

CONGRESS

Royal College
of Nursing

RCN
CONGRESS
AND EXHIBITION 2011



Council's report to members



Foreword



**Foreword by
Kathleen McCourt**

While our annual Congress is less than a week long, the work that arises continues all year and sometimes, beyond. This report, one of the most important documents that the RCN produces each year, summarises how the issues you debated at Congress last year have progressed.

Our report will provide you with all the information you need on last year's agenda items and the work that arose. However, if you have further questions for the Council members tasked with taking the work forward, you can ask them at a session in the main auditorium on Tuesday 15 May at 9am.

Not all the work that the RCN is undertaking began in Liverpool last year; there are a number of areas where progress is being made on issues debated at previous Congresses. We highlight some of this work in this report for your further update.

In the main, the reports relate to the resolutions debated at Congress in 2011, and emphasis has been placed on these, not the matters for discussion. By their very nature, matters for discussion encourage debate but do not mandate Council to undertake any subsequent action. However, there are several that link into ongoing work and you can find information on these in this report.

The formal results of the items debated last year have also been included for your information.

Put simply, this report should give you, an RCN member, the chance to see what your organisation has done in the last twelve months on the issues that you decided were important. There is more information available on the RCN website and these reports are updated constantly, so make sure to check online for the very latest.

I hope you find it both useful and interesting.

Thank you.

Kathleen McCourt

The forty-fourth meeting of RCN Congress was held on 10 to 14 April 2011 at the Arena and Convention Centre Liverpool.

Present: Rod Thomson (Chair), Stuart McKenzie (Vice Chair), the Agenda Committee, Council and representatives of the RCN branches, RCN forums, the RCN Students, UK Stewards, Safety and Learning Representatives' Committees

1. Welcome and introduction from the Chair

The Chair welcomed delegates to Congress.

2. Reports of the Agenda Committee

Congress received reports from the Agenda Committee meetings held since the last Congress. During the course of the meeting, verbal reports of the Agenda Committee were received. The emergency resolutions recommended to, and agreed by, the meeting for incorporation into the agenda are included in this report.

3. Report of 2010 Congress

Congress formally received and adopted the report of the meeting held on 25 to 29 April 2010.

4. Resolutions and matters for discussion

Resolutions and matters for discussion are listed in numerical order, as are the emergency items (E).

1. Pay cuts

That this meeting of RCN Congress is opposed to the pay cuts that are being imposed on the NHS workforce without consultation or due diligence to the current 'equal pay for equal value' pay system.

For	416	96.30 %	Passed
Against	16	3.70 %	
Abstain	4		

2. Medicines waste

That RCN Congress asks Council to investigate and promote ways to reduce the cost of prescribed medication and unnecessary wastage.

For	445	99.78 %	Passed
Against	16	0.22 %	
Abstain	1		

3. Partnership and austerity

That RCN Congress considers the advantages and shortcomings of working in partnership with employers and governments during this period of financial austerity.

Matter for discussion

4. Transparency in service redesign

That RCN Congress calls on Council to lobby the Department of Health (DH) and the devolved administrations to mandate NHS service providers to publish all Risk Assessments and Patient Quality Impact Assessments in advance of any service redesign.

For	396	93.84 %	Passed
Against	26	6.16 %	
Abstain	37		

5. Proposed welfare reforms

That this meeting of RCN Congress discusses the potential impact of health and wellbeing resulting from the Government's proposed welfare reforms.

Matter for discussion

6. Outcomes not income

That this meeting of RCN Congress calls on Council to lobby for services to be provided on the basis of outcome rather than income.

For	374	97.40 %	Passed
Against	10	2.60 %	
Abstain	10		

7. Re-emergent diseases

That this meeting of RCN Congress discusses the re-emergence of diseases, such as tuberculosis, and the contribution nursing can make to reducing them.

Matter for discussion

8. Safe staffing levels

That RCN Congress urges Council to campaign for legally enforceable staffing levels to safeguard standards in the current economic climate.

For	372	80.17 %	Passed
Against	92	19.83 %	
Abstain	26		

9. Social networking and nurses

That RCN Congress discusses whether social networking sites are good for nursing.

Matter for discussion

10. Blood donation

That this meeting of RCN Congress urges Council to lobby to remove the exclusion on gay and bisexual men donating blood.

For	383	86.65 %	Passed
Against	92	13.35 %	
Abstain	31		

11. Quality placements

That RCN Congress urges Council to lobby for all students to be given appropriate quality placements leading to a minimum of a one year position with preceptorship upon registration

For	431	92.89 %	Passed
Against	33	7.11 %	
Abstain	25		

12. Assessment of staff

That RCN Congress discusses the introduction of an annual physical and psychological assessment for all staff.

Matter for discussion

13. Equity and excellence and patient care

That this meeting of RCN Congress does not believe that changes to commissioning arrangements outlined in the NHS white paper 'Equity and excellence: liberating the NHS' will best serve patients, health care, or the NHS in England.

For	434	98.19 %	Passed
Against	8	1.81 %	
Abstain	7		

14. Working across all clinical specialities

That RCN Congress calls on UK governments to require nurses to work across all clinical specialities.

For	52	11.45 %	Failed to pass
Against	402	88.55 %	
Abstain	19		

15. Access to care

That this meeting of RCN Congress considers how to achieve equitable access to health care services for older people who live in care homes.

Matter for discussion

16. Skills Passport

That this meeting of RCN Congress asks Council to lobby for the Skills Passport for Health to be implemented across the NHS and other sectors where nurses are employed.

For	372	84.58 %	Passed
Against	68	15.42 %	
Abstain	22		

17. Return to SENs?

That this meeting of RCN Congress discusses whether the introduction of the support worker/assistant practitioner is a return to the state enrolled nurse.

Matter for discussion

18. Nursing workforce

That this meeting of RCN Congress urges Council to lobby all UK governments to ensure nurses play a key role in workforce planning, education commissioning and the design of the future nursing workforce.

For	418	96.54 %	Passed
Against	15	3.46 %	
Abstain	20		

19. Community and mental health nursing

That RCN Congress discusses the changing role of community mental health nurses across the UK.

Matter for discussion

20. Public spending and vulnerable adults

That this meeting of RCN Congress urges Council to monitor the disproportionate effects that reductions in public spending may have on those adults who are most vulnerable to abuse and neglect.

For	433	99.31 %	Passed
Against	3	0.69 %	
Abstain	3		

21. Qualifications and experience

That this meeting of RCN Congress asks Council to investigate how appropriate nursing experience can be recognised and accredited.

For	408	95.10 %	Passed
Against	21	4.90 %	
Abstain	4		

22. Cuts and patient/staff safety

That RCN Congress calls on Council to lobby to minimise the impact of cuts on patient and staff safety following the Lord Young Review on Health and Safety.

For	442	99.55 %	Passed
Against	2	0.45 %	
Abstain	4		

23. Funding international work

That RCN Congress considers if the RCN can continue funding its international work given the domestic economic situation.

Matter for discussion

24. Dual diagnosis

That RCN Congress discusses the challenges faced by nurses working across all health care sectors in managing people with dual diagnosis.

Matter for discussion

25. Value for money in health care systems

That this meeting of RCN Congress discusses whether the current systems of health care regulation across the UK are proportionate and represent value for money.

Matter for discussion

26. Hate crime

That RCN Congress calls on Council to promote awareness of the impact and effect of hate crime.

For	427	99.99%	Passed
Against	1	0.01 %	
Abstain	0		

27E. NHS Reforms

That this meeting of the RCN Congress, in the light of Anne Milton's Congress address, has no confidence in Andrew Lansley's management of this Coalition Government's NHS reforms.

For	478	98.76 %	Passed
Against	6	1.24 %	
Abstain	13		

28E. One family, one union, one voice, no imposition

Following the minister offering job protection for some staff in return for a freeze in increments, Congress urges Council to ballot the membership for industrial action in the event of any imposition of an incremental pay freeze or any other proposals reducing the value of any part of our nationally-agreed terms and conditions.

For	438	96.90 %	Passed
Against	14	3.10 %	
Abstain	8		

29E. Nurses subsidising health services

That RCN Congress calls for an end to nurses subsidising health services.

For	426	99.53 %	Passed
Against	2	0.47 %	
Abstain	3		

30E. Royal wedding bank holiday

That this meeting of RCN Congress demands that all health care employers apply bank holiday rates of pay for the royal wedding on 29 April 2011.

For	417	91.67 %	Passed
Against	38	8.33 %	
Abstain	9		

5. Report of Council

The Chair of Council presented the report of Council on action arising from 2010 Congress. The written report detailed action that had taken place in the course of the year in relation to resolutions and matters for discussion and the work of the Council committees during that time. In her presentation the Chair of Council also highlighted the work of the Council committees during this time. Following questions and detailed discussion, the report was received by Congress.

6. Date of next meeting

Delegates noted that the next meeting of the RCN Congress would take place on 13-17 May 2012 in Harrogate.

1. Pay cuts

That this meeting of RCN Congress is opposed to the pay cuts that are being imposed on the NHS workforce without consultation or due diligence to the current 'equal pay for equal value' pay system.

Submitted by: Greater Liverpool and Knowsley Branch

Council lead and committee assigned: Anne Wells, Membership and Representation Committee

Committee decision: Existing work addresses this issue

Members involved: Mike Travis, Greater Liverpool and Knowsley Branch

Protection and extension of the Agenda for Change (AfC) pay and career development system is a core element of the RCN's pay strategy, which the Membership & Representation Committee (MRC) steers.

In 2010 MRC established a Task and Finish Group to develop a negotiating strategy on pay and pensions – the basis of the RCN's response to both national and local attempts to cut pay, terms and conditions. The Task and Finish Group has involved stewards from across the UK in its work and has also consulted more widely through national reps conferences, where it has tested and developed principles underpinning the RCN's approach as well as the strategy itself. The Task and Finish Group has also sought feedback from the UK Committees.

Through the position of Joint Staff Side Secretary of the NHS Staff Council, the RCN is uniquely placed to argue for the protection and extension of nursing staffs' terms and conditions in the NHS and resist cuts in pay terms and conditions. RCN principles including improving patient care, equal pay for work of equal value and openness and transparency have been incorporated in the national Staff Side strategy.

The RCN has been successful in challenging and resisting national and local cuts to AfC, in particular threats to freeze or get rid of increments, including leading opposition to a proposal to freeze increments for some staff in England in 2011 and winning a significant Employment Tribunal alongside other NHS trade unions against Central Manchester Foundation Trust in February 2012.

2. Medicines waste

That RCN Congress asks Council to investigate and promote ways to reduce the cost of prescribed medication and unnecessary wastage.

Submitted by: Welsh Board

Council lead and committee assigned: Jane Bovey (until October 2011) and Tim Coupland (from October 2011), Nursing Practice and Policy Committee

Committee decision: Existing work addresses this issue

Members involved: Christine Thomas, Swansea Branch and Council member from October 2011

This agenda item focused on promoting ways to reduce unnecessary waste and the associated costs of prescribed medication.

It was decided that this issue was already covered through existing work, with the RCN heavily involved in the project: *Making care safer*, which is led by the National Care Forum and involves organisations, including Royal Colleges, from across the health sector. The project looks at waste related to medicines, in particular the dispensing of unnecessary medicines and the frequency and effectiveness of medication reviews.

As there is already guidance on preventing medicinal wastage across all four countries, a working group, including RCN Council members Tim Coupland and Christine Thomas and RCN staff members, looked at how this information could best be communicated to RCN members.

The working group also used data from the RCN's *Frontline First* campaign to source examples where nursing staff have successfully tackled medicine waste issues. These were highlighted in RCN forum newsletters as well as an article in *RCN Bulletin* in September 2011 titled "A dose of common sense", which went to all RCN members.

The working group is continuing to collect examples of medicine waste and best practice, with plans to profile these in future issues of *RCN Bulletin* throughout 2012.

3. Partnership and austerity

That RCN Congress considers the advantages and shortcomings of working in partnership with employers and governments during this period of financial austerity.

Submitted by: Greater Glasgow Branch

Council lead and committee assigned: Michael Brown, Membership and Representation Committee

Committee decision: No work required

Members involved: None

The discussion on this item at Congress 2011 reviewed successes and failures in partnership working at UK, national and local levels. Speakers considered the challenges of sustaining partnership during a period of tough financial constraint and the tensions that inevitably occur between employers and trade unions in times of great change and uncertainty.

There were no specific actions to take forward as this was a matter for discussion.

However, activists and officers alike are working extremely hard at all levels to sustain partnership working in difficult and challenging circumstances.

A recent study by Nicolas Bacon and Peter Samuel from the Nottingham University Business School, funded by the Economic and Social Research Council, has highlighted the excellent partnership arrangements in Scotland.

4. Transparency in service redesign

That the RCN Congress calls on Council to lobby the Department of Health and the devolved administrations to mandate all NHS service providers to publish all Risk Assessments and Patient Quality Impact Assessments that are conducted in advance of any service redesign.

Submitted by: Northern Board

Council lead and committee assigned:

Cate Wooley-Brown (until October 2011), Hamish Kemp (from October 2011), Nursing Practice and Policy Committee

Committee decision: New work

Members involved:

Christopher Piercy, RCN Council member since October 2011 and North of Tyne Branch

Following Congress 2011, research was undertaken to determine what information was already available supporting risk and quality impact assessments.

In Northern Ireland, the Department of Health, Social Services and Public Safety (DHSSPS) quality strategy (*Quality 2020*) requires that quality is a focus for the agenda of all boards and top management teams within health and social care. The RCN has said it will support changes that promote safe and effective care and continues to stress this in relation to the implementation of the recent *Review of Social Care*.

In Wales, the RCN contributed its views to the Government's *Guidance for engagement of consultation on changes to health service* and called for longer and more meaningful consultation periods and to give community health councils stronger rights.

NHS boards in Scotland have to involve the communities they serve. The Scottish Government and the Scottish Health Council have developed guidance on this and there are policies and legislation around patients and the public influencing the design and delivery of services. The RCN notes that the effect of this is yet to be seen.

The RCN has committed a significant amount of time and effort lobbying for changes to the Health and Social Care Bill, including matters relating to the provision of information about service reconfiguration. The work of the RCN's *Frontline First* campaign has continued and the RCN has sought to hold employers to account for the workforce planning decisions that impact on nursing and patients. Through the campaign, the RCN has forced employers to justify these decisions, particularly those that involve cuts in staff numbers or the closure of services.

5. Proposed welfare reforms

That this meeting of RCN Congress discusses the potential impact of health and wellbeing resulting from the Government's proposed welfare reforms.

Submitted by: Northern Board

Council lead and committee assigned: None

Committee decision: New work

Members involved: None

This was a matter for discussion and so no work was mandated to be taken forward.

However, the RCN is continuing to see the effects of the welfare reforms and is monitoring this through casework systems, while also contributing to any consultations and calls for evidence, where possible.

6. Outcomes not income

That this meeting of RCN Congress calls on Council to lobby for services to be provided on the basis of outcome rather than income.

Submitted by: Hertfordshire Branch

Council lead and committee assigned: Andrew McGovern, Nursing Practice and Policy Committee

Committee decision: Existing work addresses this issue

Members involved: Members extensively consulted on the Government white paper, and through the RCN's *Frontline First* campaign

The RCN has used its *Principles of Nursing Practice* as a benchmark for influencing outcomes. This is borne out of its overarching UK policy position to support improved clinical and patient-focused outcomes and to demonstrate that nursing input makes a significant difference to the delivery of high-quality, safe care.

The adopted policy position is underpinned by the RCN's response to the NHS white paper and the Health and Social Care Bill in England (now the Health and Social Care Act 2012). In the response to the NHS white paper the RCN published 18 key assurances against which it benchmarks the Government's proposals (provide link to this document on RCN web site).

Work in this area reflects the different approaches to planning, organising and delivering of health care in each of the four countries but the RCN recognises that outcomes are influenced by issues such as staffing numbers and skill mix; internal processes influencing team work; safety systems and supervision; and particular patterns of behaviour.

The RCN also acknowledges the cost pressures facing health and social care across the UK.

Recently, the RCN in Scotland responded to a limited Scottish Government consultation on the future performance management system for NHS Scotland.

In Northern Ireland the RCN has submitted evidence to the Review of Health and Social Care.

In Wales, the RCN continues to be involved in any proposals for change, emphasising the need for outcomes based on patient need.

7. Re-emergent diseases

That this meeting of RCN Congress discusses the re-emergence of diseases, such as tuberculosis, and the contribution nursing can make to reducing them.

Submitted by: Public Health Forum

Council lead and committee assigned: None

Committee decision: Existing work addresses this issue

Members involved: Members of the RCN Public Health Forum

This discussion focused on the alarming rise in the re-emergence of diseases, in particular tuberculosis (TB). It was noted that London has the highest TB rate of any capital city in Western Europe.

This was a matter for discussion, and did not call for any specific action by the RCN. However, the organisation is already undertaking work in this area.

A key strand of RCN work is bringing TB nurses into the wider public health work streams and reinforcing their role within the frontline public health nursing workforce. The RCN also highlighted the importance of TB nurses in its response to the Government's public health white paper *Healthy lives, healthy people*.

In addition, the RCN has recently released an RCN publication for TB case management with DH funding.

The RCN Public Health Forum also held a conference in February, open to the public health nursing workforce, which included a masterclass on TB nursing. Presented by an expert on the disease, the session looked at proactive treatment, especially within the London area.

8. Safe staffing levels

That RCN Congress urges Council to campaign for legally enforceable staffing levels to safeguard standards in the current economic climate.

Submitted by:	Central Manchester Branch
Council lead and committee assigned:	Sue Fern, Nursing Practice and Policy Committee and Anne Wells, Membership and Representation Committee
Committee decision:	Integrate project into ongoing work stream
Members involved:	Laura Collier, Central Manchester Branch and Cat Forsythe, UK Safety Representative Committee and Central Manchester Branch

The RCN produced a paper, available on the RCN website, on mandatory staffing levels which looks at the use of benchmarks and ratios. A toolkit that activists and members can use to monitor their workplaces is also being developed. The RCN published a report in March 2012 that laid out recommendations to address issues on safe staffing in older people's wards.

In England the RCN worked with Baroness Emerton to table amendments to the Health and Social Care Bill calling for the development of mandatory safe staffing levels. The amendment was withdrawn in the face of government opposition although there was agreement to look further at the evidence supporting safe staffing levels.

In Northern Ireland the Normative Staffing Project is developing regionally-agreed nurse staffing range for general medicine and surgery based on 70/30 skill mix. Work is also being piloted by the RCN on A&E staffing.

RCN Wales continues to call on Local Health Boards to demonstrate safe staffing levels and remains concerned about staff working extra hours, high levels of bed occupancy, unfilled vacancies, lack of maternity and sickness absence cover, reliance on temporary staff and a ban on CPD being provided during work time.

The Scottish Government reviewed the staff projections process in 2011 and the RCN remains concerned about the risks of workforce projections and workforce plans in the context of financial pressures.

9. Social networking and nursing

That RCN Congress discusses whether social networking sites are good for nursing.

Submitted by: UK Stewards Committee

Council lead and committee assigned: RCN Council

Committee decision: None

Members involved: None

This discussion looked at the changing ways in which we communicate in the 21st century, and asked if the use of social networking had positive effects for nursing. The risk of nurses' private information becoming available to the public was discussed, as were the benefits of social interaction that social networking websites can provide to patients.

As this was a matter for discussion there were no specific actions to take forward.

10. Blood donation

That this meeting of RCN Congress urges Council to lobby to remove the exclusion on gay and bisexual men donating blood.

Submitted by:	Greater Glasgow Branch
Council lead and committee assigned:	Carol Evans, Nursing Practice and Policy Committee and Diversity Committee
Committee decision:	No work required
Members involved:	Greg Usrey, Greater Glasgow Branch and Ciaran Hurley, Sheffield Branch and RCN Perioperative Forum

This resolution saw votes cast strongly in favour of lobbying to lift the ban on gay and bisexual men donating blood.

Following the publication of new guidance from the Advisory Committee on the Safety of Blood, Tissues and Organs (SaBTO) in late 2011, the lifetime ban of blood donation was lifted for men in England, Wales and Scotland, who have sex with men. The previous ban has been replaced with a one year donor deferral period. This means men whose last sexual contact with another man was more than 12 months ago will now be able to donate, if they meet the other donor selection criteria. Northern Ireland, however, stated an intention to continue with the ban. This prompted questions regarding the acceptance of blood from other parts of the UK where the ban has been lifted.

Some RCN members have expressed concern that this action does not go far enough. For example, it does not differentiate between men in long-term, monogamous relationships and those who participate in frequent indiscriminate high-risk sexual behaviour.

The RCN's Nursing Practice and Policy Committee and Diversity Committees recommended that the RCN, in consultation with other leading stakeholders such as the Terrence Higgins Trust and Stonewall, should continue to review the impact of the new change in donation policy and consider what further work might need to be undertaken.

11. Quality placements

That RCN Congress urges Council to lobby for all students to be given appropriate quality placements leading to a minimum of a one year position with preceptorship upon registration.

Submitted by: Students Committee

Council lead and committee assigned: Andrea Spyropoulos, Nursing Practice and Policy Committee

Committee decision: Integrate project into ongoing work stream

Members involved: Jayne Parker, Brighton and Hove Branch and RCN Students Committee

This resolution saw Congress discuss the importance of quality placements in nursing education, especially the need for quality mentors and ongoing preceptorship.

The RCN Nursing Practice and Policy Committee placed the work around this resolution into the RCN Education Commission, which is a work stream of This is Nursing, an RCN project which looks at seven key areas of nursing.

The RCN Education Commission will use evidence-based research to look closely at nursing education. The commission involves both RCN staff and external contributors.

One of the Commission's projects has been to examine the importance of the partnership between higher education institutions (HEIs) and practice settings. This project is looking at the impact of this partnership in preparing students to be fit for practice, and will make recommendations for the future.

A second project has examined the expectations and experiences newly-registered nurses have of preceptorship programmes. This was researched by conducting focus groups with newly-registered nurses.

The final outcomes of these projects were not available at the time of print, but will be presented to the RCN Education Commission in Spring 2012.

12. Assessment of staff

That RCN Congress discusses the introduction of an annual physical and psychological assessment for all staff.

Submitted by: Cambridgeshire Branch

Council lead and committee assigned: Cecilia Anim, Nursing Practice and Policy Committee

Committee decision: No work required

Members involved: None

This Congress debate looked at the health and wellbeing of nursing staff and whether health assessments should be introduced.

As this was a matter for discussion it did not call for any specific action by the RCN. However, the RCN is already supporting work on this issue.

The RCN continues to support the work of RCN Fellow Dame Carol Black to implement the recommendations of the Boorman Review. The review examined the health and wellbeing of NHS staff and called for easier access to occupational health, better health-promoting activities and better line management.

The RCN supports the NHS health check which is available for NHS staff between the ages of 40 and 75, and the NHS online self-assessment health tools. The RCN continues to lobby for the NHS to be an exemplary employer in terms of working environment, healthy food/lifestyle choices, management systems and work-life balance.

13. Equity and excellence in patient care

That this meeting of RCN Congress does not believe that changes to commissioning arrangements outlined in the NHS white paper Equity and excellence: liberating the NHS will best serve patients, health care or the NHS in England.

Submitted by: Public Health Forum

Council lead and committee assigned:

Gill Cort and Jane Bovey (until October 2011), Ian Norris and Stuart Young (from October 2011), Nursing Practice and Policy Committee

Committee decision:

Integrate project into ongoing work stream

Members involved:

Members extensively consulted on the Government white paper

In its response to the white paper, the RCN published 18 assurances, one of which stated that nursing must be represented at a senior level in GP consortia and on the NHS Independent Commissioning Board, and that nursing expertise must be utilised at all levels of the commissioning process.

Through its response to the Future Forum report and in the re-committed Health and Social Care Bill (September 2011), the Government asserted its commitment to including nurses on a range of bodies, including on the boards of clinical commissioning groups (CCGs).

In January 2012, the RCN formally opposed the Bill, highlighting members' serious concerns about the effect of the reforms on patient care. The RCN is concerned about senior nurse leadership in CCGs as anecdotal evidence suggests some 'token' appointments as well as some senior experienced nurses being overlooked. The RCN has produced guidance to support the appointment of nurses on CCGs and plans a series of resources and events to equip nurses to influence commissioning.

Different commissioning arrangements apply in Scotland, Wales and Northern Ireland and the RCN continues to lobby and be involved in any proposals for change, emphasising the need for nursing input, as well as transparent and clear processes based on health and social care need.

14. Working across clinical specialities

That RCN Congress calls on UK governments to require nurses to work across all clinical specialities.

Submitted by: Gloucester Branch

Council lead and committee assigned: No Council member assigned, Nursing Practice and Policy Committee

Committee decision: Existing work addresses this issue

Members involved: None

This resolution was not passed at Congress, and therefore did not require any specific action.

The RCN's *This is Nursing* project, which looks at the seven key areas of nursing, is already undertaking work on this issue.

15. Access to care

That this meeting of RCN Congress considers how to achieve equitable access to health care services for older people who live in care homes.

Submitted by: Older People's Forum

Council lead and committee assigned: Kevin Bell, Nursing Practice and Policy Committee

Committee decision: New work

Members involved: Hazel Heath, North East London Outer Branch and Chair of the RCN Older People's Forum

Issues surrounding the health services available to older people in care homes were discussed at Congress last year with inconsistent care and cost cutting cited as areas of concern.

Since Congress, the RCN has worked with the British Geriatrics Society to produce the report *Quest for quality*. The report describes current NHS support for care homes, looking at unmet needs, unacceptable variations and often poor quality of care provided, covering what could be done to make improvements. RCN member Hazel Heath, Chair of the RCN Older People's Forum, worked on the report.

In March 2012, the RCN published *Persistent challenges to providing quality care*, which addressed the worrying trends related to the quality of care in care homes. The report analyses issues such as inadequate funding and staff levels; appropriate skill mix of staff, high turnover of staff; low levels of morale; and lack of equipment in homes. The RCN makes recommendations for action to address these issues and is also working with representatives from the independent sector to explore how the RCN can better support members working in care homes.

At Congress 2012 the RCN Older People's Forum is holding an event which will explore the key issues currently impacting on care homes in the UK, and discuss how the role of registered nurses in care homes is evolving. A discussion and guidance document titled *Older people in care homes: sex, sexuality and intimate relationships* will also be launched.

At the Congress event RCN members who work in care homes will be able to discuss with the RCN Older People's Forum committee how they would like the RCN to support them in their work.

16. Skills Passport

That this meeting of RCN Congress asks Council to lobby for the Skills Passport to be implemented across the NHS and other sectors where nurses are employed.

Submitted by: Cheshire East Branch

Council lead and committee assigned: Ian Norris, Nursing Practice and Policy Committee

Committee decision: Integrate project into ongoing work stream

Members involved: Rosemary Wheeler and Jean Rogers, Cheshire East Branch

This debate strongly suggested that a Skills Passport for Health should be implemented across the NHS and other sectors where nurses are employed. The Skills Passport is a portable, online record of an individual UK nursing staff's career history, current skills and training.

Since Congress, a Skills Passport Strategy Group has been established by Skills for Health, and includes RCN staff members. 2009-2011 saw the completion of the first phase of the Skills Passport project. This work involved pilot websites, external evaluation reports of the sites, and proof of the validity of the passport concept.

RCN members were involved in the project through testing of the Skills Passport during the pilot phase. Members were also directed to the Skills for Health online survey of statutory/mandatory training for health care, which explored which core subject areas should be contained within the Skills Passport.

The passport is now in the final stages of development, with the aim of being completed in 2013. The RCN continues to be represented on the Skills Passport Strategy Group, and RCN members will be kept up to date with the progress of the project.

17. Return to SENs

That this meeting of RCN Congress discusses whether the introduction of the support worker/assistant practitioner role is a return to the state enrolled nurse.

Submitted by: Bedfordshire Branch

Council lead and committee assigned: Sue Fern, Nursing Practice and Policy Committee

Committee decision: Existing work addresses this issue

Members involved: Juliet Muzawazi, Bedfordshire Branch

This was a matter for discussion and did not call for any specific action by the RCN. However, the RCN is already undertaking work which focuses on the role of health care support workers (HCSWs), such as health care assistants (HCAs) and assistant practitioners (APs).

The RCN has consistently campaigned to introduce a mandatory register for HCSWs including APs. The campaign included calling for amendments to the Health and Social Care Bill in the House of Lords, calling for mandatory regulation of all HCSWs rather than the Government's proposed system of voluntary regulation. This work was supported by Baroness Emerton.

The RCN will also be involved in the proposed development of minimum standards of education for HCSWs.

A briefing paper on the role differences and boundaries of HCAs, APs and registered nurses has been produced, and is available on the RCN website.

18. Nursing workforce

That this meeting of RCN Congress urges Council to lobby all UK governments to ensure nurses play a key role in workforce planning, education commissioning and the design of the future nursing workforce.

Submitted by: London Board

Council lead and committee assigned: Ann Griffiths (until October 2011), Sue Fern (from October 2011), Nursing Practice and Policy Committee

Committee decision: Existing work addresses this issue

Members involved: Members extensively consulted on the Government white paper

Disappointingly, the issues surrounding education, workforce and training did not feature in the original text of the Government's Health and Social Care Bill.

In response to the second Future Forum Report on education and training, the Government published its report *Delivering the Healthcare Workforce – From design to delivery*. This set out a new approach to workforce planning and the education and training of both the health and public health workforce. The report confirmed that there are two central elements to the new system – Health Education England (HEE) and the Local Education and Training Boards (LETBs).

The RCN has said that these groups should not be medically led and that it was vital that both HEE and the LETBs had independent Chairs, something which has now been confirmed.

Furthermore, the Government has accepted an amendment to the Bill which placed a requirement on all providers to ensure an effective system for education and training. They will be expected to participate in education and training activities, and Health Education England will invest only in organisations which undertake such work.

Another amendment, accepted by the Government, placed a duty on the Secretary of State to secure medical education and training – a welcome addition to the legislation.

At this stage, the Government has made a commitment to publish draft legislation regarding medical education and training in the next parliamentary session. The RCN looks forward to reading the detail and will continue to lobby at this stage for nurse involvement at all levels.

19. Community mental health nursing

That RCN Congress discusses the changing role of community mental health nurses across the UK.

Submitted by: North Essex Branch

Council lead and committee assigned:

Kevin Bell (until October 2011), Rachel Trencher (from October 2011) Nursing Practice and Policy Committee

Committee decision:

No work required

Members involved:

Cris Allen, Brighton and Hove Branch and Chair of the RCN Mental Health Forum

This debate was a wide-ranging discussion on contemporary practice in community mental health nursing. There was no consensus as to any single particular issue that was a challenge to the membership or indeed the RCN.

However, following Congress it was agreed in conjunction with Cris Allen, the Chair of the Mental Health Nursing Forum, to appoint a Community Mental Health Nurse member to the steering committee of the forum. It is anticipated that the addition of a Community Mental Health Nurse will enable the committee to accurately reflect the composition and concerns of the contemporary mental health nursing workforce.

The recognition of community psychiatric nurses continues to be on the RCN's agenda through membership of the steering group of the Joint Commissioning Panel for Mental Health, which is establishing guidelines for the commissioning of mental health services by clinical commissioning groups in England.

The RCN has also submitted comments on the proposed Scottish Mental Health Strategy which highlights the role of community psychiatric nurses.

20. Public spending and vulnerable adults

That this meeting of RCN Congress urges Council to monitor the disproportionate effects that reductions in public spending may have on those adults who are most vulnerable to abuse and neglect.

Submitted by: Research Society

Council lead and committee assigned: Hamish Kemp, Nursing Practice and Policy Committee

Committee decision: New work

Members involved: Professor Ruth Northway, Rhondda and Taff Ely Branch and RCN Research Society

In light of Government changes in health care delivery, vulnerable adults remain in need of RCN focus and attention. Following Congress 2011 a number of initiatives were undertaken by the RCN.

A portal was developed on the RCN website to organise resources on safeguarding and many RCN forums have provided information for it. Additional links to new resources on whistleblowing (by Mencap and the Care Quality Commission (CQC) are now available to members.

The RCN has worked with the Department of Health in England to produce guidance to safeguard those who have autism. This was published by the RCN Publishing Company Ltd.

In Wales, the RCN has contributed to a Cross Party Group on the Welsh Assembly Government's new law to protect vulnerable adults, and will be consulting with Age Concern about this new law.

The RCN Learning Disability Nursing Forum has strengthened its priorities around the workforce, leadership and education of learning disability nursing, to help safeguard the needs of people with learning disabilities.

In 2011 RCN Events hosted a number of conferences which related to safeguarding at which speakers discussed policy, practice and the nursing contribution.

21. Qualifications and experience

That this meeting of the RCN Congress asks Council to investigate how appropriate nursing experience can be recognised and accredited.

Submitted by: Essex Branch

Council lead and committee assigned: Sue Fern, Nursing Practice and Policy Committee

Committee decision: Integrate project into ongoing work stream

Members involved: Sara Bennett, Essex Branch and Tracey Risebrow, Suffolk Branch

The debate at Congress focused on the competences and qualities needed for career development, and the relative importance of academic qualifications.

Following Congress, an analysis was undertaken into existing RCN work in this area to see what gaps there might be. RCN Council member Sue Fern and members Sara Bennett from Essex Branch and Tracey Risebrow from Suffolk Branch contributed to the work.

It was decided that it would be useful to develop specific resources to support members without degree level qualifications who:

- have concerns about unequal access to jobs
- need to identify opportunities to assist their movement up the career ladder
- lack opportunity or resources to undertake further study or professional development
- are concerned about the promotion of nurses without sufficient experience.

Consequently, the following work has been completed:

- improved signposting through RCN Direct and on the RCN website to help members locate support and information
- new online advice and information which can be accessed through RCN Direct and the RCN website
- new training resources for RCN reps, so they are better informed when supporting members.

22. Cuts and patient/staff safety

That RCN Congress calls on Council to lobby to minimise the impact of cuts on patient and staff safety following the Lord Young review on health and safety.

Submitted by: UK Safety Representatives Committee

Council lead and committee assigned: David Miller (until October 2011) and Lorrae Allford (from October 2011), Membership and Representation Committee

Committee decision: Existing work addresses this issue

Members involved: Members of the UK Safety Representatives Committee

The work to follow up the Lord Young review is co-ordinated by the UK Safety Representatives' Committee.

The RCN responded to the Government consultation on Lord Young's proposed health and safety reforms including the review of Reporting Injuries, Diseases and Dangerous Occurrences (RIDDOR) regulations and the Health and Safety Executive's proposals to charge for interventions. Evidence was also submitted to the Lofstedt review, an independent review of health and safety legislation.

The RCN is working with the Department of Health (DH) and NHS Employers through the NHS Staff Council, Partnership for Occupational Safety and Health in Healthcare (POSHH) to promote the health and safety of staff and the impact on patient outcomes. The RCN is also represented on the Social Partnership Forum on the DH Overview and Scrutiny Group, looking at the implementation of the Boorman Review.

The health and safety impacts of organisational change were communicated to RCN activists in December 2011's RCN Activate magazine and the RCN is leading further work on organisational change through the NHS Staff Council POSHH group.

The RCN's UK Safety Representatives' Committee supported the TUC Day of Action on health and safety on 28 April and, through their 2012/13 work plan, will continue to lobby on issues including safe staffing levels and work-related stress.

23. Funding international work

That RCN Congress considers if the RCN can continue funding its international work given the domestic economic situation.

Submitted by: Lothian Branch

Council lead and committee assigned: No Council member assigned, International Committee

Committee decision: Existing work addresses this issue

Members involved: None

This item saw members discuss the importance of the RCN's international work and its commitment to promoting the development of nursing internationally.

This was a matter for discussion and therefore did not generate any specific action points to take forward.

24. Dual diagnosis

That RCN Congress discusses the challenges faced by nurses working across all health care sectors in managing people with dual diagnosis.

Submitted by:	Mental Health Forum
Council lead and committee assigned:	Andrew McGovern, Nursing Practice and Policy Committee
Committee decision:	Existing work addresses this issue
Members involved:	Cris Allen, Chair of the RCN Mental Health Forum and Brighton and Hove Branch, Anna- Marie Felice, RCN Mental Health Forum steering committee member and Hertfordshire Branch, Peter Kelly, North West London Inner Branch and Ellie Gordon, Scunthorpe Branch, both expert reference group members

While this item did not call for specific actions, the RCN has undertaken related work.

A substance abuse nurse has been appointed to the RCN Mental Health Forum steering committee, ensuring the clinical area of substance misuse and the issue of co-morbidity is factored in to the forum's work.

The RCN has also spoken to the Association of Nurses in Substance Abuse (ANSA) around revising their guidance documents for all nurses. The need for this resource was highlighted by the Congress debate.

A RCN Learning Zone resource entitled "Substance misuse nursing for non-experts" has been launched at Congress this year. This was developed in conjunction with an expert reference group of substance misuse nurses drawn from ANSA and the RCN.

The RCN continues to work with the Royal College of Psychiatry and General Practice and the British Psychological Society on the substance misuse agenda and has had meetings with the Department of Health (DH) and the Ministry of Justice to discuss issues specifically related to clients with dual diagnoses and complex needs and their welfare in the current commissioning environment.

The RCN has regular meetings with the DH to discuss the broader substance misuse agenda and is represented by members who are clinical experts in the field.

25. Value for money in health care systems

That this meeting of RCN Congress discusses whether the current systems of health care regulation across the UK are proportionate and represent value for money.

Submitted by: London Board

Council lead and committee assigned:

Jane Bovey (until October 2011), Tim Coupland (from October 2011), Nursing Practice and Policy Committee

Committee decision:

Incorporated into ongoing work on system regulation

Members involved:

5,000 members participated in survey on CQC

Although this was a matter for discussion and not a resolution, the RCN is undertaking a significant amount of work on regulation because of its importance to patient safety and quality of care.

In England the views of over 5,000 RCN members on the Care Quality Commission (CQC) were published in January 2012. This has been used by the Department of Health in its capability review of the CQC.

The RCN continues to contribute to the debate for system regulation as part of its work on the Health and Social Care Bill. At Congress, members will be asked for their views of the CQC at focus groups.

Regulation in Wales is through the Healthcare Inspectorate Wales and the Care and Social Services Inspectorate Wales. The RCN in Wales focuses on performance, regulation and value for money in all of its activity.

In Scotland, regulation is through Health Improvement Scotland (HIS) for the NHS and the Care Inspectorate. The RCN contributed to a review of the regulation of older people care and called for regulatory bodies to work together.

In Northern Ireland, the RCN engages with the Regulation and Quality Improvement Authority. In recent months, work has focused upon issues around health care assistants.

26. Hate crime

That RCN Congress calls on Council to promote awareness of the impact and effect of hate crime.

Submitted by: Cambridgeshire Branch

Council lead and committee assigned: Sandra James, Diversity Committee

Committee decision: New work

Members involved: Carol Evans, RCN Council member and Cambridgeshire Branch

This resolution saw members at Congress share how hate crimes have impacted on peoples' lives, with Council urged to keep hate crime high on the agenda.

Since Congress the RCN Diversity Committee has made links with Stop Hate UK and Unite Against Hate, who collectively have a presence across the UK, raising awareness of hate crime and promoting the importance of reporting hate incidents.

The RCN has finished filming footage for a short video designed to raise awareness and understanding of hate crimes as well as targeted violence and hostility. The video will be available on the RCN website towards the end of 2012. RCN member Carol Evans from the Cambridgeshire Branch was involved in the filming of the video.

The RCN is also producing a short guide on third party reporting of hate crimes and how to access support at regional, national and UK levels. Extensive research is being undertaken and will bring together the range of organisations working to support those who experience hate and incidents of targeted violence and hostility across the UK. This is also due to be published towards the end of 2012.

27E. NHS reforms

That this meeting of the RCN Congress, in light of Anne Milton's Congress address, has no confidence in Andrew Lansley's management of this Coalition Government's NHS reforms.

Submitted by: RCN Greater Liverpool and Knowsley Branch

Council lead and committee assigned: RCN Council

Committee decision: Existing work addresses this issue

Members involved: Through the *Frontline First* campaign

At the time of Congress 2011, the Government initiated a legislative 'pause' to allow reflection and feedback on the NHS reforms proposed within the Health and Social Care Bill.

As part of this process, the Government also formed the NHS Future Forum. The RCN engaged with the Forum submitting a view on how to achieve necessary changes to the Bill, and the RCN hosted a number of nursing specific Future Forum events.

The RCN briefed members of both Houses of Parliament on concerns with the Bill at every opportunity, with written submissions, face-to-face meetings, policy seminars and high-profile events at political party conferences.

The RCN proposed several specific amendments to the legislation which resulted in some changes, including ensuring nurses are appointed at every level of the new commissioning framework; stopping the ability of Clinical Commissioning Groups to receive bonuses and removing the wording proposing a minimum tariff in the NHS.

However, the RCN was not satisfied that the legislation was amended sufficiently to avoid destabilising the NHS and moved to oppose the Bill, calling for it to be withdrawn.

28E. One family, one union, one voice, no imposition

Following the minister offering job protection for some staff in return for a freeze in increments, Congress urges Council to ballot the membership for industrial action in the event of any imposition of an incremental pay freeze or any other proposals reducing the value of any part of our nationally-agreed terms and conditions.

Submitted by:	UK Stewards Committee
Council lead and committee assigned:	Tracey Budding (until October 2011) and Lorrae Allford (from October 2011), Membership and Representation Committee
Committee decision:	New work
Members involved:	Lisa Falconer, Chair of the UK Stewards Committee (to April 2012) and Lothian Branch

Following Congress 2011, a number of issues arose which highlighted the potential for industrial action, including pay freezes, pension proposals and other changes to pay and conditions.

The RCN supported the Trade Union Congress (TUC) Day of Action in November 2011 to protest against proposals to change public sector pension schemes. and members were involved in a range of activity.

At the end of 2011, the Government set out its “final offer” on NHS pensions which built in some protection for those within 12.5 years of retirement and an improved accrual rate.

At the start of 2012, the RCN asked its members to vote on whether the RCN should accept the Government’s proposals. The turn-out for this ballot was 16.17% with 62.36% of those who voted stating that they wished to reject the proposals.

Throughout the ballot process, it became clear that the pressure on members is great: not just concerning the pensions issue, but also the prospect of a massive NHS reorganisation, the threat of redundancy, a pay freeze and deteriorating staffing levels.

It was also very clear that the number one concern around the pensions proposals was the proposed increase in the retirement age. The RCN remains committed to campaigning on this issue.

29E. Nurses subsidising health services

That this meeting of RCN Congress calls for an end to nurses subsidising health services in the UK.

Submitted by: North of Tyne Branch

Council lead and committee assigned: Tracey Budding (until October 2011) and Anne Wells (from October 2011) Membership and Representation Committee

Committee decision: Existing work addresses this issue

Members involved: None

This debate largely focused on concerns from members about costs they incurred while working in the NHS, such as car parking charges and mileage reimbursement rates.

For staff in the NHS there are three main issues which the RCN has been monitoring and lobbying on via Staff Side at the NHS Staff Council.

- A new system for car mileage reimbursement is proposed for introduction in July 2013 with current rates remaining in place until then. Discussions have continued on this new harmonised system and the impact of a new 3,500 mile threshold. At the time of writing, the aim is to achieve resolution at the Staff Council meeting in March 2012. The RCN was pleased to note that in the Budget 2011 Government increased the tax free component of reimbursement from 40 to 45p.
- Recent changes to AfC mean that those offered a lease car will, if they wish, be able to accept it on the basis of 'business use only' rather than having to accept it for personal use as well.
- The impact of car park charges on staff also continues to be a concern.

The RCN is continuing to monitor and raise these issues through the NHS Staff Council.

30E.
**Royal wedding
bank holiday**

That this meeting of RCN Congress demands that all health care employers apply bank holiday rates of pay for the Royal Wedding on 29 April 2011.

Submitted by: RCN Greater Liverpool and Knowsley Branch

Council lead and committee assigned: No Council member assigned, Membership and Representation Committee

Committee decision: Existing work addresses this issue

Members involved: None

This Congress debate discussed how the Royal Wedding on 29 April 2011 was designated a public holiday.

In Scotland, Wales and Northern Ireland employers acted consistently with AfC terms providing enhanced hours payments as well as a day off in lieu. However, many NHS employers in England refused to accept this additional day as falling within the arrangements for public holiday payment, and only gave a day off in lieu and paid normal daily rates.

5 June 2012 has been declared a public holiday to celebrate the Queen's Diamond Jubilee. The RCN, through the NHS Staff Side, has argued that staff required to work on 5 June should be paid the enhancements appropriate to a public holiday. However, the view from NHS Employers is that, while local employers can decide their payment and leave arrangements for that day, employees who are required to work should be given a day off in lieu and other staff would be entitled to a day's paid leave on that day.

Scotland and Wales are taking a similar approach with only Northern Ireland agreeing to pay public holiday enhancements for working on the day.

Report from previous Congresses

Work on Congress items is not restricted to a twelve month cycle and in 2011 members asked for updates on work arising from previous Congresses.

We have therefore reviewed the work identified for action at these events and selected significant items from the last five years on which progress continues to be made.

Independent Safeguarding Authority – for better or worse? (2009)

In 2009 Congress debated the introduction of the Independent Safeguarding Authority (ISA) register. Members raised concerns over how the actual vetting process will be managed and the lack of a right to appeal.

The scheme was introduced in October 2010 in England and Wales. The RCN challenged the automatic barring ('autobar') scheme (whereby RCN members could be barred without being given the opportunity to make representations.) Negotiations with the Home Office were unsuccessful which prompted High Court Judicial review proceedings to be brought in the name of the RCN and four individual members.

The claim was successful in showing that the autobar regime was unlawful and the Government committed to amending the scheme in the new Protection of Freedoms Bill, which will affect all four countries of the UK and is due to become law in 2012. The proposed changes are a significant "win" for the RCN on behalf of its members.

The RCN has also lobbied the Home Office throughout the Coalition Government's review of the ISA scheme to ensure that other procedural safeguards are in place for the benefit of our members.

Those members affected by the autobar scheme have had claims lodged with the European Court for compensation.

The RCN is now working jointly with the other trade unions on an ongoing basis to make sure that the new scheme has the appropriate safeguards in place.

Report from previous Congresses

0% drink driving (2010)

At Congress 2010 members discussed a resolution which called for legislation to reduce the permissible level of alcohol intake before driving to zero. During the debate members decided that more work needed to be done before a decision could be made and asked to refer the matter directly to Council to take forward.

Following Congress, a briefing paper was prepared for the Nursing Practice and Policy Committee (NPPC) and the committee recommended that the RCN move to a position of support for a lower drink drive limit – to 50mg blood alcohol content (BAC) rather than 80mg. A position which Council later agreed.

The RCN was invited to give evidence to the Government's review of drink and drug driving law, the final recommendations of which included a lower drink drive limit. The Government has not yet acted on this recommendation.

The RCN has maximised opportunities to promote its position including via a letter to *The Times* in March 2012 and by responding to various consultation responses.

Safe drinking (2008)

Alcohol also featured in Congress discussions back in 2008 in a debate on the nurse's role in promoting safe and responsible alcohol consumption.

The topic was submitted by the RCN Health Visitors and Public Health Forum and was followed by the development of RCN policy positions on minimum unit pricing and the availability and advertising of alcohol. RCN policy was promoted in consultation responses and media work.

A member survey was carried out jointly with the Royal College of Physicians and Alcohol Concern and the RCN is an active member of the influential coalition group, the Alcohol Health Alliance.

Alcohol has been a high priority issue for successive UK governments. The Scottish Government has led the way with plans for a minimum unit price for alcohol.

In England, a new alcohol strategy is expected imminently from the Government, and may contain measures on minimum pricing.

Report from previous Congresses

Enabling not disabling (2009)

At Congress 2010 Congress asked Council to mount a campaign to combat the unilateral and piecemeal dismantling of NHS pay and terms and conditions of service.

The resolution emanated from proposals to change the national agreement for pay, terms and conditions for NHS staff – Agenda for Change – earlier that year.

RCN leadership in the NHS Staff Council resulted in the dismissal of the proposal to freeze increments in 2011. Subsequent proposals have been successively modified.

Council's Membership and Representation Committee established a Task and Finish Group to consider the future strategy for pay. The group, chaired by Council member Anne Wells and including members from across the UK, developed principles such as identifying impacts to patient care. This work has been incorporated in the NHS Staff Council staff side's approach.

Sentenced to poor health (2007)

In 2007, Congress voted to condemn the current overcrowding in prisons because of the negative impact on prisoners' health and on the prison nurses who care for them.

Overcrowding in prisons remains a concern for the RCN today. As part of the National Advisory Group (chaired by Sir Keith Pearson), the RCN contributed to a review in England led by Lord Bradley, which has resulted in a government drive to reduce the number of offenders who have mental health problems and learning disabilities being sent to prison.

Following the Congress debate, the RCN has worked to ensure that there are more nurse-led diversion initiatives and that police custody nursing roles are developed across the UK. The RCN has also collaborated with Her Majesty's Inspectorate of Probation (HMIP) and promoted nursing in the criminal justice service as a positive and valuable career choice.

UK prison health care services now fall within the NHS' delivery remit. In addition, the NHS has agreed to the principle of transferring police custody health care – as recommended in the Bradley report. Ten 'early adopter' police custody sites have been established since 2011. These are focused on

Report from previous Congresses

‘modelling’ what that transfer looks like and how it works in reality, including examining the relationship between the police and the NHS. Following the success of the pilots, 24 “model” sites are due for set up from April 2012 with the remainder transferring by 2014.

The RCN has also contributed to the EU Prison Health Debate and also helped to reaffirm the International Council of Nurses (ICN) definition supporting “Nursing role in the care and treatment of detainees and prisoners”.

RCN Criminal Justice Service Forum members, along with prison nursing and custody care activists, continue to be very active in leading and highlighting best practice. The Forum’s priority is to develop nursing standards of care: The principles of *Criminal Justice Nursing practice* will highlight existing standards and benchmarks.

A word for dyslexia (2009)

Congress in 2009 asked RCN Council to influence employers to recognise, and provide for the needs of, nursing staff with dyslexia and similar conditions.

Since then, the focus of the RCN’s work has been dyslexia, dyspraxia and dyscalculia in practice settings. A suite of online and hard copy tools was developed to offer ward managers, staff and students some practical solutions. The publications included in the suite are titled:

- Dyslexia, dyspraxia and dyscalculia: a summary guide for managers
- Dyslexia, dyspraxia and dyscalculia: a guide for managers and practitioners
- Dyslexia, dyspraxia and dyscalculia: a toolkit for nursing staff.

A pocket guide was also produced which many universities now order in bulk for their students.

The documents were written by Michelle Cowen from Southampton University in conjunction with the RCN Education Forum and the RCN Student Committee.

Report from previous Congresses

Fair student bursaries (2006)

During this debate, Congress urged Council to lobby for a UK-wide review of the provision of non-means tested bursaries for all pre-registration nursing and midwifery students.

Since then work has been done to review the bursaries offered in each country and identify best practice approaches.

Devolution has resulted in each country maintaining its own agenda and bursary system, although Wales continues to offer benefits identical to those in England. In each country, the RCN, including RCN Student Committee members, has been heavily involved in these negotiations and has shared best practice across the UK to achieve the best possible outcome for nursing and midwifery students

The bursary offer has been confirmed in England and Wales for September 2012. Northern Ireland is currently involved in its own separate bursary review. Scotland is not currently reviewing its bursary although an overarching review of nurse education is ongoing.

The RCN is, and has been, on each of the relevant negotiating groups.

First aid training for children? (2010)

Congress in 2010 called on Government to mandate the teaching of first aid to school children.

Since then, the RCN has called on Government, via responses to consultations and in discussions, to include first aid training in future education curricula and PSHE programmes.

The RCN has also joined forces with the British Heart Foundation and others to campaign on this issue.

The RCN has identified examples across the UK where head teachers are engaging health staff and organisations, such as St John Ambulance, to provide emergency life-support and first aid training in school settings.

Work on the matter continues and is now being discussed at a European level, with a call for all children and young people across Europe to receive education about emergency life-support skills in school.

Report from previous Congresses

Telecare in the community (2008)

Congress voted in 2008 to support the implementation and use of telehealth services in the community for patients with chronic long-term conditions.

Since then, the RCN has raised awareness and highlighted the benefits of telehealth via the publication of a number of resources, including:

- an eHealth web page focusing on telehealth and telecare
- a Learning Zone resource on telehealth
- a facilitation package 'eHealth at Work' aimed at eHealth novices which includes information on telehealth.

The RCN's eHealth advisor has also raised awareness of the nursing role in telehealth at informatics conferences.

In Scotland, Wales and Northern Ireland, telecare has been implemented in a number of areas, for example the Scottish Centre for Telehealth.

The RCN has written *Guidance on using technology to support clinical practice* which is being launched at Congress 2012.

In addition the RCN is supporting the implementation of 3 Million Lives, a Department of Health (DH) campaign to reach a target of three million telehealth users in England over five years.

Fair care for transgender people (2010)

In 2010 Congress asked Council to lobby for consistent and equitable care for transgender clients.

Following Congress a Task and Finish group of RCN members was established to address progress on this issue. Since that period, the group has:

- formulated four parliamentary/national assembly questions and has approached the Chair of the All-Party Parliamentary Group on Equalities to pose those questions at Westminster
- made links with specialist transgender health organisations in order to understand and promote best practice both in the UK and more globally with the World Professional Association for Transgender Health

Report from previous Congresses

- worked with the Government Equalities Office (GEO) to ensure that the cross-governmental transgender equality action plan properly meets the health needs of trans patients and communities
- begun to work closely with the DH as part of a transgender health stakeholder group to ensure that the voice of nursing is paramount.

The group has also started work on producing a comprehensive online resource for RCN members based on best practice in providing care for transgender patients which will be launched in February 2013.

Reducing the impact of disability on nursing careers (2010)

An emergency agenda item in 2010 asked Congress to discuss the impact of disability on nursing careers and how the RCN can better support this strand of diversity in order to preserve the valuable experience and empathy disabled nurses bring to the workforce.

RCN Council appointed a Task and Finish Group, made up of RCN members, including a number of Work Injured Nurses Group (WING) members and external stakeholders. The group oversaw the production of a scoping report that considered two key issues: how the RCN supports disabled members and the overall impact their disability has on their nursing careers.

The report reviewed available research and good practice guidelines, and conducted a gap analysis. This has led to further work by the RCN's Diversity Committee, including a new code of conduct for RCN meetings to take account of disability issues. This conduct requires independent disability access audits for all venues the RCN uses for events, and new training for representatives and officers on dealing with disability issues. The Committee is also recommending to Council that the RCN itself should start to collect disability information.

