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FOR RCN ACTIVE MEMBERS ACROSS THE UK

SPRING 2020



# NURSING IN A PANDEMIC

RCN STEWARD CARMEL SHARES HOW COVID-19 HAS HAD AN IMPACT ON HER PERSONAL AND PROFESSIONAL LIFE

## 2 SPOTLIGHT ON...

# Keeping RCN branches active

We've pulled together some key information for RCN branch executives to consider during the COVID-19 pandemic

### Stay in contact

During these times, RCN branches can be a lifeline to members. Branches may not be able to offer the usual meetings and events but it's important to maintain an RCN presence and offer a link to those who might need information, advice or just a chat. Use the Member Contact Centre (MCC) to keep in contact with members, make use of any available RCN posters and resources, and don't forget to ask your local communications team for help and advice.



### Signpost to RCN advice

Our COVID-19 webpages have the most up-to-date information and guidance about personal, clinical and employment practice in relation to the management of COVID-19.

Check these regularly and signpost members here too:  
[rcn.org.uk/covid-19](https://rcn.org.uk/covid-19)



### Business as usual

RCN branches will still have their RCN duties and responsibilities during this time and it's likely that activity may increase rather than slow down. Keep an eye out for requests for the accreditation of new reps, participation in consultations or updates from your local office. RCN reps may be finding it difficult to respond to a high volume of concerns from members. If members are struggling to contact reps in their workplace, encourage them to contact RCN Direct for advice and guidance.

### Review trade union issues



We've produced materials with advice on the health and safety, employment and learning-related issues that members might be facing. Even if you're not a rep, try to have a look at these materials so you can develop a broader understanding of these issues. See pages 14-19 or log into our online learning portal.

### Explore new technology

With face-to-face meetings and activity postponed, you may want to try new ways to keep in touch, both personally and professionally. Why not try Skype for a virtual meeting or look at how you can use social media?



### More information

To find more information, including links to RCN resources and advice on using social media, log into our online learning portal at [learn.rcn.org.uk](https://learn.rcn.org.uk)

The COVID-19 pandemic presents ever increasing challenges. As nursing adapts to meet the needs of patients, we too have shifted our focus to best support members throughout this crisis.

This issue of *Activate* highlights some of the resources we've created at pace over the past few weeks to help you assert your full influence as RCN reps and active members. It's accurate at the point of going to press on 17 April, but we'd advise checking the RCN website regularly for the latest updates: [rcn.org.uk/covid-19](https://rcn.org.uk/covid-19)

In this COVID-19 special issue, we also share stories from reps who, as well as working tirelessly to care for patients, are doing their best to support members in their workplace. I know that active members across the UK will be doing the same.

I also know that a lot of the things members will be worried about won't be in your power to fix. But what you can do is share these concerns and issues with us. We're gathering as much information as possible from nursing staff so we can strengthen the voice of nursing and fight for things on your behalf, such as better access to the right PPE, testing and support.

Council members are working closely with RCN staff to make sure we're raising the right issues in the right way. Every Council member is in regular contact with their board chair and national and regional directors so that we understand what's

happening on the ground and can feed that information into everything the College is doing. Some of the stories are very difficult to hear and members are always in our thoughts.

I'm incredibly proud of how nursing staff have come together and the strength, professionalism and compassion that has been shown. We know it's in your nature to think of others first but please try to take care of yourselves. We're here to support you.

## Dee Sissons

Chair of RCN Council



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# 4 UPDATE

## New discussion zone for reps

To support reps in their work, we've developed a COVID-19 trade union activity area on our online learning portal.

Here you'll find useful resources and guidance, as well as an online discussion zone so reps can share what's happening in their workplaces and offer peer support to one another. RCN staff are also on-hand to offer advice and to make sure any issues raised are fed into the RCN's wider work on COVID-19.

Use your MyRCN details to log into our online learning portal at [learn.rcn.org.uk](https://learn.rcn.org.uk) or the RCN Reps Hub at [rcn.org.uk/reps-hub](https://rcn.org.uk/reps-hub)

## Sharing member stories

We know that members across the UK are facing unprecedented challenges in their daily working lives. When we're talking to employers, politicians and officials, we need to know what members are experiencing and we've set up an online form so they can tell us.

For more information, and to share your experience, visit [rcn.org.uk/covid-19/share-your-experience](https://rcn.org.uk/covid-19/share-your-experience)

## Expanding the nursing workforce



The government recently announced new measures to expand the nursing workforce during the current health emergency. Nurses and midwives who have left the NMC register within the last five years have been invited to join the NMC's COVID-19 temporary register.

Overseas nurses and midwives who have completed all parts of their NMC registration process except the final clinical examination have been invited to join too and the government is encouraging registered nurses who are not currently working in clinical practice to return to frontline nursing.

Nursing students are also being given the option to

work in clinical practice, with different arrangements in place depending on which year of study they're in. For the latest information about measures to expand the nursing workforce, visit our website at [rcn.org.uk/covid-19/expanding-workforce](https://rcn.org.uk/covid-19/expanding-workforce)

You can find the answers to frequently asked questions and the latest advice for students in our COVID-19 advice guide at [rcn.org.uk/covid-19-advice](https://rcn.org.uk/covid-19-advice)

If you're an RCN student ambassador or supporting nursing students, you can also signpost student members to our Facebook page for support and updates [facebook.com/groups/RCNStudents](https://facebook.com/groups/RCNStudents)

## NHS pay 2020/21

For information about NHS pay for 2020/21 visit [rcn.org.uk/employment-and-pay](https://rcn.org.uk/employment-and-pay)

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## Dame Donna tells health committee PPE and testing rollout has been unacceptable

As *Activate* went to press, Dame Donna Kinnair was due to present evidence to the Health and Social Care Select Committee's Management of the Coronavirus Outbreak Inquiry on 17 April.

Speaking on behalf of nursing staff across the UK, the RCN's Chief Executive & General Secretary was due to focus on two key issues while addressing the committee which scrutinises the government's work.

- **Personal protective equipment (PPE)** – the lack of access to adequate supplies of PPE must not continue. It is shocking that nursing, midwifery and social care staff are continually being faced with PPE that does not meet the required safety and efficacy standards
- **COVID-19 testing** – testing for all health and care professionals cannot wait. This is vital for their safety and the safety of their patients and families.

We've also submitted written evidence highlighting these concerns and the damaging impact a lack of PPE and testing is having on the ability of nursing staff to provide safe and effective care.

Dame Donna said: "Our members should not have to choose between their sense of duty, their personal safety, and the safety of their families."



Thousands of members have responded to a recent RCN survey on PPE. The results, which were being analysed as *Activate* went to press, will help us to build a real picture from across the whole of the UK.

Find out more at [rcn.org.uk/news-and-events/news](https://rcn.org.uk/news-and-events/news)

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## RCN email accounts for reps

RCN email accounts are now available for safety reps and learning reps. These accounts can be accessed from a mobile phone and allow reps to keep in contact with members in a secure and flexible way. Stewards will be upgraded to these

accounts later this year. If you've completed your safety rep or learning rep training, you can request an RCN email account by emailing [mrs@rcn.org.uk](mailto:mrs@rcn.org.uk). You will need to include your name, membership number and contact details.

## 6 NURSING IN A PANDEMIC

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# My new normal: diary of an orthopaedic nurse

Since the COVID-19 pandemic took hold, RCN steward and staff nurse Carmel has been recording an audio diary of how it's had an impact on her personal and professional life. Here are some highlights



### **24 March**

I've had a really tough day today. I had an elderly patient come in with a broken hip and symptoms of COVID-19. She was in a lot of pain, was hard of hearing and her eyesight was poor. She must have been really frightened seeing me in a gown and mask coming towards her. Visiting hours are restricted so she was all alone and I really

felt for her. I just wanted to squeeze her and tell her it was all going to be OK. But the truth is, I'm not so sure.

### **25 March**

Over the past few days I've had about 250 messages from RCN members frightened about coming into work, frightened about what's happening with their families,

and scared of what will happen if they go off sick. So, I put a little shout out on social media just to say thank you to everybody for being amazing. Maybe it's my job to try and bring a bit of positivity right now.

### **26 March**

I've just been outside, and the whole street has

“

We're pulling together and trying our very best for our patients

READ  
MORE  
ONLINE  
[rcn.org.uk/  
activate](https://rcn.org.uk/activate)

⊙ Carmel is a staff nurse on a trauma and orthopaedic ward in Liverpool. She's also an RCN steward and chair of her RCN branch. To listen to Carmel's full audio diary and hear her latest entries, visit [rcn.org.uk/activate](https://rcn.org.uk/activate)

Picture by  
Ian Southerin

been clapping. I'm massively overwhelmed and really grateful that people are recognising what's happening in the NHS and across the care sector. I hope everybody in my branch and within my team has seen this because I think people need a massive uplift at the minute.

### 30 March

Yesterday I made the decision to move out of the house I share with my mum, dad, sister and son. I've spent the morning unpacking at my other sister's house, who is also a nurse. So, we'll be living together for the foreseeable future. I've left my family behind so they can be safe and away from infection. And I am utterly, utterly heartbroken.

### 31 March

So, I'm just back from work after a long day and I'm tired. Not necessarily because of the workload – we're actually really calm as we're clearing beds out now, making space for people with COVID-19 to come in. But our staff team has evolved as people have been moved to where they're needed most.

It's made me realise that this is gonna hit. We're gonna be really, really busy with lots of poorly people and there's nothing that we can do to stop it. We're just waiting. And it's really weird. It's a bit frightening really.

### Carmel's top tip (3 April)

So, I am menopausal, and that means that when I'm at work, I am roasting. So, I wear my hair up in "space buns". And I kind of got laughed at, you know, called Princess Leia and all that. Well no-one's laughing now, because I can hook my face mask round my space buns, and it doesn't ruin my ears. So now everyone's coming in, in space buns. And the last laugh is on me.

### 2 April

It was a strange day at work today – lots of staff off sick, and people having symptoms. There were also different rules for PPE. An email came around saying we all had to wear masks all the time and to change them every three hours.

It's meant having to re-learn how I communicate with patients. With some of my mature patients who have difficulty hearing, they rely on looking at your mouth to interpret what you're saying.

I'm quite an expressive person and all those things that you say, you have to try and get across to somebody with your eyes. I'm trying not to be terrifying as I come towards people looking like something out of ET.

But we're all just doing our best. We're pulling together and trying our very best for our patients, which is all we ever wanted to do when we signed up for this anyway.

### 6 April

I've woken up to the news this morning that a nurse in Liverpool has died. One of our nursing family has gone. My heart breaks for her family and her friends and her colleagues. It's so sad, so awful. God bless her.

## 8 NURSING IN A PANDEMIC

# Back in uniform

RCN Steward Greg Usrey reflects on his first day in a clinical role in 20 years after volunteering for redeployment to a new COVID-19 assessment centre in Glasgow

The night before my induction, I was slightly apprehensive. I was worried that I might be too 'rusty' and didn't know what to expect. However, my nerves dissipated after my first day and I felt much more confident.

In the morning, we had an induction to the clinical pathway and IT systems. I then spent the afternoon shadowing a nurse who had been working at the centre for a couple of weeks.

These appointment-only centres have been set-up so patients with worsening COVID-19 symptoms can be seen in the community helping to make sure that hospital capacity is used for those with the most serious symptoms.

Most of the patients we saw were in a slightly worse state than they had been a week or so before. Some of them needed hospital care and some were sent home to continue self-isolating with the advice to call NHS 111 again if their condition worsened. Nursing staff and doctors were also able to



Picture by Greg Macvean

provide those who needed it with medication.

I was really impressed by how organised everything was and the camaraderie was great. When you see how scared and anxious the patients are, there is a real sense of satisfaction in being able to help. The centre feels like a safe environment for nursing staff with good systems in place and the right personal protective equipment available. But I know that's not the case in some places.

I feel strongly that returning to practice or joining the temporary register is a

personal decision. I'm healthy and I've got the skills to help. But everyone's circumstances are different. I also feel that my role as a rep is really valuable to members right now. I still have seven and a half hours' worth of facility time each week to carry out my steward's work.

With face-to-face meetings and non-urgent cases suspended, most of my work is supporting members with concerns about inappropriate risk assessments and redeployment. It's nice to hear my support is helping at this difficult time.



# ‘This must be resolved’

We’re demanding that nursing staff in care homes and the wider social care sector across the UK are not forgotten and get the personal protective equipment (PPE) they need

Although the UK government has been clear that millions more PPE items are being made available and that the national supply is well stocked, members in care homes across each of the four countries of the UK are not seeing these commitments reflected in their workplaces.

Writing to the Minister for Care Helen Whately, RCN Chief Executive & General Secretary Dame Donna Kinnair said: “Members working in care homes and other social care settings are reporting that they do not have sufficient or clinically adequate supplies of PPE or antigen testing.

“This means that they are risking their own lives and the lives of their families, as well as the lives of people in their care. This is unacceptable and must be resolved immediately. Members are on the frontline – they visit patients in their own homes, care homes, hospices and other social care settings, supporting them with what are often complex conditions in close proximity.”

Dame Donna added: “It is paramount that employers and commissioners support nursing staff to maintain best practice.” Read the full letter at: [tinyurl.com/rcn-letters](https://tinyurl.com/rcn-letters)

## What members are saying...

Staff are understandably anxious for themselves, their families and residents and it is important that I give them the correct guidance, direction and resources. This has been difficult as I struggled to get absolute clarity on several issues, including what PPE to wear and when. In addition to clarity it is essential that we always have adequate stocks of PPE and this is an area that requires close monitoring.

**Connie Mitchell, RCN Northern Ireland independent sector nurse managers network lead**

There is so much information flying around – but it’s not always the information staff need. In my role as a learning rep, I’ve been able to signpost staff in our care home to credible,

trustworthy advice and guidance. I’ve also been working closely with managers here

to ensure company policies are shared and understood. Maintaining a positive attitude is vital. Residents can see our body language so to maintain trust we need to remain calm and have access to trustworthy information.

**Edilmar Espinosa, RCN learning rep**

*We’re developing a UK independent health and social care strategy to ensure a planned approach to meeting the needs of members across the health and social care workforce. If you wish to be involved contact [luci.pollard@ren.org.uk](mailto:luci.pollard@ren.org.uk)*





Royal College  
of Nursing

2020 | International Year  
of the Nurse and Midwife

PULL OUT  
AND DISPLAY  
THIS POSTER IN  
YOUR WORKPLACE

# Self-care during COVID-19



**Whilst the primary duty for protecting your health, safety and wellbeing at work lies with your employer, there are things that you can do to take extra care during these challenging times.**

- ▶ Use strategies that have worked for you in the past to manage stress rather than learning new ones.
- ▶ It is normal to feel sad, stressed or overwhelmed during a crisis. These feelings are no reflection on your ability to do your job.
- ▶ Seek information updates, from trusted sources, at certain times of the day rather than a constant stream: [rcn.org.uk/covid-19](https://rcn.org.uk/covid-19) and [gov.uk](https://gov.uk)
- ▶ Your stress levels and psychosocial wellbeing are as important as your physical health: [rcn.org.uk/healthy-you](https://rcn.org.uk/healthy-you)
- ▶ Talk to people you trust or contact a counsellor: [rcn.org.uk/mss](https://rcn.org.uk/mss)
- ▶ Maintain a healthy lifestyle: keep hydrated, eat and sleep well, exercise and enjoy social contact with family and friends (even if it's virtual).
- ▶ Take your breaks whenever you can and don't feel guilty about taking your days off.
- ▶ If you don't feel safe to drive after a long shift, take a rest. Look at a buddy system to share driving or speak to your employer.
- ▶ Sadly, some of you may experience negative behaviour as well as workplace issues such as equipment shortages. If you have any concerns, talk to your supervisor/colleagues/RCN rep for advice and support. RCN support is available at: [rcn.org.uk/get-help](https://rcn.org.uk/get-help)

**This is an unprecedented situation:  
it's OK not to be OK.**

**Look after yourself and ensure you seek advice and support.**

## 12 PPE GUIDANCE

# Escalating concerns about inadequate PPE

We've published new guidance to help members raise concerns about their safety. Here are the steps they should follow and advice on how reps can offer support

Under the HSE's control of substances hazardous to health (COSHH) regulations 2002, employers must assess the risk of exposure to biological hazards at work. This includes coronavirus.

Employers must also follow UK infection prevention and control guidance and provide suitable and sufficient personal protective equipment (PPE).

The UK guidance outlines what type of equipment is needed for different environments and scenarios.

Before raising concerns about PPE, members should check the guidance at [tinyurl.com/UK-PPE-guidance](https://www.tinyurl.com/UK-PPE-guidance)

### When should members escalate concerns?

- If they don't have access to the right equipment.
- If they have access to the right equipment but have had no training and information on its use.

- If they have access to and are required to wear a specialist filtering face piece respirator (FFP3 or 2) face mask but have not had a fit test.
- If they have access to the right equipment but are concerned about its quality, they may need to escalate concerns but should consult our guidance first for more information.

### How should members escalate concerns?

- Raise concerns with a line manager or supervisor in writing. Where possible, also tell a local safety rep.
- Document the concerns using the organisation's reporting mechanisms, such as Datix and IR 1 forms, and take photos of any equipment that is of poor quality.
- If there is a helpline or dedicated staff available within the organisation, such as PPE safety officers, contact them for further advice on PPE.

- Managers should respond to concerns in a timely manner. Ideally, before nursing staff are put in a situation where they may be at risk. If concerns for safety aren't resolved, then the incident report should be escalated, in accordance with the local policy, to the board director responsible for health and safety.

### What support can RCN reps offer?

Remind members they should never be discouraged from reporting a legitimate concern and shouldn't be bullied or harassed for doing so.

When escalating concerns about PPE, members should be encouraged to report concerns themselves through their organisation's reporting mechanisms but reps can offer support.

If appropriate, safety reps should also check whether their employer has reported PPE

issues through RIDDOR. You can find guidance on incident reporting and RIDDOR on the RCN Reps Hub.

In some cases, safety reps may be able to help escalate issues quickly with local leads, including health and safety, infection prevention

and control and occupational health. RCN reps should also find out who is leading on PPE in their area or organisation.

Where possible, reps should try to work as a team to support members and raise concerns. Reps can also seek advice from their RCN officer.

### Read the full guidance

Download our full guidance *PPE: Are you Safe?* (code: 009 232) and *Refusal to Treat* (code: 009 231) at [rcn.org.uk/publications](https://rcn.org.uk/publications) You can also read advice on PPE from the NMC at [tinyurl.com/NMC-PPE-statement](https://tinyurl.com/NMC-PPE-statement)

## Can members refuse to treat patients?

If members raise concerns and adequate PPE is still not supplied, there will be difficult decisions to be made on whether to continue to provide care and it's likely that members will want to speak to RCN reps for support and advice. We've published guidance that takes members through a decision-making process. It will also help reps talk through these difficult judgement calls with members.

### Key things to consider

- Has the member read through the RCN's guidance and used the escalation steps to press for appropriate PPE?
- If the answer is yes and appropriate PPE hasn't been provided, members must consider their own safety. Under the NMC Code, the safety of nursing staff remains a key consideration alongside patient and public safety. The NMC requires registered nurses to be accountable for the safety of themselves, their patients and the public and this must empower them to speak up and promote the safest way forward. All staff, registered or not, also have employment law protections that allow them to consider their own safety.
- When members are considering the weight to be placed on their own safety, they're not simply taking their personal wellbeing into account. If they become unwell, they

might spread infection and will not be available to provide care to others. They may also put their own family at risk, including more vulnerable relatives.

- Members must take part in identifying changes to the way they work that will reduce the risk. Can treatment be delayed or provided differently? Can staff with greater vulnerability be placed into roles that carry lower risk?
- Ultimately, if members have exhausted all other measures to reduce the risk and have not been given appropriate PPE in line with the UK infection prevention and control guidance, they are entitled to refuse to work.

The RCN recognises what a difficult step this would be for nursing staff and that any refusal to treat would be a last resort. It's important to remind members that they must be able to justify their decision as reasonable and should keep a written record of the safety concerns that led them to this decision, using their organisation's incident reporting mechanisms where possible.

Our guidance also outlines the potential legal consequences if members take a decision to refuse treatment that is later criticised. It also reminds members that the RCN will provide legal representation and other support in any proceedings that ensue, without judgement.



## The right support

During the COVID-19 pandemic, learning reps can play a key role in checking employers have the appropriate measures in place and that staff are getting the support they need

**Ensure you're consulted on learning and development issues, plans and preparedness**

Your employer should be carrying out risk assessments and putting measures in place to minimise the risk of exposure by following current public health guidelines on the provision and use of personal protective equipment (PPE), as well as supplies of alcohol hand gel where appropriate.

Staff should be given information and training on the risks of exposure and how to minimise their risk. If staff are required to use PPE, they should be given training on how to properly use this.

**Stay up to date on the latest advice and refer to public health guidelines**

Local risk assessments and safety procedures should be informed by the latest public health guidance. This will be ever-changing and regularly revised as new evidence becomes available.

For the most up-to-date information, make sure you regularly check the RCN's COVID-19 webpages at [rcn.org.uk/covid-19](https://rcn.org.uk/covid-19) and the UK government website at [gov.uk/coronavirus](https://gov.uk/coronavirus)

If your organisation isn't following the national guidelines, then escalate your concerns with appropriate managers and let your RCN officer know.

**Make sure staff have the necessary safety training**

Nursing staff may be asked to go into new areas to work or be asked to wear PPE they are unfamiliar with. Ensure your employer has carried out a risk assessment on moving staff and is providing safety training and information to staff who are going into new areas, including on the use of equipment and other health and safety issues.

You should find out what plans your employer has in place to safely redeploy staff and prepare them for working in different areas and roles. This should

include assessment of staff, identifying who can work where, as well as shadowing and simulation arrangements for developing skills.

Your employer is responsible for ensuring staff have the necessary skills and knowledge and should take staff limitations into consideration.

This applies for all health and social care staff, including students.

Although it may not be possible for staff to have as full a preparation period or an induction as they would normally, your employer needs to make sure staff have:

- a health and safety induction
- access to relevant policies, procedures and guidelines
- an induction into the clinical area and the equipment
- an induction on the IT systems, incident reporting and record keeping, as well as other support telephone systems and alarms.

### Support staff to consider their own preparedness for practice

You can support staff who are being redeployed or who are re-entering the workplace by helping them to identify their own learning needs for working in a new or different environment and you can work with your employer to ensure that appropriate training and support is being provided.

Where a member is concerned that, despite additional training, they do not feel adequately equipped to safely practice in a proposed new area, you may need to work with other reps to support negotiations about where the member could be suitably redeployed.

### Act on concerns raised about members' learning and development

Members may come to you with concerns about cancelled study leave and/or suspended mandatory and statutory training. Employers are within their rights to cancel agreed study leave due to staffing challenges and this is very likely to happen during this time.

The priority for training provision is likely to be focused on freeing up capacity to provide key statutory and mandatory training to staff

who have not yet received their training or who need it to support redeployment.

Mandatory and statutory training are an essential component of maintaining safe and effective care and keeping staff safe. You should encourage staff and management not to stop mandatory training where it has a direct link to safe working practices likely to be required for nursing COVID-19 patients. Any NHS employees who have had mandatory or statutory training cancelled due to staffing pressures related to COVID-19 shouldn't be prevented from moving onto their next increment due to non-completion.

### Nursing workforce expansion

The government has put in place new measures to expand the nursing workforce during the COVID-19 pandemic. Make sure you monitor any developments and check that your employer has plans in place for suitably deploying and supporting staff on the temporary register and students. For the latest advice, read our full guidance on the RCN Reps Hub and visit our COVID-19 webpages [rcn.org.uk/covid-19](https://www.rcn.org.uk/covid-19)

You may need to work with other trade union colleagues

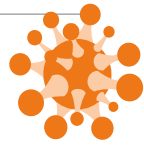
to support nursing students and nurses returning to practice, and to ensure that roles are appropriate, that they are safe and adequately remunerated. If you have concerns about the roles and responsibilities of students and trainees, speak to your RCN officer for further advice.

### Support staff reflection and wellbeing

Think about organising opportunities for members in your workplace to connect with and support one another, sharing reflections and learning about their experiences. If possible, this should be through your organisation's intranet or other virtual platforms.

### Remember, you're not alone

Members may come to you with issues that need to be referred to or discussed with stewards and safety reps. Try to work together and with other staff side reps. RCN regional and national staff are here to support you too. Make sure you have regular mentorship and supervision calls set up and contact your local RCN office when you need support. Don't forget your employer has ultimate responsibility for the learning and development of staff.



## Keeping members safe

Although your employer is responsible for the health and safety of staff, safety reps can play a key role in supporting this during the COVID-19 pandemic

### Ensure you're consulted on health and safety issues, plans and preparedness

Under health and safety law, accredited safety reps have the right to be consulted on plans and matters that may affect the health and safety of the members they represent. Consultation should be timely and allow you enough opportunity to respond and raise concerns on behalf of members. Your employer should have mechanisms in place for consulting you on COVID-19. For example, by inviting you to join emergency planning groups or through regular meetings with health and safety leads.

### Stay up to date on the latest advice and refer to public health guidelines

Local risk assessments and safety procedures should be informed by the latest public health guidance on infection control which will advise on what type of personal protective equipment (PPE) to use, where and when to use it, and cleaning protocols.

For the most up-to-date information, make sure you regularly check the RCN's COVID-19 webpages at [rcn.org.uk/covid-19](https://rcn.org.uk/covid-19) and the UK government website at [tinyurl.com/UK-PPE-guidance](https://tinyurl.com/UK-PPE-guidance)

If your organisation isn't following the national guidelines, then escalate your concerns with appropriate managers and let your RCN officer know.

### Act on concerns raised about members' health and safety

Members may come to you with safety concerns. Some of the issues may already be answered on our website. Signpost members to the RCN's COVID-19 webpages at [rcn.org.uk/covid-19-advice](https://rcn.org.uk/covid-19-advice)

If there is evidence that your organisation isn't following national safety or infection prevention and control protocols then escalate this, as per your organisational policy. You should also work with other reps to raise issues through the appropriate safety committee, local staff side

meetings, joint negotiating committee or partnership forum. If it's not possible to resolve the issue locally, speak to your RCN officer for further advice and support.

For information on escalating issues around PPE, see our advice on page 12.

### Fatigue

In many cases members will already be working long hours under extreme pressure so fatigue is a really important issue. Fatigue can lead to reduced cognitive function which in turn can lead to errors. It can also increase the risk of burnout. Issues to consider include the availability of rest areas and places for a power nap. If offices are left unoccupied due to admin staff working from home, suggest these are used as rest areas.

It's also important to consider the safety of nursing staff driving home after a shift. Ask your employer about plans to tackle this and follow NHS Staff Council guidance which is available at



### [tinyurl.com/fatigue-shifts](https://tinyurl.com/fatigue-shifts)

You can also use the RCN's Rest, Rehydrate, Refuel resources. Visit [rcn.org.uk/rest-rehydrate-refuel](https://rcn.org.uk/rest-rehydrate-refuel)

#### Dehydration and access to food

Wearing PPE for long periods can be hot and uncomfortable so it's important that nursing staff have access to drinking water. Like fatigue, dehydration can lead to reduced cognitive function and potential errors. Speak to infection control and occupational health staff about the availability of drinking water, especially for those staff who are wearing PPE. It's also essential that nursing staff have easy access to nutritional food on a shift, including on night shifts.

#### Violence and harassment

During other pandemics, we have seen cases of violence and harassment towards nursing staff increase. Ask whether your organisation has reviewed risk assessments on violence and find out what steps are being taken to mitigate the risks and to keep staff secure, including staff working in the community.

Read our guidance on personal safety at [rcn.org.uk/publications](https://rcn.org.uk/publications) (code: 005716)

#### Impact on mental health

This is a very anxious time for everyone but especially nursing staff who may be caring for patients and, at the same time, have concerns about their own family and friends.

Ask if your organisation has accounted for the potential extra demand for counselling and employee assistance programmes, and what plans are in place to support staff who may be traumatised.

Signpost members to sources of support, including our Healthy you pages at [rcn.org.uk/healthy-you](https://rcn.org.uk/healthy-you) and our online

advice about COVID-19 and mental wellbeing [rcn.org.uk/covid-19-mental-wellbeing](https://rcn.org.uk/covid-19-mental-wellbeing)

#### Remember you're not alone

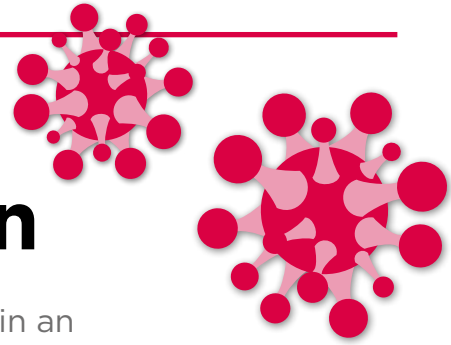
Some of the issues and concerns members come to you with may need to be referred to or discussed with stewards and learning reps. Where possible, try to work as a team of reps and with other staff side reps. RCN regional and national staff are here to support you too. Make sure you have regular mentorship and supervision calls set up and contact your RCN officer when you need support.

#### Checklist of other issues for safety reps to consider

- Make sure you know how to escalate issues such as a lack of PPE.
- Check your employer has systems in place for identifying and supporting members who are pregnant or more vulnerable to the risk of infection or effects of COVID-19. Find more information about this in our full guidance on the RCN Reps Hub.
- Check your employer has identified and acted upon any risks associated with members who are being redeployed to areas where they will be nursing patients with COVID-19 and that staff have had the necessary safety training. Read our guidance on redeployment at [rcn.org.uk/redeployment](https://rcn.org.uk/redeployment)
- Share the RCN's handwashing and skin health resources and encourage members to use hand moisturising cream. Download our handwashing poster at [rcn.org.uk/publications](https://rcn.org.uk/publications) (code: 009 177) and find links to our skin health resources in our full guidance on the RCN Reps Hub.

# 18 STEWARDS GUIDANCE

## COVID-19 seven-point plan



RCN stewards can play an important role in an organisation's response to the current health emergency, so we've developed a seven-point plan to help you support members

### 1 Make sure you're up to date on current information and guidance

It's important to remember that it's your employer's responsibility to comply fully with health and safety standards, contractual and statutory employment rights and equality requirements. When advising members and working in partnership with employers during the pandemic, you should:

- check members' contracts of employment and any local policies or briefings
- check national guidance prepared by UK governments. This provides information on pay and conditions during the emergency. For the latest information on national guidance, go to the employment guidance for NHS staff link at [rcn.org.uk/covid-19](https://rcn.org.uk/covid-19)
- speak to your local HR department
- check the RCN's COVID-19 webpages (above).

### 2 Work in partnership with employers

Where possible, stewards should engage with employers on contingency and emergency planning to assist service reconfiguration during the pandemic. You can play an important role in sense-checking proposals and identifying potential unintended consequences. It's crucial that employers continue partnership working with local staff sides throughout this period to ensure that where policies and practices are changed, there is sufficient opportunity for scrutiny and consultation.

### 3 Protect members' employment conditions

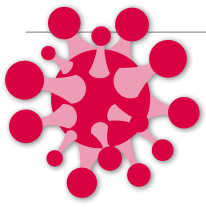
In times like this, RCN stewards play an essential role in advocating for members' needs and protecting their rights. Members may alert you to issues that they don't feel able to raise themselves, or they may approach you to check out what they're being told or asked to do. Partnership forums and negotiating committees should continue to monitor the impact of policies and practices on staff groups including, but not limited to, monitoring against protected characteristics.

#### Key things to watch out for include:

- members being asked to work excessive hours
- staff not being able to take their rest breaks or not having access to food
- other health and safety issues (see our guidance for safety reps on page 16 for more information)
- managers seeking to cancel annual leave without proper consultation with staff side reps.

#### Check whether arrangements are in place to:

- record additional hours worked and payment of overtime
- authorise requests for special leave and carers' leave at short notice
- carry over unused annual leave to the next leave year.



## Respond to proposed changes to local practices and policies

4

Employers may seek to review local policies and practices during the pandemic. Try to ensure any changes comply with the RCN's guidance. If you work in the NHS, check the national NHS guidance in your country and the National Terms and Conditions of Service Handbook.

If you're concerned that employers are attempting to introduce changes that don't comply, you should raise these concerns with your employer and also contact your RCN officer or senior officer.

You should also ask employers to carry out equality impact assessments to accompany any changes.

For information on the RCN's position relating to temporary redeployment and the employment of staff returning from retirement and student nurses, visit [rcn.org.uk/covid-19](https://www.rcn.org.uk/covid-19)

## Promote a common-sense approach to case work and employment relations issues locally

5

During the pandemic, you should encourage employers to:

- postpone appraisals and non-essential training
- take a pragmatic approach to handling HR issues, and where practical, temporarily pause this. These include sickness reviews, grievance hearings and disciplinary investigations
- only continue with cases where a delay could cause significant risk to patient or staff safety.

Employers should follow national guidance about social distancing and self-isolation, especially for those in high risk groups and those who are pregnant.

If you're supporting members and dealing with essential casework, you should consider alternative ways of meeting.

For example, carrying out meetings by phone wherever possible and avoiding face-to-face meetings. Meetings with HR staff and managers should also be carried out virtually, except in exceptional circumstances.

## Protect facility time

6

Government guidance from across the UK recognises that during the pandemic, trade union reps may require additional facility time and facilities to fully participate in local partnership processes. We believe employers should ensure stewards are allowed the time and facilities needed to carry out their duties and to be fully involved in local staff side arrangements.

Any requests to reduce facility time should be dealt with in a reasonable and balanced way bearing in mind that stewards who are also registrants have responsibilities under the NMC code. You can read our advice on redeployment at [rcn.org.uk/redeployment](https://www.rcn.org.uk/redeployment)

## Remember you're not alone

7

Some of the concerns that members come to you with may be issues you need to discuss with, or refer to, safety reps and learning reps. Where possible, try to work as a team of reps. Communicate with each other and work with staff side reps from other trade unions. RCN staff are here to support you. Speak to your RCN officer or senior officer about how mentorship and supervision can be delivered during this time.

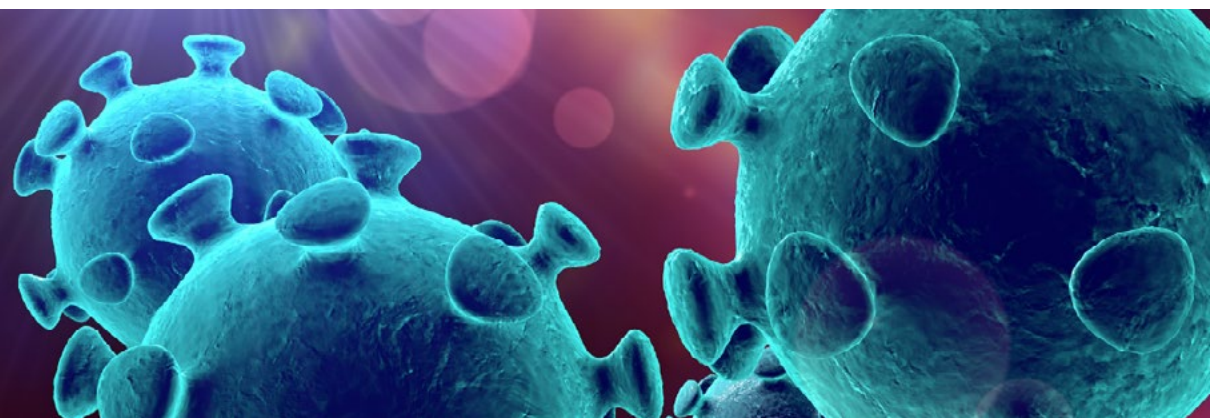
**Return address**  
RCN Direct, Copse Walk  
Cardiff Gate Business Park  
Cardiff, CF23 8X

# Your questions answered

**Have you got a question about COVID-19 and how it affects you or the members you support?**

For the latest updates and advice, see our online advice guide. It includes frequently asked questions with answers compiled by RCN advisers in public health, infection control and employment relations.

**Visit [rcn.org.uk/covid-19-advice](https://rcn.org.uk/covid-19-advice)**



## Always here for you

Staff at RCN Direct are here to provide you with the help you need at this crucial time. We're continually updating our online advice guide in response to your queries and concerns.

If you can't find what you are looking for, the best way to contact us is online at [rcn.org.uk/get-help](https://rcn.org.uk/get-help)