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SPRING 2016

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Hello

A warm welcome to all fellow health care support workers. As you may know, it's the RCN's centenary year and we are celebrating nursing throughout the UK. Turn to pages 12-13 to find out more and visit www.rcn.org.uk/centenary.



We also have RCN Congress (www.rcn.org.uk/congress or #rcn16) fast approaching, taking place in Glasgow from 18 to 22 June. There will be lots of debating and discussions on items relevant to you, and we'll be sending you more details shortly so you can talk to your employer about the benefits to your practice of attending. It is a fantastic learning event with great opportunities for networking so why not have your say and influence change? Members of the RCN Health Practitioner Committee and I hope to see you there.

We have a packed magazine full of news and inspiring stories that I hope you enjoy. Contact us if there is any topic you would like covered or why not share your story in a future issue of *Health+Care*? It's your magazine!

Until next time,
Brenda McDonald
 RCN Health Practitioner (HP) Council Member
 RCN HP Committee Chair

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Lines are available 8.30am-8.30pm, seven days a week, 365 days a year
www.rcn.org.uk/direct

What makes you a great HCSW?

As a special project for our centenary, we're asking for your help to compile 100 top tips by HCSWs for HCSWs

We're looking for advice that your colleagues might find helpful, such as how you deliver excellent patient care, how you relax after a busy work day, or how you build great relationships with patients and colleagues.

The RCN HP Committee will produce a shortlist from your submissions and the final 100 top tips will be selected at Congress. We'll put these into a mini-guide, which will be sent out with your next copy of *Health + Care*. So if you have a tip, visit www.rcn.org.uk and search for "100 top tips". We look forward to hearing your ideas.

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Published by:
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 London W1G 0RN
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W: www.rcn.org.uk/hca
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Publication code: 005 452

Please note throughout the magazine we use abbreviations HCA (health care assistant), AP (assistant practitioner), and HCSW (health care support worker) to cover all those in health care support worker roles.

'Nursing associate' consultation response

The RCN has welcomed the views of HCSWs from across the UK and has now submitted its response to Health Education England's consultation on the proposed creation of a new nursing support role. Read what the RCN has to say about the role on pages 6-7.

New living wage

A new national living wage of a minimum of £7.20 an hour for workers 25 and over will become a legal requirement from 1 April. It will apply to part-time and full-time workers. For those aged between 21-24, the minimum rate will be £6.70 and £5.30 for ages 18-20. All employers should have plans in place to comply with this.

"If any of our HCA and AP members believe they aren't being paid this as a minimum from April they should check with their employer and then call RCN Direct for advice," said Brian Morton, RCN Employment Relations Adviser.

The RCN is campaigning for the Living Wage Foundation's recommended minimum living wage of £8.25 and hour, and £9.40 in London, but this is only used by employers on a voluntary basis.

Make sure you benefit from laundry allowance tax relief increase

HCSWs will see an increase in the tax relief available on their laundry allowance thanks to the work of the RCN and other NHS unions.

The flat rate expense allowance for nursing staff has increased from £100 to £125 per annum and is effective on all claims dating back to 6 April 2014. This applies to all staff who are required to launder their own uniforms whether they are in the NHS or working for other health care employers.

The relief does not apply if an employer launders uniforms for its staff or if the employer provides laundry facilities but the HCSW chooses to launder their uniform at home. Go to www.rcn.org.uk/laundry-tax-relief

Going international

There will be a significant discount for HCA and AP members to attend the RCN International Centenary Conference taking place at the QE2 in London from 22 to 23 November 2016.

Be inspired by speakers from worldwide organisations such as the World Health Organisation and the United Nations and get involved in the conversation on the most important issues within health and care. Find out more about the RCN's centenary on pages 12-13.

Visit <http://tinyurl.com/hg46pop>

Excellence in older people's care



The RCN in Scotland has published eight stories which celebrate the expertise, technical knowledge and compassion of HCSWs and nurses who care for older people.

Theresa Fyffe, RCN Scotland Director, said: "There is a perception among some members of the public and some health care professionals that caring for older people is menial work and nurses and HCSWs are only doing it until a 'better job' comes along. This couldn't be further from the truth, as these stories clearly show."

Download *A Positive Choice* from <http://tinyurl.com/hm3mj8q>

Get ready for Congress



RCN Congress, the biggest event in the nursing calendar, is taking place on Saturday 18 to Wednesday 22 June at the SECC in Glasgow

There's an ambitious programme of professional development workshops planned for HCSWs, including sessions on record keeping (see page 14) and leadership taking place on Sunday, Monday, and Tuesday lunchtimes.

Several events with specific relevance to HCSWs include sessions such as eye care, learning and disability nursing and sepsis. This year the RCN Fellows' fringe is on the role of HCAs and APs in nursing teams.

There will also be the chance for members to play a special Care Certificate game which shares similarities with trivial pursuit but instead of general knowledge, covers eight of the Care Certificate topics. Visit www.rcn.org.uk/congress

New Wales framework

NHS Wales has introduced a skills and career development framework for all support workers. Alison Davies, RCN Associate Director (Professional Practice), said: "This will help to provide a consistent pathway for HCSWs across the NHS in Wales and we are pleased the Welsh government is valuing the vital role support workers play." HCSWs in Wales are encouraged to find out more. Go to <http://tinyurl.com/z4nw35o>



Get involved

The editorial team at *Health+Care* magazine is always keen to hear about your experiences for potential features, so if you have a story to share, let us know. Email bulletin@rcn.org.uk and put "Health+Care" in the subject line.

Got a timely issue to share?

The final agenda has now been agreed for RCN Congress, but you can still submit emergency items until the end of the event on 22 June 2016.

So if there's a recent development you believe should be on the agenda, make sure you let your representative on the RCN Health Practitioner Committee know.

Email governance.support@rcn.org.uk to find out more or take a look on the rcn website www.rcn.org.uk/congress

A new role model?

The RCN has responded to HEE's consultation on plans for a new nursing support role. Tanis Hand, RCN Professional Lead for HCAs and APs, provides a brief overview of the RCN's response

Why create the role?

Health Education England (HEE) has proposed introducing "nursing associates" to bridge the gap between the unregulated HCA workforce and the registered nursing workforce. The proposal is based on recommendations from the *Shape of Caring Review*.

What does the RCN say?

The current workforce crisis means health and social care providers across the UK are struggling to recruit registered nurses (RNs) to fill vacant posts.

The RCN has for many years been supportive of HCSWs being enabled to develop and progress within an education and career framework that would offer the choice of a route into registered nursing if they wish. So we support the principle of a recognised senior support worker role, but note that similar roles already exist and these should be explored as part of the solution.

The proposal contains some positive principles, reinforcing the importance of role clarity, education and a career framework. But our members have voiced concerns relating to staffing levels and skill mix, capacity for mentorship, substitution issues and confusion around roles, for example.

The RCN is clear the registered nursing workforce must remain an all graduate profession, and that registered nurses retain responsibility for the overall nursing care of their patients.



New role needs to be clearly defined in relation to current RN role



Trevor

What's the difference between the new role and an assistant practitioner (AP)?

We're very aware the AP role is set at the same career framework level as this proposed role and believe that APs can and do provide the higher level of care proposed.

Does this mean re-introducing second level registered nurses?

HEE argues not, saying the new role is driven by a gap in intermediary skills (core practical skills), and will provide registered nurses with time to "focus on leading, managing and designing high quality patient care". The RCN firmly opposes the return of the second level registered nurse and is clear that graduate entry is critical to the preparation of the registered nurse.

Will this mean a new route into nursing?

HEE claims the new role will provide a new route into pre-registration nurse education, and be integrated into the nursing workforce. The academic and vocational pathway is proposed to be through the higher apprenticeship leading to a foundation degree or equivalent. Any route into nursing would have to lead into a bachelor's degree and meet Nursing and Midwifery Council standards.

Will the new role be regulated?

The consultation has asked for opinions on this. The RCN's position is that all support workers should be regulated. We believe that regulating a senior nursing support role offers the potential for a phased approach to mandatory, statutory regulation for support workers.



What this cannot be is a kneejerk reaction to the present shortages but a properly structured, accredited and above all, regulated career pathway



Jane

How did the RCN seek member views?

The HEE consultation was held over just six weeks. Engaging with our members on this has been a priority.

We ran a survey for all members and interested parties across the UK and the views of more than 5,000 respondents helped to inform our response. We also gathered opinions at events and held a very lively Twitter chat.

What will the RCN be doing now?

The consultation closed on 11 March. Once we know the outcome we'll be making sure we're involved in any further developments as they emerge.

The full consultation response will be available at www.rcn.org.uk. HEE is due to publish its results and next steps in June 2016.

The RCN survey

Four major themes emerged:

- the main potential positive was that the new role may provide a work-based route into registered nursing for those who want to progress
- the biggest factor relating to the perceived gap in the workforce is due to insufficient numbers of registered nurses
- diluting the skill mix and creating confusion for patients and colleagues were considered the most likely negative consequences of introducing the new role
- more than 60 per cent of respondents did not think registered nurses have the capacity to provide support or mentorship for the new role.

Horticultural therapy

Justine Jamieson, a health care support worker from Wales, fought all the odds to set up a gardening initiative which is changing the lives of people with mental health issues



Gardening has many benefits. It's relaxing, it gets you out in the fresh air and, if you grow your own produce, it can contribute to a healthy diet.

But Justine Jamieson, a health care support worker at Aneurin Bevan Health Board in South Wales suspected it could do more than that, and give patients real therapeutic benefits.

Justine knows what an impact being outside can have on someone's mental health from her time working in the Monmouthshire Assertive Outreach team, which supports people with serious mental illness.

Her team used to take patients to a local farm to encourage them to spend time outside in a calming environment, and when this project stopped Justine was keen to replace it with something similar.

She came up with the idea of starting a garden and allotment for staff and patients to work on. She asked around and found a plot of spare land in Abergavenny, behind a council community care home.

The next step was to approach the council with a business proposal for the project. Despite having no previous business experience to speak of, Justine was undaunted.

"It wasn't a professional business plan at all," she says. "It was two sides of A4 focusing on the benefits the project would bring to the patients and the community. I kept it light-hearted and natural. I thought it was best to just be myself, rather than pretend to be an experienced business person."

Her approach clearly struck a chord with the council, as they agreed to the proposal. But before she could get the project up and running there were further hurdles to overcome.

First there was the issue of fundraising. Justine raised money through charity walks, coffee mornings and a supermarket token scheme. Local businesses also helped out by donating tools and materials.

Overcoming obstacles

"There were a lot of hoops to jump through because of health and safety, including doing risk assessments for the tools," says Justine. "It seemed like there was always another obstacle to overcome, and at times I felt like giving up, but the support of my colleagues and the patients spurred me on. Eventually the clouds parted."

In February last year Justine, along with a group of staff and patients, made their first visit to the site. Faced with a plot of empty land, there was a lot of work to be done, but fast forward several months and the site has been transformed.

"Now we have vegetable patches, a compost heap, water butts made from barrels. We're making raised beds at the moment, which the patients are designing and decorating themselves. We even sell bags of potatoes to the community and donate produce to the café at the social care centre."

Justine says the response from patients has been really good. "It gives them a

purpose, helps them feel at ease and promotes their independence. They turn up every week, rain or shine.

"The staff also have a really positive attitude towards it, although we don't go up there as staff and patients, we go up as a group of individuals and everyone mucks in.

"The rewards speak for themselves. Patients who normally eat fast food are now taking home their own vegetables. It's fantastic."

Future plans include expanding the space to include a community allotment. Justine eventually wants the project to become patient led. Her advice to others who might be keen to set up similar initiatives is to persevere, no matter what.

"Keep going, ride the waves and don't let anything get in your way," she says. "Don't give up. It's so worth it."

Justine won the Health Care Support Worker Award at the RCN in Wales Nurse of the Year Awards 2015.

Join the RCN Mental Health Forum at www.rcn.org.uk/forums



The rewards speak for themselves

Ian Hulatt, RCN Professional Lead for Mental Health, says:

"Fresh air and exercise are things we all value and gardening is a particularly gentle and non-threatening way of doing this. Gardening has been used as an activity for people with dementia because it allows them to retain their skills and enjoy being outside. I could certainly see the benefits of generalising it across mental health services, both from a physical and mental health perspective."



Design for life

Susan Embley finds out about one HCA's simple idea to help patients at risk from dehydration and malnutrition in hospital

RCN member Adeline Dalley is used to working closely with patients and their families, after spending 17 years in the care sector. But one patient in particular gave her an idea with the potential to help many hospital staff treating older and vulnerable patients.

“A woman I cared for who had Alzheimer’s was admitted to hospital,” says Adeline. “She was moved around six different wards in one week and even though she could speak, because of her illness she needed assistance with eating and drinking. Her husband noted that on one occasion when he visited she drank six cups of juice because she hadn’t been drinking.

An easier way

“The nurses on each ward were unaware that she needed assistance because she could talk, but she was unable to explain that she needed help. It was through this and other experiences that I decided that there had to be an easier way for all nursing staff to be aware of the risk of dehydration.”

Good nutrition and hydration are essential to health and wellbeing and can help people recover from illness more quickly. Malnutrition and dehydration can lead to serious health problems.

With this in mind, Adeline wanted something that stood out and was easy to spot for nurses and carers to recognise if a patient needed extra help. She decided a brightly coloured wristband that stayed on the patient would be a good idea.

“Once it’s on it’s not easy to take off and is something nurses can see straight



The nurses on each ward were unaware she needed assistance

away, rather than having to look through notes. When I talk to relatives, it’s a big worry for them that their loved ones might not be eating and drinking enough, so I feel that this is something that could potentially save lives.”

After getting her design protected by the Intellectual Property Office, Adeline has been promoting it through local media and has had enquiries from the NHS trust near where she works in Warminster. “I’m hoping this will be of good use to nursing staff to highlight if someone needs extra help as sometimes things don’t always get passed on during shift handovers,” says Adeline.

The “hydrate me” band is clearly identifiable and displays an easy to understand message, “please help, I am unable to eat or drink without your assistance.” The band is waterproof, making it hard to smudge and it’s difficult to remove meaning that patients can travel across multiple wards, if necessary, and staff can identify them as a vulnerable patient. Adeline says it’s ideal for frail and vulnerable people as well as people with Alzheimer’s, Parkinson’s and other life-altering cognitive conditions.



Amanda Cheesley, RCN Professional Lead for Long Term Conditions and End of Life Care, says: “Making sure that people who are ill or frail have sufficient food and drink is of vital importance. The role of HCAs and other nursing staff in making sure people who are not able to eat and drink unaided or who need additional support get help cannot be underestimated.

“Having a mechanism to identify people who need this support is welcome. A wristband can be really useful as it remains with the individual. All staff need to be aware of the people who have one and act on it.”

Adeline is keen to encourage other HCAs who have an idea that will improve patient care. “Anybody can think of an idea, but if someone thinks it has a genuine use, then it’s worth trying to get it noticed as it could make a real difference,” she adds.

The RCN’s online resource for HCAs, *First Steps*, has a section on eating and drinking. Visit www.rcn.org.uk/firststeps

Hydration and nutrition checklist

1. Be aware of patients at risk of malnourishment and ensure actions are monitored.
2. Where possible, patients should help to develop their own personal care plan so they have choice and control over their own nutritional care and fluid needs.
3. All health care professionals should receive regular training to ensure they have the skills to meet the nutritional and fluid requirements of patients.
4. All care providers should have a nutrition and hydration policy centred on the needs of users.
5. Make sure food and drinks are delivered safely.

Building our future

History was made in 2001 when HCAs were admitted to RCN membership. As the College's centenary celebrations continue, we look at some of the key moments for HCA members

Since the RCN was formed in 1916, the organisation has grown and adapted with the times, becoming more inclusive to represent the nursing profession as a whole. Recognising the contribution of HCAs and APs in providing high standards of patient care was part of this evolution.

"HCAs and APs have been vital members of nursing teams for many years," says Tanis Hand, RCN Professional Lead for HCAs and APs. "When members voted for HCAs to join the RCN in 2001 it demonstrated how much support workers are valued, and their role has grown both externally and within the College since then.

"Having HCAs and APs on RCN Council – the RCN's governing body – means that they are integral to every decision made." Today the HP membership category, for HCAs and APs, is the fastest growing of all RCN membership categories.

The bigger picture

Daphne Regan was one of the first HCAs to join the RCN when she became a member on 31 May 2001. "I'm pleased the contribution of HCAs is being celebrated," says Daphne. "When you're not a registered nurse, it is easy to feel isolated, so the support of the RCN has made me feel like I'm part of the bigger picture."

And in this centenary year, the RCN is eager to get more HCAs and APs involved to help strengthen the College over the years to come.



I love the energy the RCN gives its members

There is a range of special centenary activities happening throughout 2016. Visit www.rcn.org.uk/centenary. The RCN is also producing 100 top tips for HCSWs as part of the celebrations (see page 3).



HCA and RCN activist Sagila Thiruthanikasalan (see cover and far right) is no stranger to embracing opportunities to shape the organisation's work. Since joining in 2010 she has become highly involved in the College's activity and is currently a branch officer. "I decided to take on a voluntary role with the RCN as it's provided me so much support and I wanted to pass that on in some way. The RCN's resources for HCAs, especially *First Steps*, have been extremely valuable to me," says Sagila.

"My RCN branch chair encouraged me to participate more within the organisation, and straightaway I loved the energy the RCN gives its members, and the nursing community.

"Before joining the RCN, at times I felt undervalued, not represented, not supported; but the RCN changed this,



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helping me find my voice and become a strong voice for my peers. It is an absolute privilege to be part of the RCN team and work with staff and colleagues."

HCAs and APs have played a vital role in the RCN for more than 15 years, but the College is only as strong as its members. Why not use the RCN's centenary as the opportunity to get more involved, and help build the next 100 years?



It's an absolute privilege to be part of the RCN team

Shaping the present

Why not join the RCN Health Practitioner (HP) Committee? Elections for committee seats open at RCN Congress 2016 (see page 15). Or perhaps you want to make a mark on the future of nursing by becoming an RCN representative. Reps are vital links between the RCN and members, acting as RCN ambassadors in the workplace, assisting members and helping to influence policies. Visit www.rcn.org.uk/become-an-rcn-rep

Key dates

- 2001**
HCAs are admitted into RCN membership.
- 2006**
HCA project group (forerunner to current committee) is set up by HCA project manager.
- 2008**
Supporting Better Care training programme launches in Scotland.
- 2009**
The first HCA adviser is appointed. The role is now known as the RCN Professional Lead for HCAs and APs. In Scotland, HCSW induction standards are launched.
- 2010**
HCA project group becomes HCA committee. In Wales a code of conduct is developed for HCSWs.
- 2011**
First Steps is launched, a free award-winning resource dedicated to supporting HCAs. HCAs voted into full membership as "health practitioners" and a formal RCN Health Practitioner Committee, with representatives from each region and country, is set up. The first health practitioner members of RCN Council are elected.
- 2012**
Accountability and delegation film and resources produced. First issue of dedicated *Health + Care* magazine (then called HCAs and APs) published. RCN Wales introduces the Health Care Support Worker Award as part of its Nurse of the Year Awards in 2012.
- 2013**
Cavendish review published, recommending the introduction of the Certificate of Fundamental Care.
- 2014**
Care Act 2014 – an amendment to the bill, developed by the RCN, introduces standardised education and training for HCAs.
- 2015**
Care Certificate launches in England.
- 2016**
RCN responds to Scottish Social Services Council (SSSC) Codes of Practice Consultation. RCN responds to nursing associate consultation.

Set the record straight

Accurate and clear record keeping is key to good communication and patient safety. Tanis Hand, RCN Professional Lead for HCAs and APs, highlights the key principles

- 1 Records should be completed at the time or as soon as possible after the event.
- 2 All records must be signed, timed and dated if handwritten. If digital, they must be traceable to the person who provided the care that is being documented.
- 3 Make sure you're up date in the use of electronic systems in your place of work, including security, confidentiality and appropriate usage.
- 4 Records must be completed accurately and without any falsification. You need to provide information about the care given as well as arrangements for future and ongoing care.
- 5 Avoid jargon and speculation, as well as unnecessary abbreviations.
- 6 When possible, the person in your care should be involved in the record keeping and should be able to understand what the records say.
- 7 Records should be readable when photocopied or scanned.
- 8 In the rare case of needing to alter a record, the original entry must remain visible (draw a single line through the record) and the new entry must be signed, timed and dated.
- 9 Records must be stored securely and should only be destroyed following your local policy.
- 10 Supervision and countersignature are required until an HCA or AP is deemed wholly competent at the activity of keeping records.



Reporting your findings

Tanis says: "Good record keeping is a vital part of effective communication in nursing and integral to promoting safety and continuity of care for patients and clients. Nursing staff need to be clear about their responsibilities for record keeping in whatever format records are kept. "If you find something you feel is significant when you are working with a patient or client, your first duty is to report it to the registered nurse in charge before writing it in the patient or client's record. Always report first, then record as soon as you can in this situation."

To order the RCN's pocket guide, *Record Keeping: The Facts*, call RCN Direct on 0345 772 6100 and quote publication code 005 343.

'We're here to ensure you get a good deal'

Brenda McDonald, Health Practitioner (HP) Member of Council and Chair of the RCN HP Committee since 2013, explains the committee's important role



What does the HP committee do?

We make sure the voice of HCAs and APs is heard and that issues affecting you are tackled. The committee has representation from across the countries and regions. Every area is different and we bring all that expertise together from across the UK. The committee is here to protect HCAs and APs and ensure you get a good deal.

What are you most proud of?

Seeing the positive change to the positioning of HCAs and APs within the RCN. There is now a clear vision and the professionalism of HCAs and APs is getting the recognition it deserves.

What's on the radar over the next few months?

We'll be continuing to keep track of what is happening out there politically. In particular we will be focusing on the new nursing associate role (see pages 6-7) and the Care Certificate. What happens in one country has a knock-on effect across the UK so we need to stick together. We're stronger when we all work as one.

What will be a highlight for you?

RCN Congress! Every year I look forward to it even more. There's a real buzz about it and so much going on. Also importantly, we launch our elections to fill vacancies on the committee at Congress. If you're an HCA or AP, why not join us at the forefront and help fight for your co-workers and patients? It's a fantastic opportunity, opening up a whole new world.



Contact your representative via governance.support@rcn.org.uk

Council members

Brenda McDonald (Chair)
David Cardwell

Country and regional representatives

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Eastern

Maive Coley

East Midlands

Tracie Culpitt

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South East

Lindsay Cardwell

South West

Philip White

West Midlands

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Dennis Greer

Northern Ireland

Brian Murphy (Vice Chair)

Scotland

Judith Page

Wales

Elections open for committee seats at RCN Congress, 18-22 June 2016

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SECC, GLASGOW, 18-22 JUNE 2016



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“ *Inspiring and energising. Personal and professional growth. Engagement with like-minded individuals. Our nursing team depends on RCN Congress to recharge.*

Tracie Culpitt, RCN Health Practitioner Committee member

RCN Congress...

- is free to attend
- has activities created especially for HCAs and APs
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