The mean estimate of deaths caused by hot weather will increase by 66 per cent to over 3,000 in the 2020s," said debate proposer Stewart Attridge. The RCN will now lobby UK governments on the issue.

A unique opportunity

Nominations are now open for members to stand for election to RCN Council. As one of the most important roles available to members, those elected will provide leadership and direction to ensure the RCN has a clear vision and strategic plan as well as being financially sustainable. Whatever your specialty, this is an opportunity to be an essential part of the RCN. See page 13 for more.

Fine fellows

The RCN awarded four new fellowships and one honorary fellowship to health professionals at Congress in recognition of their exceptional contribution to the art and science of nursing. Member Christine Thomas won an award of merit for her outstanding service to the RCN and the RCN's representatives of the year were honoured.

‘Let us be proud’

In an inspirational first speech to Congress as RCN President, Cecilia Anim delivered an impassioned plea for nursing staff to believe in themselves. “We work hard every day, we are passionate about the work we do and we deliver outstanding patient care. Let us be proud of who we are,” she urged.

During her speech, Cecilia revealed that, with the help of the RCN Foundation, she has chosen to set up a scholarship fund to support nurses working anywhere that human dignity is threatened. With a pledge from the RCN Foundation to match the first £5,000 of donations, Cecilia asked members to support the cause. Text Nurs75 £5 to 70070 to donate £5.

NICE work

The RCN will now campaign for the work of NICE on safe staffing to be reinstated following an emergency resolution at Congress last week.

Member Jason Warriner, who proposed the debate, said: “Safe staffing is about having the right people in the right roles with the right skills to deliver the best care possible. We need to fight for this. Not doing so puts lives at risk.” Member Mark Boothroyd agreed: “This day, right now, there are nurses being expected to look after 10, 12, 14 patients. It’s important we act now.” More than 99 per cent of members voted in favour of the resolution. Watch the debate at **http://tinyurl.com/pzcgraz**

Janet to be new RCN Chief Exec

Janet Davies, RCN Director of Nursing and Service Delivery, is to be the next RCN Chief Executive & General Secretary. Janet has been a Director at the RCN for the last nine years and has two decades of experience as a hands-on nursing leader. Before joining the organisation, she was Chief Executive of the Mersey Regional Ambulance Service. She will take over from Dr Peter Carter in August.

Michael Brown, Chair of RCN Council, said: “It was a unanimous decision to appoint Janet. She will be a strong General Secretary and I believe that with her as our Chief Executive we can continue to be very powerful as a Royal College and trade union.

“There is no mistaking her ambition for the organisation, her passion for nursing and health care and her commitment to the RCN and its future. I very much look forward to working with Janet in her new role over the next few years.”

Janet said: “I am delighted and honoured to be given the opportunity to lead the world’s largest professional union of nursing staff. I have been an RCN member for over 20 years, and have been proud to work for an organisation that does so much to promote nursing and high quality patient care.

“These are challenging times for nurses, midwives and health care assistants, and I will work to ensure that their talent and dedication is properly recognised and that their voice continues to be heard loudly and clearly in the debate about the future shape of health care in the UK.”

Dr Peter Carter, current RCN Chief Executive and General Secretary, said: “I am delighted that Janet will be taking over from me. As the RCN’s Director of Nursing and Service Delivery, she has been an inspiring and energetic colleague, who has put nursing at the forefront of everything she does. I know she will do a great job of building on the many strengths of the RCN.”

Immigration rules 'will cause chaos'

Members demand change to plans that would see thousands of overseas nurses forced to leave

The RCN is calling on the Government to exclude nursing staff from new immigration rules which would see anyone from outside the European Economic Area being forced to leave if they earn less than £35,000 after six years. In a heated debate at Congress, members called for the salary threshold to be reconsidered and for nursing to be added to the list of shortage occupations in the UK.

New RCN research shows changes to the immigration rules will risk intensifying the severe shortage of nurses in the UK, compromising patient safety, as well as costing the health service millions. The effects of the new rules will start being felt in 2017 and the RCN has calculated that up to 3,365 nurses currently working in the UK will potentially be affected. The College estimates it will have cost the NHS £20.19million to recruit them, money which will have been wasted if they are forced to leave.

The figures for future years are even more worrying, particularly if overseas recruitment continues to rise as a result of a shortage of home-grown nurses and a crackdown on agency nurse spending. The RCN believes the Government must take urgent steps to increase the number of UK nurse training places, which will reduce the over-reliance on overseas recruitment in the longer term.

RCN Chief Executive Dr Peter Carter said: "The immigration rules for health care workers will cause chaos for the NHS and other care services. At a time when demand is increasing, the UK is perversely making it harder to employ staff from overseas. We will be sending away nurses who have contributed to the health service for six years. Losing their skills and knowledge and then having to start the cycle again and recruit to replace them is completely illogical."

We will be sending away nurses who have contributed to the health service for six years

The RCN also published a position statement on international recruitment at Congress. It considers the UK's responsibilities towards those countries where recruitment takes place and the fair treatment of staff who come here to work.

Download the *RCN Position Statement on International Recruitment* from **www.rcn.org.uk/publications**

No choice for terminally ill children

Nurses need more time and resources to deliver tailored care around the clock

An RCN survey of children's nurses has found many children are not being given the choice to die at home because there are not enough trained staff to provide 24-hour care in this setting.

Almost all respondents said they work with infants, children and young people with limited life expectancy but less than half said they have the time, skills and resources to deliver what they felt were the right levels of palliative care. Fifty-seven per cent reported that they'd had to send a child to a hospice when it was the child's wish to die at home.

"We say that everyone has a choice but in reality it is very difficult to sustain the cover required to care for a child at home in their final days," said one respondent. Another reported a lack of flexible working patterns as problematic. "Out of hours and weekends are particularly difficult for families to access necessary support," they said.

A lack of training is also having a significant impact. A fifth of respondents said they'd never received specific training in palliative care and consequently, nearly a quarter said they felt unable to provide symptom management care at home.

Fiona Smith, RCN Professional Lead for Children and Young People's Nursing, said: "Funding and resources are critical to ensuring services have the right levels of trained staff to care for children in these incredibly difficult situations. Every child has the right to choose where they spend their last days."

Every child has the right to choose where they spend their last days

Nurses key to seven day success

Invest in senior nurses to make seven day care a reality, says RCN

Government plans for seven day care in England are at risk due to the disproportionate loss of expert posts in recent years, the RCN has warned.

While the College supports moves to ensure patient outcomes are as good at the weekend as they are during the week, it said that nursing staff, particularly senior decision-making nurses and those in advanced roles, are a huge part of the solution to delivering seven day care.

"The importance of these roles can sometimes be overlooked when the NHS rushes to recruit nurses to fill longstanding gaps. But the gap risks getting bigger," said Dr Peter Carter, RCN Chief Executive.

Despite recent recruitment to fill nursing posts, the NHS now has 2,295 fewer nurses working in expert or leadership roles than in 2010.

"Not only do we have too few of these staff to supervise and support care at the moment, those we do have can be stretched so thinly that they cannot do their vital work in developing the next generation of staff," Dr Carter added.

"The NHS needs to work on this, but it needs to do it right. We must invest in getting the right skill mix, the right pay, terms and conditions, and the right training to ensure that we can recruit and retain the staff we need."

Download *Seven Day Care in England – Update for RCN Congress 2015* from **www.rcn.org.uk/publications**

> *The gap risks getting bigger*

Safety at risk say LD nurses

RCN members call for end to cuts in learning disability services

Half of nursing staff caring for people with learning disabilities say cuts have made them concerned for the safety of their patients, according to an RCN survey.

Official statistics show that 21 per cent of nursing posts in learning disability services have been lost since 2010. The survey found that in the last year alone, more than two fifths of respondents have seen drops in staffing levels and, as a result, only 10 per cent say they always have enough time to deliver the right levels of care.

More than half of respondents said that people with learning disabilities are unable to access appropriate care and almost all said there simply aren't enough services in the community to provide sufficient support for those who need it.

Join the RCN Learning Disability Nursing Forum at **www.rcn.org.uk/ld**

What I'm thinking

Gill Cooksey
Congress resolution proposer

There have been several high profile cases where relatives have covertly recorded patients in nursing homes, revealing dreadful abuse. Prosecutions have followed. There have been calls for all such facilities to have CCTV and at first this seems the obvious answer. But is this the right way forward?

Society expects care provision to be safe, effective, responsive and compassionate but I ask how the use of covert and overt surveillance would ensure an improvement in this.

The Care Quality Commission (CQC) undertook its own consultation and reported that although 90 per cent of families might be in favour of their use, residents with capacity to consent, in general, were not in favour of the cameras.

At the end of the day, surveillance would not stop abuse. There are other and better things the RCN should push for. Recruitment training, continuing professional development, enough confident and competent staff on duty with the right mix of skills and good leadership. These are all key.

www.rcn.org.uk/congress

Feedback

Stephanie Aiken
RCN Head of Education, on mentorship

The *Willis Commission* (2012) and *Shape of Caring Review* (2015) both highlighted concerns about how student nurses are supported to learn in practice and question whether the current mentorship model is fit for purpose. In response, the RCN started a mentorship project to help begin to build a picture of the challenges and possible solutions around mentorship.

Following a literature review, building on previous work we have undertaken on mentorship, we held a series of engagement events across the four countries of the UK between December and April. Findings from these activities have been analysed and themed, and these will now form the basis for our conclusions and recommendations. We are currently writing the report, with a planned publication date of late July.

The report will help us identify how we can support members and stakeholders to provide high quality learning environments that meet the needs of the current and future workforce. We anticipate that we will be working in collaboration with the Nursing and Midwifery Council, as the *Shape of Caring Review* recommended, to continue to develop this important work.

www.rcn.org.uk/education

What you've been saying

A valuable addition

It is absolutely not the case that agency nurses fleece millions from the health service ("What you've been saying", June). At this present time, hospitals could not function without agency staff.

I work for the British Nursing Association and I do this because I have a job in the pharmaceutical industry and in order to maintain my registration and keep up to date with what's happening in hospital, I choose to do agency work.

I have a postgraduate diploma in diabetes, which is useful in every ward I am sent to, and I have completed intravenous assessments and safe use of insulin in hospital, which I paid for myself.

I work extra hard as an agency nurse as I would hate for anybody to think I don't do my share. Just because I work as an agency nurse it doesn't mean I don't care or that I don't want to work hard.

I get to my shifts early and I very seldom leave on time. I never claim for any extra hours that I stay on. People should value the experience we bring instead of resenting our pay.

Carolyn Power, by email

Working in retirement

I want to warn nurse colleagues about finding employment in retirement. I retired from the NHS a year ago and six months ago applied for a job as a health and social care assessor at a local college. I was offered a different role as a distance learning assessor, a post funded under a government initiative scheme. It was a zero hours contract and appeared to be ideal.

To date I have not had a single hour's meaningful work, despite assurances of up to 20 hours per week. Simply by being on the books of the college, my tax code has been elevated to the point where I would be £950 per year worse off in tax against my small NHS pension, which I simply cannot afford. I wonder if the college only needed a nurse in post in order to access the government initiative funds.

A Ashton, by letter

Hot topic

What can you do to help relieve work-related stress?

Felicia Cox, a lead nurse in pain management, says: "You can reduce stress at work by breaking some of your bad habits. Avoid trying to ensure everything is perfect. It won't ever be. Leave for work a few minutes earlier so you can better plan your workload. Don't worry about things you don't have the power to change. And finally, a problem shared is a problem halved."

Clinical skills facilitator **Fiona Cassells** says: "Within the health care sector we all need to retain our compassion and our enthusiasm. Burnout and cynicism can creep up on you through working too hard and not balancing home and work. It is essential we all take special care of ourselves, because by nourishing ourselves we can then give to others.

"Eating and sleeping well is also really essential to maintain a balanced body and mind. When I am stressed this is the first thing that seems to be affected, and it's the very thing that is needed for sustaining great mental health. I am glad meditation is recommended much more now. As a way to relieve stress and promote wellbeing, I practise transcendental meditation twice a day and find it invaluable as it is great for recharging the batteries, enhancing creativity and generally feeling optimistic about life."

Helen Goldsmith says peer support is very important. "It's about not being alone, sharing feelings and reflecting on what's happened. It doesn't even have to be formal, it could just be meeting a friend after work."

a quick question

What helps you relax after work?

"It depends on my mood but earlier this week, after a trying day, I played a bit of Beth Orton. I found that the song, *Call Me the Breeze*, helped me unwind."

Anthony Linklater

"I listen to audiobooks. It's a great way to enjoy a mystical adventure, a good laugh or an inspirational story."

Catherine Hughes

3 things I believe

1. Nursing is a profession peopled by skilled individuals. Staff are not cared for adequately by this or any former government.
2. To refer to nurses as "angels" is insulting and undermines their knowledge and experience.
3. I thank my lucky stars I am a nurse and have the most wonderful work friends. I will never be lonely, come what may.

Alison Spurrier, agency nurse

Safety first

Nurse staffing levels must enable the delivery of quality care

We're moving headfirst towards a nursing workforce crisis. Changes to immigration rules, unless reversed, will see overseas nursing staff who earn less than £35,000 after six years being forced to leave the country. The RCN estimates this could affect more than 6,000 nurses by 2020 with millions spent in recruitment costs being thrown down the drain.

Cuts to nurse training places have forced trusts to rely on hiring nurses from overseas, as well as temporary staff, just to provide safe staffing. A cap on agency spending will make one of these options more difficult, and these immigration rules will limit the other. The NHS is being asked to provide safe staffing with two hands tied behind its back.

We must demand the change we want to see. So much progress has been made on setting nurse to patient ratios in recent years and moves towards legally mandated staffing levels in Wales are a huge step forward. However, the announcement in June that the National Institute for Health and Care Excellence is to suspend its work on safe staffing is hugely worrying. This work simply cannot be shelved. Our patients deserve more.

Let us be under no illusion. The years of cuts will take years to repair. For too long there has been a lackadaisical approach to nursing workforce planning. We can't allow this to continue. At Congress last week members expressed their strength of feeling on the issue and the RCN will now put more pressure on politicians.

There's no lack of desire to enter the profession – 37,000 prospective student nurses were turned away last year – so let's invest in our nursing workforce, value those on the ground and pay a fair wage for a hard day's work.

Dr Peter Carter
RCN Chief Executive

Convince me

The term "work/life balance" is fundamentally flawed. We should instead talk about "life/work balance" because this more accurately reflects what we do. There are 168 hours in a week, during which a full-time worker normally spends 37 and a half hours at work. Time at work is still part of life, so why do we give the prominence to work when it really should be the other way round? Let's make a change and see work as secondary to life.

Neil Thompson, district nurse

What I've been reading

Having taken early retirement last November, I have rediscovered the joys of reading. It is not so much about what I am reading but having the time and more importantly the inclination to read. Previously, reading was limited to work related stuff or the holiday chick lit twice a year. I have rediscovered old classics like *Rebecca* (Daphne de Maurier) and *Passage to India* (E.M. Forster) and new ones such as *Bring Up the Bodies* (Hilary Mantel) and *The Tenderness of Wolves* (Stef Penney).

Carol Cleary, retired nurse

From the heart

Charlotte Bennett
RCN Congress first timer

Coming to Congress has really changed my perceptions of nursing. As a first year nursing student, my experiences so far have mostly been shaped by my university and the time I've spent on placement, but this has really opened my eyes.

I wanted to come to network and to meet people as passionate about the positives of nursing as I am. I've not been let down. The debates have been so inspiring. It's been great to see people getting up and questioning what most nurses accept as the norm. People here are not afraid to speak up and challenge government policy. There's a great sense of unity and it's empowering to see what can be achieved when we all stand together.

The keynote speech by Dr Peter Carter was a particular highlight. What he said really resonated with me. It feels that nursing is very apologetic for seeing itself as a profession but I think nurses need to beat their own drum. I'll definitely be coming again next year.

www.rcn.org.uk/congress

‘Such an enjoyable job’

In his final month as RCN Chief Executive, Dr Peter Carter talks to Daniel Allen about his biggest achievements and future plans

In his office at RCN headquarters in London, Dr Peter Carter is listing some of the places he has visited during his time as Chief Executive. Among them, Shetland, Orkney, the Isle of Man, remote parts of Norfolk, Holloway Prison, Japan, the operating theatre at Moorfields Eye Hospital, the Houses of Parliament, assorted TV and radio studios, a children’s hospice in Dorset, Basra, Afghanistan and the Royal Hospital for Neuro-disability in Putney.

He could add a thousand more and the list is evidence of his resolve, since day one in the job, to connect with members and to ensure the RCN is firmly fixed in the consciousness of politicians, the media and the public, at home and abroad. “I’ve had so many amazing opportunities,” he says.

Back on track

But the job has brought challenges, too. He joined the RCN in January 2007 after heading Central and North West London Mental Health Trust for 12 years. It’s a matter of public record that College finances were then in a hole and plans were being discussed to sell the headquarters building in Cavendish Square. “Membership was also dropping and the RCN had lost its place in the media,” he says. “It was a great institution but it had got into a mess.”

With the support of RCN Council and a team comprising existing staff and trusted newcomers, he got to work immediately. “On day two, I said to Eirlys Warrington, then Chair of Council, ‘Selling Cavendish Square just doesn’t make sense.’ If you’re in debt you don’t sell your principal asset, you deal with why you’re in debt.” Council backed his proposal to halt the sale.

As a former trust chief executive, he also recognised the importance of getting staff at all levels onside. An early employee survey exposed considerable dissatisfaction and he knew that without staff support, improving services for members would be difficult. He made a point of “walking the floor”, spending an hour or two every week chatting to people in their offices, in corridors, at their desks.

A third challenge was the declining membership. Dr Carter has always insisted on including in his diary weekly visits to hospitals, units and clinics all over the UK to boost the College’s profile and, importantly, to hear from those for whom the RCN exists. A systematic recruitment drive has completely reversed the decline and pushed membership to a record high.

So as he prepares to leave at the end of this month, the RCN looks a lot healthier than when he arrived. The books have been balanced; as an employer the College is recognised as among the best; and thousands of new members have been recruited. “I like to think that collectively – and it’s not just me and the top team, it’s deep into the RCN – we have strengthened our position as a highly credible organisation,” Dr Carter says.

But the more challenging aspects of the job fall away when he talks of the immense satisfaction the role has given him. Heading the RCN brings many opportunities but those that showcase nursing in all its diversity have offered him the biggest rewards, including a visit to British forces in Iraq. “When I went to Basra and saw the nurses out there, the skill and technology, the ways of treating ballistic injuries, it was absolutely phenomenal,” Dr Carter says.

> *I’ve had so many amazing opportunities*

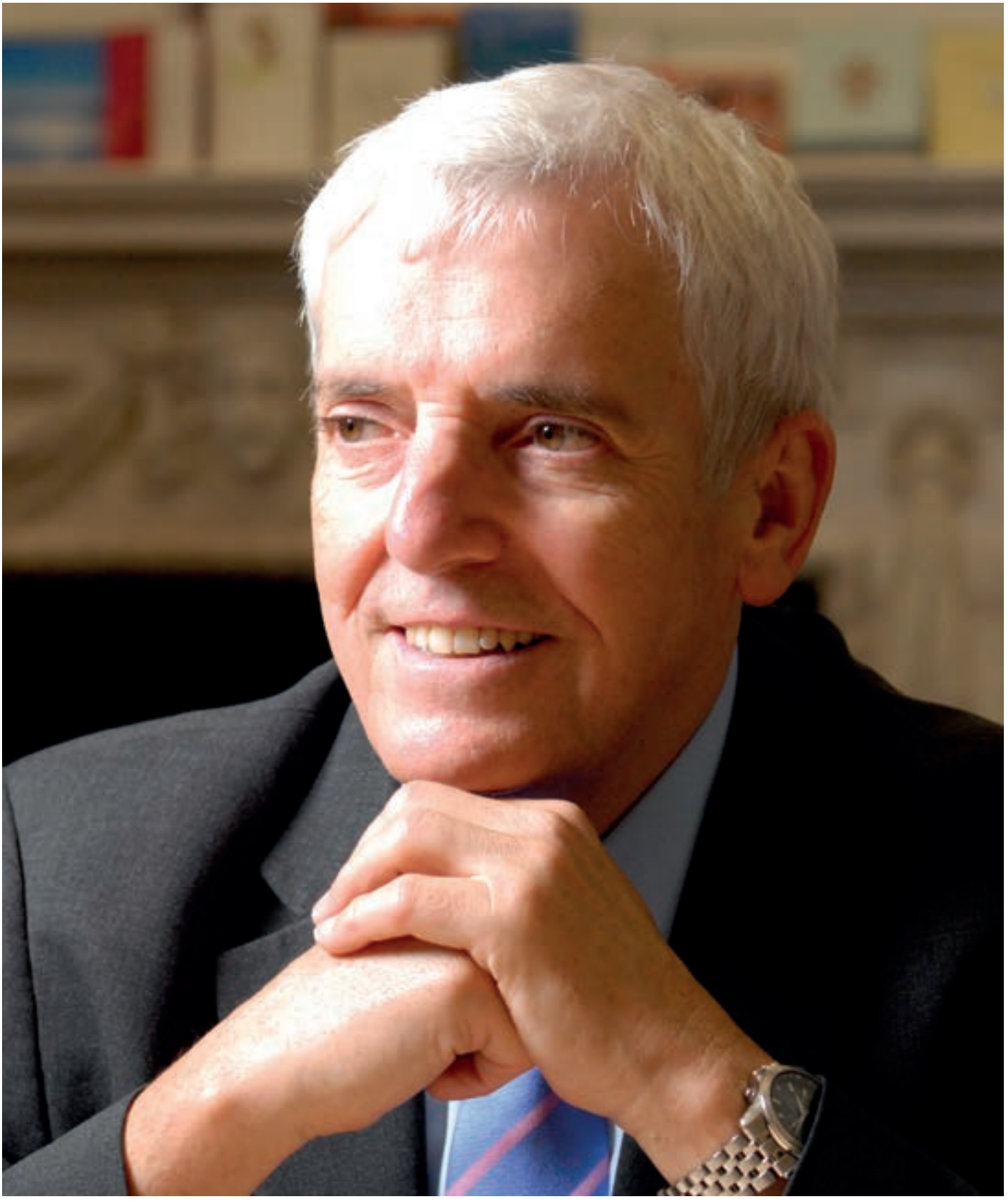
So proud

Even after eight and a half years, the buzz he receives from nursing excellence is undiminished. “I’m so proud of the things members do,” he says. So are others. He produces a sheaf of letters and printed-out emails sent to him from relatives praising the care that nursing staff have given to loved ones.

He’s proud, too, of the RCN’s political credibility, citing the College’s articulate rebuttal of former Health Secretary Andrew Lansley’s plans for the NHS. “We were pivotal in challenging those reforms – I think that was quite a moment.”

So what does the future hold? “Well, ‘retirement’ is off the lexicon. I’m going to work as a consultant. I think I’ve got a lot to offer in terms of problem solving, policy, standards of care, expert witness cases. And I’ve got lots of interests, too, things I want to do.”

He’ll miss the RCN, of course. “It’s going to be a big wrench. This job has just been so enjoyable. Every day I see things that truly inspire me.”



Looking out for yourself

As more care moves in to the community, more nursing staff are making home visits to clients alone. Tom Metcalf explores how members can protect themselves

In 1986 Suzy Lamplugh, a 25-year-old London estate agent, disappeared after she went to meet an unknown client. She has been presumed murdered and was legally declared dead in 1993. To date her body has never been found.

At RCN Congress last week, a representative from the Suzy Lamplugh Trust, a charity set up by Suzy's parents to raise awareness of possible dangers in society, spoke to members about how they can improve their personal safety. Lara Wilks Sloan delivered the lecture and urged nurses to know their rights and take steps to protect themselves.

"Community nurses have one of the riskiest jobs, yet in a lot of cases appropriate training is either not available or is not being made accessible to staff," she says. As a result, some nurses have to endure violence, aggression, stalking and other forms of harassment without knowing how to protect themselves.

"There's a feeling that part of the job is to just put up with it," says Lara. "The most important thing for me is to instil a belief in nurses that they deserve to be safe at work. It's almost a case of giving them permission to look out for themselves. Then you can learn the skills to help you stay safe."

Taking action

Lone working was a recurring theme at Congress. As well as the lecture, members voted to support a resolution calling on RCN Council to take action against organisations which fail to provide sufficiently robust lone working systems to protect nursing staff.

While there is clearly more employers can do to ensure nursing staff have access to adequate training and technology, part of Lara's lecture was dedicated to empowering members to take control.

> *Employers have a legal duty to protect you*

Access the RCN Direct advice guide on lone working at **www.rcn.org.uk/working_alone** or visit the Suzy Lamplugh Trust website at **www.suzylamplugh.org**

"It's about thinking how nursing staff can manage the risks themselves and look out for one another if there's no training on offer," she says. "Community nurses often don't have contact with anyone at work. So without a monitoring system, if something were to happen it might be a long time before the alarm was raised, as was the case with Suzy Lamplugh."

Things like buddy systems, where nurses check in with each other over the course of the day, are a good way of preventing isolation and don't cost anything, other than the price of a text or phone call. Other mechanisms might seem like common sense – looking out for warning signs at a property, having an exit strategy and a covert way of raising the alarm, carrying a spare phone in case one runs out of battery – but can be easily forgotten in tense circumstances. It's important the knowledge is ingrained, Lara stresses.

Establishing boundaries is also important, both with patients and employers, so if a certain line is crossed nurses can feel confident they can remove themselves from a situation.

"A lot of this is obvious and should be happening already, but in a lot of cases it's not," says Lara. "Employers have a legal duty to protect you and you have a duty to tell them if they're not, or if what's in place isn't working. If nothing else I hope I've given nurses some useful tools and encouraged them to demand appropriate training so they can stay safe while doing a vital job," she adds.

Advocates for health

Nursing's diversity is highlighted in a new publication showcasing the wide range of nursing talent in the South West. Vita FitzSimons reports

A prison nurse, a "surf nurse" and an advanced nurse practitioner are just three of the RCN members featured in a new publication which celebrates the South West's nursing talent. Nurses and health care support workers often go the extra mile to help their patients, with interventions that can have far-reaching results.

Kimberley Blakey is a prison nurse in Dorset, running clinics for the over-55s for illnesses such as chronic obstructive pulmonary disease, asthma and diabetes. "We're advocates for health," she explains. "We try to educate our patients about lifestyle choices like drugs and alcohol which could shorten their lives. Enabling a patient in prison to access health care and make the most of it is a huge feat, as some of them have suffered years of self-neglect."

In the publication Kimberley describes working with a patient who was refusing to accept his prostate cancer diagnosis and undergo treatment. Through a series of one-to-one sessions, Kim helped him come to terms with his illness and accept help. He was eventually given the all-clear after a course of radiotherapy. "Empowering a patient like that in self-preservation makes me proud," she says.

Making waves

Zoe Carter (see cover image) is a child and adolescent mental health nurse working on the transition between in-patient care and community care. One day a week she is seconded from Dorset Healthcare University NHS Foundation Trust to the Wave Project, an initiative she set up in Bournemouth to provide surfing courses for children and young people with or at risk of developing mental health issues.

She takes referrals from clinicians, schools, social services and charities. The course can provide an ideal bridge from inpatient to community care for some: a safe, friendly environment in which to gain confidence and form friendships.

"There's a lot of evidence for the sea being therapeutic," she says. "It's all about early intervention and supporting children when they're young. When you do, you can change the cycle."

> *It's really rewarding making that difference to people's lives*

Responding rapidly

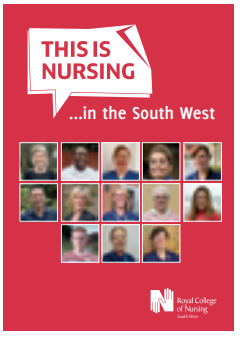
Karen Crane (pictured) works for Bristol Community Health as an advanced nurse practitioner in a rapid response team, working to keep patients out of hospital during periods of acute need.

"People want to be at home for as long as possible," she explains. "When you visit for their initial assessment, and tell them they may be able to avoid hospital, the look of relief on their faces is priceless. It's really rewarding making that difference to people's lives, seeing them respond well to the treatment you provide."

Karen's team has developed an early warning score which is unique in a community setting. They are also developing a sepsis tool. "Sepsis has a higher mortality rate than breast and bowel cancer and it's a more common reason for hospital admission than heart attack," she explains.

It takes incredible levels of skill and dedication to consistently provide excellent nursing care. *This is Nursing in the South West* highlights just a few examples of the amazing people doing exactly that.

This is Nursing in the South West can be downloaded from **www.rcn.org.uk/publications**



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Standing out

Could you be an RCN Council member? Kim Scott explores the personal and professional benefits of getting involved

RCN Council has a crucial role. In the past year members elected to the College's governing body have made important decisions on a variety of issues, from how and when to consult members on accepting the NHS pay offer in England to who should be appointed as the next RCN Chief Executive & General Secretary.

It's not a role to be taken lightly but neither is it one that should feel out of reach. Standing for election to RCN Council is a unique opportunity to not only support nursing, but to develop your own skills and experience. For former Chair of Council Kath McCourt (pictured) it opened up avenues unavailable elsewhere.

"My time on Council exposed me to people and prospects I wouldn't have had the chance to influence otherwise," she says. "I became involved in work of national significance and was able to really shape the future direction of nursing."

One of Kath's biggest achievements on Council, she feels, was helping to initiate the independent commission on nurse education back in 2012 and working with Lord Willis to examine the preparation needed to provide a nursing workforce fit for the future. It was the precursor to the *Shape of Caring Review*, which recently made recommendations on how nurse training and education should be revolutionised over the next 15 years.

For Kath, an educationalist and now Executive Dean at Northumbria University, it was a high point. "The quality of knowledge you gain and the currency this gives you in the work environment is just fantastic," she adds. "You become familiar with how high level meetings are run and you develop a whole raft of leadership and strategic influencing skills. I think my involvement with the RCN has increased my professional opportunities. It sets you slightly apart."

It's the most stimulating and energising thing I've done

All the information you need to stand for election to RCN Council, including the nomination process, eligibility criteria and terms of office, can be found at **www.rcn.org.uk/elections**

Could it be you?

Nominations are now open for members to stand for election to RCN Council. Comprising 31 members in total, there are opportunities for members from Scotland, Wales, Northern Ireland and each of the nine English regions to join existing elected representatives. Nominations are also encouraged for the student and health practitioner seats on Council.

By putting yourself forward, you will be at the forefront of providing leadership and direction to the RCN and act in a way that strengthens the organisation and nursing as a profession. You will help ensure the College has a clear vision, is financially sustainable and takes account of the wider interests of the RCN.

Governance is about being accountable to members for the effective stewardship of the organisation and not being afraid to ask questions. All Council members will receive an induction and support to develop their skills.

The RCN is led by members, for members. So help make sure it stays that way. Nursing and health face some of the biggest challenges for decades. By becoming more involved, you could bring a different perspective to the way things work.

The most important thing is to be a passionate ambassador for nursing. "Don't be afraid," urges Kath. "If you're committed to the profession and want to drive improvements, just do it, don't hesitate. It's the most stimulating and energising thing I've done."

New guidance for treating anaemia

The RCN Gastrointestinal Nursing Forum has been leading the development of a range of learning resources to help nursing staff provide effective treatment for iron deficiency anaemia

Iron deficiency anaemia (IDA) is a common problem among patients. It is caused by a lack of iron in the body, resulting in a reduction in red blood cells. Symptoms include fatigue and weakness, and left untreated it can lead to serious health implications, such as surgery and blood transfusions, and loss of working time.

Almost all nurses care for patients with anaemia, but many don't know much about a condition which costs the NHS £55 million a year, as Isobel Mason, Chair of the Gastrointestinal Nursing Forum and the project lead, explains.

"Despite being one of the most common causes of emergencies, IDA is a really neglected area of patient care," she says. "It's easily treated, but a lack of awareness and training has led to it often becoming a serious problem for patients – and a heavy expense for health services. People don't realise how common it is, and nurses need to be able to recognise it."

The forum has been working in conjunction with other stakeholders, including the RCN Women's Health and Midwifery forums, to produce guidance for nursing staff on identifying the condition and the various ways to treat it, from dietary supplements to intravenous iron.

People don't realise how common it is

The project has been supported by Vifor Pharma UK and guidance was launched at a fringe event at RCN Congress last month. The publication is available in print and electronic formats and offers general guidance, with appendices for specialist areas. Pocket cards have also been produced.

Isobel added: "These resources will help nurses to identify patients with IDA and treat the condition efficiently. This will hopefully help prevent further health issues for patients."

Find out more about the work of the RCN Gastrointestinal Nursing Forum at **www.rcn.org.uk/gastro**

Download the guidance and related materials from **www.rcn.org.uk/publications**

Calls for better training in asthma care

A report has raised concerns about the number of potentially dangerous prescribing errors for people with asthma

The report by the charity Asthma UK found some patients had been prescribed the wrong kind of inhaler, leaving them at risk of potentially fatal attacks.

The findings demonstrate the need for up-to-date and expert training for all those who treat people with asthma, according to RCN member Matthew Hodson.

Matthew, who is Chair of the Association of Respiratory Nurse Specialists, said: "This report sadly highlights continuing concerns that patients with asthma may not always be receiving the best evidence-based care in terms of the drugs they are prescribed and how they are used.

"Correct training is crucial and should encompass the correct diagnosis, the understanding of asthma guidelines in practice, and the best evidence for long-term treatment.

"Respiratory nurses have a role to support this but so much of asthma care is undertaken in primary care that all staff have a responsibility to ensure evidence-based care is delivered and all employers should ensure that staff can access asthma training."

Dr Peter Carter, Chief Executive & General Secretary of the RCN, emphasised the importance of equipping health care staff with the right tools to deliver effective asthma care.

"Nurses and pharmacists teach inhaler technique and should receive training in it to ensure that people are supported to take their medications effectively," said Dr Carter.

"The role of specialist nurses is vital in supporting better patient education, but the number of specialist nursing posts eroded in recent years is deeply concerning. The NHS needs to ensure staff have the opportunity to update their skills."

All staff have a responsibility to ensure evidence-based care is delivered

Download *Patient Safety Failures in Asthma Care* from **www.asthma.org.uk/patient-safety**

Ending inequalities

A discussion about the impact of health inequalities in childhood, led by the CYP Specialist Care Forum at RCN Congress last week, attracted such strong views that the RCN will now lobby all UK governments to invest in children and young people.

"There is a correlation between poverty, deprivation and poor health outcomes, which is seen from earliest childhood and persists across the life span," said Rachel Hollis, proposing the debate. "What happens during childhood, starting before birth, has lifelong effects on many aspects of health and wellbeing from obesity, heart disease and mental health to educational achievements and economic status."

More than 99 per cent of members voted to support the resolution.

Watch the debate at **http://tinyurl.com/pu2btwt**

Sharing patient records

Members are being encouraged to get involved with a new body set up by professional and patient organisations, including the RCN, to support the sharing of patient records for better, safer care.

The Professional Records Standards Body (PRSB) aims to ensure that the content and structure of all electronic care records are developed in a standardised format to make the reuse of data easier for care analysis, reports, audit and research.

Annette Gilmore from the RCN eHealth Forum said: "Nurses and midwives everywhere must get involved with the PRSB to ensure their experience and knowledge informs and shapes how these standards are developed."

Join the eHealth Forum by visiting **www.rcn.org.uk/forums**

At the heart of it

A new RCN publication has been launched which sets out the minimum standards for adult congenital heart disease nursing. *Adult Congenital Heart Disease Nursing: RCN Guidance on Roles, Career Pathways and Competence Development* includes recommendations for education and training as well as recognising the unique and complex nature of this specialty.

Download the publication from **www.rcn.org.uk/publications**

Safe travels

RCN members who care for people travelling abroad can find out the latest goings on in their field at a conference happening in London this September. In partnership with Travel Health Training Ltd, the RCN conference will cover a variety of topics including travelling at high altitude, travelling with complex medical conditions, reflections on Ebola and a host of other subjects. Book your place at **www.rcn.org.uk/TH15**

Integrated care

Health and social care integration was a hot topic among nurses at this year's RCN Congress. A fringe event held by the RCN District Nurses' Forum explored the opportunities and challenges of planning and delivering integrated care at a local level. The focus was on the role of the community nurse in the development of future services. The forum also held an event on the development of future district nursing services which explored the opportunities and challenges of current policy drivers, including the NHS Five Year Forward View.

What I'm thinking

Ed Freshwater
Mental Health Forum

I joined the Mental Health Forum Steering Committee before qualifying as a nurse, and maybe that's quite surprising as I know that the transition from student to practitioner comes with its own stresses and issues.

Mental health nursing is under enormous stress at the moment. As professionals we face the dual challenges of funding crises and changes to the way services are delivered. I believe that, in the face of these difficulties, nurses have the opportunity to establish themselves as the mental health experts best placed to develop new services and ways of working. We are compassionate advocates who care, but also registered professionals who do research and innovate.

One way to improve nursing care nationally is to share our experiences. I want to promote how we communicate professionally, in our discussion zone and through social media, to inspire and encourage all nurses involved in mental health provision. Everyone has a voice and a role to play.

www.rcn.org.uk/forums

EVENTS

FIND MORE DETAILS OF THE EVENTS LISTED BY VISITING THE REGION AND COUNTRY PAGES OF THE RCN WEBSITE OR GO TO **WWW.RCN.ORG.UK/EVENTS**

RCN school nurses conference and exhibition

Monday 24 August, 8.45am-4.15pm
Thistle Hotel Marble Arch, London W1H 7EH

Many school nurses, especially those from free schools, academies, independent and boarding schools, can be professionally isolated. Attendance at events, such as this RCN conference, provides a valuable opportunity to meet other nurses, remain professionally up to date and discuss issues with like-minded individuals. The aims and objectives of this one-day conference are to:

- enhance professional and clinical practice knowledge and skills amongst attendees
- raise awareness of the RCN's school nurses' community and mechanisms to influence future policy and practice
- facilitate networking and sharing ideas.

Visit **www.rcn.org.uk/SN15** or email **elizabeth.butler@rcn.org.uk** for more information.

Northern Ireland

www.rcn.org.uk/northernireland

Belfast
Friday 18 September, 10am-3.30pm
RCN Northern Ireland HQ, 17 Windsor Avenue, Belfast BT9 6EE
RCN Northern Ireland Forensic Conference 2015
Speakers include David Ford, Minister for Justice NI, and Ian Hulatt, RCN Professional Lead for Mental Health.

Scotland

www.rcn.org.uk/scotland

Edinburgh
Wednesday 28 October
Hilton Edinburgh Grosvenor Hotel, Grosvenor Street, Edinburgh EH12 5EF
Nursing Scotland's Future - RCN Scotland campaign for Scottish Parliament in 2016
An opportunity for members to shape the RCN's election manifesto and priorities.

Wales

www.rcn.org.uk/wales

Cardiff
Monday 7 September
The Grape and Olive, 3 Wedal Road, Cardiff CF14 3QX
Two RCN Wales seminars. In the morning, *Mental Capacity Act 2005 and Deprivation of Liberty Safeguards*. In the afternoon, *Safeguarding of Vulnerable Adults*
For an application form or more information email **rhona.workman@rcn.org.uk** or call 029 2068 0713.

East Midlands

www.rcn.org.uk/eastmidlands

Boston
Thursday 16 July, 7pm
Committee Room 1, Pilgrim Hospital, Sibsey Road, Boston, Lincolnshire PE21 9QS
RCN South Lincolnshire branch meeting.

Eastern

www.rcn.org.uk/eastern

Bury St Edmunds
Tuesday 7 July, 10.30am-4pm
West Suffolk NHS Foundation Trust, Hardwick Lane, Bury St Edmunds, Suffolk IP33 2QZ
Eastern Region Safety Representatives Network
Open to Eastern region safety reps, the theme of this meeting will be the safety reps' role in hazard spotting, workplace inspections and making representations to management. To find out more and to book a place email **shirley.palmer@rcn.org.uk**

London

www.rcn.org.uk/london

Westminster
Wednesday 3 July
RCN Library and Heritage Centre, 20 Cavendish Square, London W1G 0RN
Women's Poetry in the Great War
A performance by nurse and poet Audrey Ardern-Jones with music by Lucas Jordan (flute) and Fabricio Mattos (guitar). Tickets cost £12 for RCN members (£15 for non-members) and can be booked by contacting RCN Event Registrations on 029 2054 6460 or emailing **eventsreg@rcn.org.uk**

North West

www.rcn.org.uk/northwest

Oldham
Friday 3 July, 6.30-8pm
Horton House, Southlink Business Park, Hamilton Street, Oldham OL4 1DA
RCN Greater Manchester branch meeting.

Northern

www.rcn.org.uk/northern

Sunderland
Wednesday 22 July, 1-4pm
RCN Sunderland Office, Avalon House, St Catherine's Court, Sunderland SR5 3XJ
Independent Sector Network meeting
For more information or to book email **mandy.clark@rcn.org.uk**

South East

www.rcn.org.uk/southeast

London
Thursday 9 July, 9am-3pm
Cowdray Hall, RCN HQ, 20 Cavendish Square, London W1G 0RN
South East HCA conference
This one-day conference for HCAs in the South East region comprises a range of sessions to enhance your career and practice, including: *Understanding the HCA Code of Conduct*, *Your Rights* and *Courage in Your Convictions*. The event is open to RCN members and non-members, costs £20 to attend, and free lunch is included. To book your place paying by debit/credit card please call RCN Events Registrations on 02920 546460, quoting event reference: E1939. Or to obtain a booking form email **newbury.office@rcn.org.uk**

South West

www.rcn.org.uk/southwest

Plymouth
Tuesday 14 July, 5.30-7.30pm
Beauchamp Centre (top floor), Mount Gould Hospital, Mount Gould Road, Plymouth PL4 7QD
Plymouth branch meeting
All RCN Plymouth members are welcome.

West Midlands

www.rcn.org.uk/westmidlands

Worcester
Friday 17 July, 1.30pm
CHEC, Worcester Hospital, Charles Hastings Way, Worcester WR5 1DD
RCN Worcestershire Local Learning Event: *NMC Revalidation and You*
Paul Vaughan, RCN West Midlands Regional Director, will talk about the process of revalidation and how to demonstrate to the NMC that you meet the requirements of the code and remain fit to practise.

Yorkshire & the Humber

www.rcn.org.uk/yorkshireandhumber

Leeds
Wednesday 19 August, 2-4pm
RCN Leeds Office, 9 Bond Court, Leeds LS1 2JZ
West Yorkshire Branch meeting
Open to all members of the RCN West Yorkshire branch.