

# Council's Report to Members on Congress 2025



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# Foreword

Last year, we gathered in my hometown of Liverpool for Congress, and I want to thank everyone who took part. I was delighted to hear members from across the UK speaking passionately and showcasing their depth of knowledge and experience while debating the key issues facing the nursing workforce.

Since then, we have continued to drive meaningful progress for our members, with our work centred on strengthening the nursing profession and improving conditions for those delivering care.

This report summarises the work undertaken to influence the RCN's priorities since Congress last met. It reviews each successful item and assesses the progress achieved through the collaborative efforts of RCN members and staff working in partnership.

Members made it clear at Congress that issues relating to pay, career progression, safe staffing and social care reform were more pressing than ever. Throughout the week, members considered 29 resolutions and matters for discussion, covering topics such as a review of neurodiversity assessments for adults, the safety-critical role nurses undertake and the implementation of existing policies, zero-hours contracts and the negative impact of bank work on NHS pay, terms and conditions of employment, financial support for nursing students, and the rights and futures of internationally educated nursing staff.

At Congress 2025, we launched the band 5-6 progression campaign – a key step towards securing fair and consistent progression within Agenda for Change. Over the past year, collaborative policy work with UK governments has continued to advance this agenda, resulting in key wording changes to Annex 20 of the *NHS Terms and Conditions of Service Handbook* earlier this year. The updated section places nursing on a par with a range of allied health professions on the Agenda for Change contract and is expected to support smoother, faster progression through early career pay bands.

Our campaign to eradicate unsafe and undignified care across the UK has also continued to gain momentum. In early 2026, NHS England took an important step forward by introducing a national definition of corridor care, committing to regular reporting, and requiring acute trusts to develop plans to eliminate it.

Safe staffing has remained a central priority. A new strategy, informed by rapid evidence reviews and strengthened through academic partnerships, will underpin our long term influencing work. We also launched the *Nursing Workforce Standards* portfolio and expanded our research capability to support this growing area of activity.

As ever, RCN Congress showcased the strength and determination of the nursing workforce, and the powerful impact that can be achieved when members stand together to influence and drive change. Thank you for everything you do to make the nursing profession heard, and I look forward to Congress returning to Liverpool this year.

**Carmel O'Boyle**  
**Chair of RCN Council**

# RCN Congress 2025

The 55th meeting of RCN Congress was held from 12 – 15 May 2025 in Liverpool.

Linda Bailey (Chair of Congress), Patience Bamisaye (Vice Chair of Congress) the Agenda Committee, RCN Council, Professional Nursing and Trade Union committees and representatives of the RCN Boards, Branches, RCN UK Forums, the RCN Nursing Support Workers Committee, the RCN UK Stewards, Health and Safety and Learning Representatives' Committees and the RCN Students Committee.

## **A. Welcome and Introduction from the Chair of Congress**

The chair welcomed delegates to Congress.

## **B. Reports of the Agenda Committee**

Congress received reports from the Agenda Committee meetings held since the previous meeting of Congress. During Congress, verbal reports of the Agenda Committee were received. All resolutions and matters for discussion (including emergency items agreed for inclusion on the Congress agenda) are featured in this report.

## **C. Resolutions and Matters for Discussion Resolutions (R), Matters for Discussion (MfD) and Emergency Items (E)**

are listed in the order they were taken on the agenda. With the exception of item 19 (Leadership support for person-centred care) votes on resolutions were conducted by a show of hands. E29 (protecting nursing specialities) did not have time to be debated at Congress. Congress agreed to pass direct to Council.

When a debate aligns with one of our strategic goals, as outlined in our five-year plan, *A New Dawn for Nursing*, it will be indicated as follows

### **Goal 1**

Goal 1 The RCN as the voice of nursing.

### **1. Celebrating a nursing career (matter for discussion)**

That this meeting of RCN Congress discusses what members can do to raise the profile of nursing as a positive career.

### **2. Increasing our understanding of neurodiversity (resolution)**

That this meeting of RCN Congress calls on RCN Council to lobby UK governments to undertake a four-nation review of access to assessment of neurodiverse conditions in adults.

### **3. Losing direct nursing skills (matter for discussion)**

That this meeting of RCN Congress discusses the potential implications of losing direct clinical nursing skills.

### **4. A better work-life balance for nursing staff (matter for discussion)**

That this meeting of RCN Congress discusses meaningful measures to improve work-life balance for nursing staff.

### **5. Zero hours contract and NHS nursing pay (resolution)**

That this meeting of RCN Congress asks RCN Council to investigate the negative impact of bank on NHS pay, terms and conditions of employment.

### **6. Nursing's role in combatting human trafficking (resolution)**

That this meeting of RCN Congress asks RCN Council to lobby the UK governments to develop measures that will reduce the effects of human trafficking.  
(Changed from a matter for discussion: 'that this meeting of RCN Congress discusses the role of the nursing family in combating human trafficking'.)

### **7. Accountability for patients in ambulances (resolution)**

That this meeting of RCN Congress calls on RCN Council to clarify the position of accountability of both organisations and registered nurses when caring for patients in ambulances waiting to access emergency departments and ambulance cohort areas.

### **8 & 9. International student nurse hardship / Nursing student financial support (resolutions)**

Item 8 - That this meeting of RCN Congress recognises the challenges specific to international student nurses across all four nations and lobbies universities and UK governments to provide extensive support to reduce the hardships faced by this student group.

Item 9 - That this meeting of RCN Congress lobbies the governments of the four nations to commit to a review of the financial support available to nursing students.

### **10. Artificial intelligence in nurse education (matter for discussion)**

That this meeting of RCN Congress discusses the use of artificial intelligence (AI) in Nurse education.

### **11. Health tourism (matter for discussion)**

That this meeting of RCN Congress considers the impact of health tourism abroad.

### **12. Assaults on nursing staff and employer accountability (resolution)**

That this meeting of RCN Congress requests RCN Council explore ways to hold employers more accountable in their duty of care to their employees in relation to the Assaults on Emergency Workers (Offences) Act 2018.

### **13. Updating the Health and Safety at Work Act (resolution)**

That this meeting of RCN Congress asks RCN Council to demand the government reviews and updates the Health and Safety at Work etc Act 1974 to align to current workforce practice. (Changed from a matter for discussion: 'having celebrated the 50th anniversary of the Health and Safety at Work etc Act 1974, that this meeting of RCN Congress discusses whether it has been 50 years of failure'.)

### **14. Social care investment (resolution)**

That this meeting of RCN Congress asks RCN Council to demand the UK Governments and the Crown Dependencies take urgent action to invest in social care. (Changed from 'that this meeting of RCN Congress demands the UK governments take urgent action to invest in social care'.)

### **15. Stopping the decline in learning disability nursing (resolution)**

That this meeting of RCN Congress calls on RCN Council to urgently support workforce modelling that recognises the importance of registered nurses in Learning Disabilities.

### **16. The role of nursing staff in quality improvement (matter for discussion)**

That this meeting of RCN Congress discusses the role of nursing staff in quality improvement and whether we currently have the capabilities, opportunities and motivation to undertake such work.

### **17 & E28. Support for men who experience domestic abuse / Advocating for men's health issues (resolutions)**

Item 17 - That this meeting of RCN Congress asks RCN Council to lobby UK governments to review the lack of availability of practical, psychological, and emotional support mechanisms for men who experience domestic abuse.

Item E28 - That this meeting of Congress asks RCN Council to explore what more it could do to advocate for men's health issues.

### **18. Establishment of a member credit union (resolution)**

That this meeting of RCN Congress calls on RCN Council to explore the establishment of a member credit union.

### **19. Leadership support for person-centred care (resolution)**

That this meeting of RCN Congress asks RCN Council to urge healthcare systems and providers across the UK to empower nurse leaders to develop clear, active practice policies that promote safe, culturally appropriate, person-centred care.

### **20. Tackling health inequalities (matter for discussion)**

That this meeting of RCN Congress discusses the role that nursing staff can undertake in tackling health inequalities.

### **21. Is current nursing regulation fit for purpose? (resolution)**

That this meeting of RCN Congress calls on RCN Council to undertake work on the future regulation of nurses, midwives and nursing associates to ensure the protection and safety of the public and nursing profession.

### **22. Physician associates (resolution)**

That this meeting of RCN Congress calls on RCN Council to investigate the impact of physician associates on nursing.

### **23. Internationally educated nurse title (matter for discussion)**

That this meeting of RCN Congress discusses the potential long-term effect of the use of the title 'internationally educated nurse'.

### **24. Opioids (resolution)**

That this meeting of RCN Congress mandates RCN Council to lobby the UK Governments to define a strategy on how nursing staff can reduce harm associated with the impact of opioids across the UK. (Changed from a matter for discussion: 'that this meeting of RCN Congress discusses the impact of opioids and how nursing staff can reduce harm associated with these'.)

### **25. Care workers visas (resolution)**

That this meeting of RCN Congress urges RCN Council to consider the consequences of the Care Workers Visa.

### **26. Impact of worker fatigue (resolution)**

That this meeting of Congress asks Council to lobby employers to take urgent action in response to the recent published research on the impact of worker fatigue.

(changed from "that this meeting of Congress asks Council to commission research into the impact of worker fatigue on patient care and the health, safety and welfare of our members")

### **E27. Shortage of newly registered nurse roles (resolution)**

That this meeting of RCN Congress asks RCN Council to lobby the UK governments, NHS and independent social care providers to develop a sustainable strategy to address the shortage of roles for newly registered nurses.

### **E29. Protecting nursing specialties (resolution)**

That this meeting of Congress ask Council to work on production of a College position statement protecting nursing specialties.



# 1. Celebrating a nursing career

Submitting Entity/Proposer	BJ Waltho, Dorset Branch, SW region
Secunder	N/A
Institute/team alignment	Nursing Practice Academy
Matter for discussion or Resolution?	Matter for discussion

## You said

That this meeting of RCN Congress discusses what members can do to raise the profile of nursing as a positive career.

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## Activities

There is ongoing work which is being picked up across other workstreams across the College.

For example:

Career frameworks: [rcn.org.uk/professional-development/career-frameworks](https://rcn.org.uk/professional-development/career-frameworks)

Careers resources: [rcn.org.uk/Professional-Development/Your-career](https://rcn.org.uk/Professional-Development/Your-career)

The RCN is also developing a community platform called NEST, which will be launched soon. This is being developed by the Leadership Academy and will be an opportunity to harness and celebrate nursing.

**Council has agreed that there will be no further action on this item.**

## 2. Increasing our understanding of neurodiversity

Submitting Entity/Proposer	Evan Keir, Dumfries and Galloway Branch, RCN Scotland
Seconder	Sandra-Jane Stock, Nursing Support Workers Committee
Institute/team alignment	Nursing Practice Academy
Matter for discussion or Resolution?	Resolution

### You said

That this meeting of RCN Congress calls on RCN Council to lobby UK governments to undertake a four-nation review of access to assessment of neurodiverse conditions in adults.

### Key message

Across the UK, people face significant difficulties accessing assessments for neurodivergent conditions. In particular, there are well-documented and unacceptably long waiting lists for diagnostic assessments for autism and ADHD. Recent media coverage has highlighted the severity of the problem, including reports of waiting times of up to 20 years in Oxfordshire (BBC News).

This Congress resolution calls on the RCN to lobby UK governments to undertake a four-country review of access to neurodivergent assessments.

### Agreed scope of activity

For the RCN to understand the current status of access to neurodiversity assessments across all four countries, and to influence for a review as appropriate.

### Activities

This work has developed into two related workstreams:

- **Core workstream:** Access to assessment for all neurodivergent individuals
- **Secondary workstream:** Support provided by the RCN to neurodivergent members

We have:

Core workstream

- contributed to the NHS England ADHD Clinical Reference Group, including input to the ADHD Taskforce (summary available via NHS England)
- peer-reviewed and informed the new national guidance Autism-informed inpatient care
- written to the Westminster Government's Minister for Disabilities, Zubir Ahmed MP, to raise concerns and call for a review, and requested a meeting. Engagement with devolved governments is under review and being tailored to the priorities and context in each country
- mapped RCN lobbying and influencing activity across all four countries to clarify our current position in each nation
- identified and collated workstreams across the four countries relating to neurodiversity assessments and waiting times (summarised overleaf)
- contacted MPs to ask them to raise this issue in Parliament and to submit parliamentary questions in order to maintain pressure on the Westminster government.

### Secondary workstream

- invited the proposer of this item to join the RCN Peer Support Network
- promoted the RCN Peer Support Network to neurodivergent members
- supported network members to share experiences and knowledge, give and receive non-professional support, contribute to guidance, and promote the benefits of a diverse health and care workforce
- we found that in the six months to 1 February 2026, 67% of new joiners to the service identified as neurodivergent
- continued reviewing and expanding RCN resources on neurodivergence for members, line managers, and employers, led by neurodivergent members.

### Summary of work across the four countries:

- Autism waiting time statistics (NHS England Digital).
- National framework and operational guidance for autism assessment services (NHS England).
- Autism Strategy 2023–2028 (Northern Ireland Department of Health).
- Northern Ireland Assembly Research and Information Service briefing paper (AIMS Portal).
- Royal College of Psychiatrists proposal to the Scottish Government on neurodevelopmental pathways (January 2025).
- Evidence on neurodevelopmental pathways and waiting times in Scotland.
- Analysis of growing demand for ADHD and autism assessments in Wales.

### We will:

- continue to support work across the four countries to address neurodivergent assessment pathways and waiting times
- continue to identify opportunities to raise this issue through parliamentary monitoring, relevant debates, and joint work with external stakeholders and coalitions
- update the RCN Autism Position Statement to include content on diagnosis.

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## Impact

The RCN will have a better understanding of access issues for assessments for neurodiversity in all four countries. The RCN will use this insight to lobby for a review of access to assessments for adults.

### 3. Losing direct nursing skills

Submitting Entity/Proposer	Charlotte Collings, RCN Eastern Board
Seconder	n/a
Institute/team alignment	Nursing Workforce Academy
Matter for discussion or Resolution?	Matter for discussion

#### You said

That this meeting of RCN Congress discusses the potential implications of losing direct clinical nursing skills.

#### Key message

There is ongoing work which is being picked up across other workstreams across the RCN. As part of this ongoing activity to support our members around job planning, we will utilise the debate at this year's Congress to ensure we have captured our members views.

**Council has agreed that there will be no further action on this item.**



Charlotte Collings, RCN Eastern Board, speaking at Congress on Monday 12 May 2025

## 4. A better work-life balance for nursing staff

Submitting Entity/Proposer	Evan Keir, Dumfries and Galloway Branch, RCN Scotland
Seconder	n/a
Institute/team alignment	Employment relations
Matter for discussion or Resolution?	Matter for discussion

### You said

That this meeting of RCN Congress discusses meaningful measures to improve work-life balance for nursing staff.

### Key message

To ensure meaningful measures are in place to improve the work-life balance for nursing staff, particularly nursing staff who provide a 24-hour service.

### Agreed scope of the project

To determine what is happening across the UK (completed in December 2025) and for the RCN to continue to push for safe staffing and implementation of existing policies (will be ongoing/business as usual).

### Activities

Work has focused on understanding and addressing barriers to flexible working for nursing and health care staff across the four UK nations. A comparative review has been completed, identifying shared challenges and country-specific issues.

#### England

- Nursing staff can request flexible working from day one; flexible working is embedded in the 2025 NHS *10 Year Health Plan for England*, with new standards launched in April 2026.
- Despite this, many RCN members in the NHS (85% of cases) report refusals, often justified by service impact or the argument that approving one request obliges approval for all.
- Some members are encouraged to retire or move to bank work as an alternative to flexible arrangements.
- Requests refused include reduced hours for new mothers, term-time contracts, and caring-related adjustments.
- Demographic patterns show most cases involve women (89%), with White members the largest group (57%) and Black African/Caribbean/British the second largest (16.5%).

#### Northern Ireland

- Despite day-one rights to request flexible working, many requests from frontline nursing and health care staff are routinely refused, often citing increased burden on teams or impact on patient care. These reasons are also used to decline annual leave.

- Staffing pressures have intensified due to bed escalation without matched staffing increases, contributing to moral distress and work-related stress. Organisational-level stress risk assessments are often absent.
- RCN members are not calling for a reduced working week, though other unions are.

### **Scotland**

- The Scottish Government has confirmed the reduction of the full-time working week to 36 hours for Agenda for Change (AfC) staff, with the first half hour applied from 1 April 2024 and the remaining hour due from 1 April 2026.
- In many 24-hour clinical settings, the reduction has led to increased overtime rather than a genuine reduction in working time.
- Some members lost Universal Credit eligibility due to reduced contracted hours.
- Progression from band 5 to 6 has improved work-life balance by reducing financial pressure to work extra hours.
- Flexible working requests are frequently refused on service-delivery grounds. RCN Scotland currently has 48 active cases relating to refusals, including for health and caring reasons.

### **Wales**

- A reduced 36-hour week was part of the non-pay agreement, but progress has stalled due to claims of unaffordability.
- Employers are capping flexible working uptake, with some boards stating service delivery becomes 'unworkable' if more than 7% of staff have flexible arrangements.
- Confusion persists between flexible working and hybrid working.

### **Independent sector**

- Service delivery hours are expanding (such as seven-day GP practices open to 8pm), creating pressure for staff to change patterns to meet service needs.
- The RCN's 2024 *Employment Standards for the Independent Health and Social Care Sectors* emphasise:
  - fair implementation of flexible working policies
  - flexible working as a retention tool
  - inclusion of all roles (including senior posts)
  - safe staffing and protected breaks
  - fair treatment of internationally educated nursing staff.

### **Ongoing actions**

- Raising inequities in flexible working access for nursing staff delivering 24-hour services compared with other groups.
  - Highlighting the essential link between flexible working and safe staffing across all settings.
  - Advocating for fair, consistent implementation of flexible working policies and encouraging managers to explore a broader range of workable patterns.
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### **Impact**

The same concerns regarding parity for frontline staff are evident across the nursing profession in the four countries of the UK. Highlighting this lack of equity will hopefully influence nurse managers and leaders to think of different ways of working to ensure equity across the profession.

## 5. Zero hours contracts and NHS nursing pay

<b>Submitting Entity/Proposer</b>	Adrian Williams, Greater Liverpool and Knowsley Branch. After Congress, Mike Travis, from the same branch, replaced Adrian Williams.
<b>Seconder</b>	Phil Cole, Chair of RCN UK Stewards Committee
<b>Institute/team alignment</b>	Employment Relations
<b>Matter for discussion or Resolution?</b>	Resolution

### You said

That this meeting of RCN Congress asks RCN Council to investigate the negative impact of bank on NHS pay, terms and conditions of employment.

### Key message

NHS organisations use staff ‘banks’ to provide temporary staffing. Bank contracts are a form of zero-hours arrangement, with no obligation on employers to offer work or on workers to accept it, and practice varies across the NHS in the UK (and HSC in Northern Ireland).

Where bank contracts are separate from substantive NHS contracts, most organisations do not apply equivalent NHS terms and conditions. As a result, many bank workers are employed on inferior terms, with bank shifts treated as separate employment and paid at bank rates. These hours and earnings do not count towards pensions or employment benefits linked to substantive contracts, such as annual leave, sick pay or maternity pay. This situation is unfair and unacceptable.

### Agreed scope of the project

To identify:

- the different arrangements for bank staffing across the NHS and HSC in the four UK countries
- the problems associated with bank work as a form of zero-hours contract, including inferior terms and conditions and the use of separate contracts compared with NHS terms and conditions and substantive NHS contracts.

To address:

- the practice of requiring substantive NHS staff to accept separate bank contracts for additional hours, rather than being paid additional hours or overtime at substantive rates
- the use of bank contracts (zero-hours and without full NHS terms and conditions) as a route to flexible working, instead of providing flexible working options within substantive contracts on NHS terms and conditions.

Through the NHS Staff Council and NHS partnership arrangements, and in collaboration with other trade unions, prepare and develop guidance and agreements to promote a consistent approach to the impact of the Employment Rights Act 2025, including the introduction of a ‘Right to Guaranteed Hours’ for qualifying workers who regularly work on zero-hours or bank contracts.

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## Activities

- A range of coordinated activities is underway to deliver this resolution and address the use of NHS bank contracts as a form of zero-hours work. Concerns have been formally raised through the NHS Staff Council and wider partnership arrangements, seeking a clear mandate for NHS Staff Council work on bank arrangements and on the implications of the Employment Rights Act 2025, including new rights linked to guaranteed hours.
  - Internally, governance and delivery structures have been strengthened. A subgroup of the Trade Union Committee has been established, involving key members and staff, to oversee and progress work on bank-related issues. In parallel, an operational UK-wide RCN staff group has been formed to identify challenges associated with zero-hours and bank working across the NHS and HSC, share good practice across the four UK countries, and support consistent action.
  - Work has been undertaken to map the different arrangements and approaches to bank working across England, Northern Ireland, Scotland, and Wales. The Trade Union Committee has also clarified RCN's policy position, emphasising that bank contracts undermine NHS terms and conditions when used inappropriately. This includes opposition to requiring substantive staff to take separate bank contracts for additional hours, instead of paying those hours (and overtime where applicable) at substantive rates with full pension and leave entitlements. The position also rejects the use of inferior bank contracts as a route to flexible working and argues that genuine flexibility should be delivered within substantive NHS contracts.
  - Practical action is ongoing. This includes escalating disputes, where necessary, with NHS organisations imposing unilateral and detrimental changes to bank terms and rates, and supporting regional teams leading disputes over reduced bank pay. Resources and guidance have been produced and are being expanded to support members, representatives and staff locally.
  - Looking ahead, work continues to collectivise disputes, influence the NHS Staff Council's remit on bank usage, and press for consistent, fair approaches as the Employment Rights Act 2025 comes into force.
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## Impact

- To promote substantive employment and steer the NHS away from separate bank contracts which do not include the full NHS terms and conditions; including implementing changes relating to the Employment Rights Act 2025 and zero-hours contracts.
- To support RCN members, reps and staff in tackling specific bank contractual issues, such as imposed detrimental changes to bank contracts.

## 6. Nursing's role in combatting human trafficking

Submitting Entity/Proposer	Marie Murray, Dumfries and Galloway Branch, RCN Scotland
Seconder	n/a
Institute/team alignment	Policy
Matter for discussion or Resolution?	Resolution

### You said

That this meeting of RCN Congress asks RCN Council to lobby the UK governments to develop measures that will reduce the effects of human trafficking.

(Changed from a matter for discussion: 'that this meeting of RCN Congress discusses the role of the nursing family in combating human trafficking.')

### Key message

Over 80% of survivors seek medical care within their first year of being trafficked. Nursing staff play a vital role in identifying victims of human trafficking and taking appropriate action.



Marie Murray, Dumfries and Galloway Branch, RCN Scotland

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## Agreed scope of the project

This item focuses on lobbying government to develop measures to reduce the impact of human trafficking. This includes direct lobbying activity and consideration of whether existing RCN guidance on trafficking requires review or update.

In July 2025 the Scotland Government published their revised strategy, which is focused on prevention of human trafficking and exploitation in Scotland. Visit [Scotland's Trafficking and Exploitation Strategy 2025 - gov.scot/publications/scotlands-trafficking-exploitation-strategy-2025/](https://gov.scot/publications/scotlands-trafficking-exploitation-strategy-2025/)

The RCN recognises that some internationally recruited nursing staff experience a range of exploitative practices that do not meet the legal threshold of trafficking. While there is some overlap between these issues, the exploitation of internationally educated nursing staff is not the primary focus of this Congress item.

Separate work is already underway to address exploitative practices affecting internationally educated nursing staff.

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## Activities

We have:

- met with the Congress proposer and committee leads to agree the scope of the work. Undertaken policy analysis to identify opportunities to influence policy on human trafficking
- assessed the impact of proposals within the Border Security, Asylum and Immigration Bill on victims of human trafficking and mapped key stakeholder positions
- briefed parliamentarians on concerns relating to the impact of the Bill on victims of human trafficking during its parliamentary passage, including ahead of the House of Lords third reading
- written to ministers in the Home Office requesting a meeting with officials to discuss our concerns
- led the annual review and update of the RCN's modern slavery and human trafficking resource.

We will:

- review RCN internal processes for making referrals related to exploitation, in line with the introduction of the new Single Enforcement Body, the Fair Work Agency, which was created in April 2026.
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## Impact

Through parliamentary lobbying we will highlight concerns for victims of human trafficking and make recommendations to limit the impact. We will also review guidance for members and internal processes for referrals.

## 7. Accountability for patients in ambulances

Submitting Entity/Proposer	Alison Milliken, Northern Branch, Northern Ireland
Seconder	Natalie Springer, Urgent and Emergency Care Forum
Institute/team alignment	Policy/Nursing
Matter for discussion or Resolution?	Resolution

### You said

That this meeting of RCN Congress calls on RCN Council to clarify the position of accountability of both organisations and registered nurses when caring for patients in ambulances waiting to access emergency departments and ambulance cohost areas.

### Key message

Lack of clarity on this matter risks patient and staff safety.

### Agreed scope of the project

Create a consensus position on who is accountable for patients waiting in ambulances outside EDs within the working group. Clearly articulate this to internal, member and external audiences.

### Activities

We have:

- met with internal stakeholders to define the issue and explore potential approaches for addressing it
- identified workstreams and external stakeholders
- published a position statement on 'drop and go' policies and accountability of patients waiting in ambulances
- fed into related work:
  - The HSSIB investigation report on care in temporary environments.
  - RCN analysis of NHS bed stock and capacity and trends.
  - Policy briefings on corridor care.
  - Work with RCN reps to raise awareness of the health and safety issues that arise from delivering care in corridors or other unsuitable environments. Including, the provision of resources and learning for reps and encouraging them to use their right to carry out formal health and safety inspections and escalate concerns on behalf of members. As well as targeted support to regions and countries in response to rep concerns.

We will:

- publish a position statement on accountability of patients waiting in ambulances and 'drop and go' policies.

### Impact

The RCN has provided clarity around its position on accountability for patients in ambulances and the related issue of 'drop and go' policies. This provides a signal to external stakeholders that the current situation is not acceptable and comfort to our members that their issues are being heard and addressed.



Alison Milliken, Northern Branch, Northern Ireland

## 8/9. International student nurse hardship / Nursing student financial support

Submitting Entity/Proposer	Item 8: Natasha Green, Students Committee Item 9: Lauren Healan, Students Committee
Seconder	Item 8: Chinonyerem Odionye, Hertfordshire Branch Item 9: Paul Irving, Vice Chair of Education Forum
Institute/team alignment	Student / International Academy
Matter for discussion or Resolution?	Resolution

### You said

Item 8 - That this meeting of RCN Congress recognises the challenges specific to international student nurses across all four nations and lobbies universities and UK governments to provide extensive support to reduce the hardships faced by this student group.

Item 9 - That this meeting of RCN Congress lobbies the governments of the four nations to commit to a review of the financial support available to nursing students.



Natasha Green, Students Committee

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## Key message

Nursing students have consistently described struggling financially when they are faced with extensive study time, unpaid placements and limited time to undertake paid work. Many nursing students have additional caring responsibilities and families. Financial struggles are a key contributor to high attrition in nursing courses; contributing to wider supply issues.

International students face many challenges in the UK. University fees for international students are not capped which means that international students are subject to high fees which vary across universities. International students also face further financial challenges as their visa permits them to only work 20-hours a week and are unable to access public funds. Many international students also face racism and discrimination in their universities and during their placements.

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## Agreed scope of the project

Insight into the experiences of nursing students, including international students will be gathered through the RCN's State of the Student Nation Survey. This is the RCN's annual research project, designed to capture the experiences, motivations, and challenges faced by nursing students across the UK. This includes university nursing students, nursing degree apprentices, and student nursing associates, and any key international student elements.

Findings of the research will be used to make recommendations to support nursing students including international students. Research findings will also inform policy work-plans.

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## Activities

We have:

- met with relevant colleagues to agree programmes of work on student financial hardship, including international student hardship with Natasha Green and domestic student financial support with Lauren Healan
  - conducted a survey of student nurses, incorporating questions on their experiences of financial hardship
  - updated our policy positioning on student financial hardship to reflect new insights gathered through this work. We plan to launch the updated position in summer 2026, alongside a set of policy asks to inform influencing activity.
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## Impact

The RCN will have a better understanding of the financial issues facing nursing students in the UK, including international students. The RCN will use this insight to make recommendations to government to alleviate financial hardship in nursing students.

## 10. Artificial intelligence in nurse education

<b>Submitting Entity/Proposer</b>	Kirsten Bland, Dorset Branch,
<b>Seconder</b>	n/a
<b>Institute/team alignment</b>	Professional Nursing Committee
<b>Matter for discussion or Resolution?</b>	Matter for discussion

### You said

That this meeting of RCN Congress discusses the use of artificial intelligence (AI) in nurse education.

### Key message

AI is already transforming nurse education, safe and ethical use is essential for nursing educators, students and practitioners.

### Agreed scope of the project

This Congress item will be addressed as part of the future of nurse education work which is currently being planned and is awaiting sign off as part of the RCN top ten priorities.

### Activities

We have:

- included AI as a specific issue to be explored in the RCN future of nurse education project for 2026
- undertaken a review of AI recommendations and resources in nurse education from various stakeholders including Council of Deans for Health and Advance HE

We will:

- explore the use of AI in nurse education as part of the future of nurse education project which will be a stakeholder engaged review of nurse education
- produce an RCN position statement on AI in nurse education. This is being drafted and will be reviewed by the new digital lead for nursing before being shared with the Professional Nursing Committee for comment.

### Impact

Potential impact:

- Shaping the future of nurse education and practice.
- Driving curriculum innovation.
- Promoting ethical and inclusive use of AI.
- Influencing policy and regulation.
- started internal discussions on how AI could be used to support the RCN education, learning and development offer.

# 11. Health tourism

Submitting Entity/Proposer	Samantha Spence, North Central London Inner Branch, London region
Seconder	n/a
Institute/team alignment	Policy
Matter for discussion or Resolution?	Matter for discussion

## You said

That this meeting of RCN Congress considers the impact of health tourism abroad.

## Key message

To develop guidance for members to promote consistent advice for responding compassionately and to develop guidance through the new groups.

We are encouraging governments across the UK to ensure that service planning and workforce modelling take into account global factors affecting both the UK and international health care and nursing workforce.

**Council have agreed that there will be no further action on this item, as the issue is outside the remit of the RCN.**



Samantha Spence, Inner North Central London Branch

## 12. Assaults on nursing staff and employer accountability

Submitting Entity/Proposer	Andrew Mather, UK Health and Safety Representative Committee
Seconder	Gail Goddard, Chair of the District and Community Nursing Forum
Institute/team alignment	Employment relations
Matter for discussion or Resolution?	Resolution

### You said

That this meeting of RCN Congress requests RCN Council explore ways to hold employers more accountable in their duty of care to their employees in relation to the Assaults on Emergency Workers (Offences) Act 2018.

### Key message

Nursing staff must be given appropriate and timely support by their employer following a violent incident, including in reporting incidents to the police service.

### Agreed scope of the project

The work will be taken forward via the NHS Staff Council's Health, Safety and Wellbeing (HSWG) Sub-Group who have been commissioned to develop a standardised approach to post violent-incident support. As this work is England only, consideration needs to be given to the need for further work in devolved nations. However, there may also be learning from approaches taken by devolved nations including Northern Ireland's approach to victim support and NHS Wales's obligatory responses work.

We also need to ensure members in IHSC are supported following an incident. It is proposed that this could be included in a further iteration of the employment standards.



Andrew Mather, UK Health and Safety Representative Committee

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## Activities

We have:

- met with the proposer and members of the UK Health and Safety Reps Committee to inform the development of a standardised approach to post-violent-incident support
- met with the wider UK Health and Safety Reps Committee to further shape the work, including commissioning a literature review and considering best practice
- agreed negotiating positions through the NHS Staff Council, with additional input sought from the Mental Health Forum and the Community and District Nursing Forum
- established an expert working group with national staff-side and employer representation, alongside violence reduction and EDI experts, to develop a draft framework
- shared the draft framework with the UK Health and Safety Reps Committee to gather feedback
- consulted more widely beyond the expert group on the draft framework content
- worked to ensure alignment with, and influence over, related NHS England activity on violence prevention and reduction.

We will:

- publish a framework to be adopted by NHS England, the Social Partnership Forum and the NHS Staff Council
- by Q4 2026, review RCN's *Employment Standards for Independent Health and Social Care Sectors* to ensure post-violent-incident support is included
- Ensure national frameworks are cross-referenced in future iterations of RCN workplace standards
- In Q2/Q3 2026, promote relevant guidance to members and representatives, including providing reps with advice to hold employers to account and ensure compliance with national standards and approaches to post-incident support.

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## Impact

A standardised approach to post incident support will ensure that our members are given timely and appropriate support following a violent incident including support in reporting incidents to the police. It will also allow our members and reps to hold employers to account if they are not following the standardised approach.

# 13. Updating the Health and Safety at Work Act

Submitting Entity/Proposer	Dean McShane, Greater Liverpool and Knowsley Branch North West Region
Seconder	n/a
Institute/team alignment	Nursing Practice Academy
Matter for discussion or Resolution?	Resolution

## You said

That this meeting of RCN Congress asks RCN Council to demand the government reviews and updates the Health and Safety at Work etc Act 1974 to align to current workforce practice

Changed from a Matter for discussion: 'having celebrated the 50th anniversary of the Health and Safety at Work etc Act 1974, that this meeting of RCN Congress discusses whether it has been 50 years of failure.'



Dean McShane, Greater Liverpool and Knowsley Branch North West Region

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## Key message

The RCN believes the Health and Safety at Work etc Act 1974 (The Act) largely remains relevant. However, consideration must be given to the changes in the current working environment and the contractual arrangements which have evolved since the Act became law in 1974. It is the opinion of the RCN that whilst employment legislation has kept pace with changes, the Act has not.

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## Agreed scope of the project

To write to the Health and Safety Executive (HSE) asking for changes to the Act to include the following:

- Gender-neutral language to be used throughout the Act replacing masculine pro-nouns.
- Reference to ‘employees’ to be changed to that of ‘worker’. Thereby bringing the Act into line with other legislation.
- A call for a new regulation to address psychological health with an accompanying Approved Code of Practice (ACoP) to assist with compliance. In addition, for certain psychological ill health conditions and potential work-related suicide to be RIDDOR reportable.
- A call for the HSE to provide specific health and safety guidance for hybrid/agile workers.

Table Parliamentary questions addressing the following:

- To ask the Secretary of State for Work and Pensions what assessment his department has made on the current compatibility of the Health and Safety Act 1974 with current workplace practices.
  - To ask the Secretary of State for Work and Pensions what plans he has to review the Health and Safety Act 1974.
- 

## Activities

A formal letter was submitted to the Chief Executive of the HSE calling for the changes set out above. After receiving an unsatisfactory response, a detailed follow-up letter has been drafted and will be sent in February 2026. Parliamentary questions have been drafted, and a meeting with Liz Twist, MP for Blaydon and Consett in her capacity as Chair of the All-Party Parliamentary Group on Suicide and Self-Harm Prevention, took place at the end of March 2026 to discuss the issues further.

We will keep the proposer and Trade Union Committee lead updated with activities and progress on this ongoing matter.

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## Impact

To bring a significant piece of legislation into line with the current working environment and contractual arrangements, thereby benefitting the wider nursing and health care workforce.

## 14. Social care investment

<b>Submitting Entity/Proposer</b>	BJ Waltho, Dorset Branch, South West Region
<b>Seconder</b>	Charlotte Hall, Gloucester Branch
<b>Institute/team alignment</b>	Policy, Independent Health and Social Care, and Employment Relations teams
<b>Matter for discussion or Resolution?</b>	Resolution

### You said

That this meeting of RCN Congress asks RCN Council to demand the UK governments and the Crown Dependencies take urgent action to invest in social care.

Changed from 'that this meeting of RCN Congress demands the UK governments take urgent action to invest in social care.'

### Key message

Social care is planned, commissioned and funded differently in each country of the UK, and the influencing methods and opportunities are bespoke to each country.

Underfunding in social care has negative consequences for the wider health system, meaning that people cannot access the care they need in the setting most suited for them. It can also lead to increase (inappropriate) demand for acute services, contributing to corridor care.

### Agreed scope of the project

We will initially focus on strengthening the evidence base on the experiences and contributions of nursing staff working in adult social care (ASC).

Social care funding and planning differ across the UK. In England and Wales, services are planned and funded by local authorities, supported by limited central government funding and a high reliance on self-funders. In Northern Ireland, social care is more integrated, with funding through the Department of Health alongside some means-tested individual contributions. In Scotland, personal care is publicly funded.

This research will generate robust evidence on ASC and its nursing workforce, enabling the RCN to undertake effective, evidence-based policy influencing on investment, workforce supply, recruitment and retention, career progression, pay, and integration with the wider health system.

The work will develop a comprehensive understanding of the role of registered nurses across diverse adult social care settings. It will examine key workforce challenges, including pay, working conditions, recruitment, retention, and career development. The work will also explore wider workforce dynamics such as staff turnover and reliance on international recruitment. In addition, it will identify where integration between health and social care works well and where it falls short. Taken together, this will highlight the critical role nurses play in bridging system gaps and strengthen policy positions on safe hospital discharge and community-based care.

A survey of members working in social care settings was launched in January 2026. This research will be followed by policy development and content production to support



future influencing on funding and investment, including engagement with the Casey Commission in England.

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## Activities

We have:

- met with and agreed programme of work with the proposer
- agreed our focus will be to develop a deeper evidence base about the experiences and contributions of nursing staff working in social care settings. This research will be UK wide and will give us an evidence base on areas such as investment, supply, recruitment, retention and career progression, pay and integration with the wider health system
- engaged with the Casey Commission (England).

We will:

- undertake this research with nursing staff working in adult social care services
  - undertake policy development
  - produce content for influencing.
- 

## Impact

The RCN will have a better understanding of the issues facing nursing staff in social care. The RCN will use this insight to make recommendations to government to improve investment in social care, which will also be beneficial to the wider health and care system.

Above: BJ Waltho, Dorset Branch, South West Region

## 15. Stopping the decline in learning disability nursing

Submitting Entity/Proposer	Sarah Jackson, Learning Disability Forum
Seconder	Laura Daukintis, Mental Health Forum
Institute/team alignment	Nursing Practice Academy
Matter for discussion or Resolution?	Resolution

### You said

That this meeting of RCN Congress calls on RCN Council to urgently support workforce modelling that recognises the importance of registered nurses in learning disabilities.



Sarah Jackson, Learning Disability Forum

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## Key message

Learning disability nursing saves lives and makes health and care accessible for some of the most vulnerable people in society. Yet the field of registered nurses in learning disabilities (RNLD) is in crisis.

The field is failing to attract students to train. There has been persistent reductions in student numbers since 2016, 40% since 2021, and a drop in HEIs providing this training. In the south east, the only option to train to be RNLD is through Open University.

Workforce data is poor – we don't know where 73% of RNLDs work. There is also a lack of a central vision of what RNLDs are needed for, where they are most impactful, and how many are needed. This Congress resolution calls upon the RCN to take a lead role in addressing this.

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## Agreed scope of project

Develop workforce planning guidance.

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## Activities

We have:

- begun a learning disability nursing review
- reviewed what is already happening across the UK
- liaised with key stakeholders across the UK, raising the need for RNLD workforce planning guidance
- supported development of NQB/NHSE safe staffing for learning disability guidance
- included the development of UK-wide workforce guidance for RNLDs as part of RCN Learning Disability Nursing Forum strategy for 2026.

We will:

- publish the *Learning Disability Nursing Review* during summer 2026
  - support work that is happening around this across the UK, for example, Northern Ireland's Equity of Access and Outcome programme, Scotland's Strengthening the Commitment Review, and Wales's Learning Disability Nursing Strategy
  - encourage regions in England to identify their workforce needs and develop regional workforce plans.
- 

## Impact

There will be a clear vision of the purpose of RNLDs in contemporary health and social care, and there will be guidance applicable across the UK identifying how areas should plan for resourcing and utilising their RNLD workforce.

## 16. The role of nursing staff in quality improvement

Submitting Entity/Proposer	Luke Evans, Public Health Forum
Seconder	n/a
Institute/team alignment	Nursing Practice Academy
Matter for discussion or Resolution?	Matter for discussion

### You said

That this meeting of RCN Congress discusses the role of nursing staff in quality improvement and whether we currently have the capabilities, opportunities and motivation to undertake such work.

### Key message

This is a matter for discussion on quality improvement and whether nursing staff currently have the capabilities, opportunities and motivation to undertake such work.

### Agreed scope of the project

To review what is already being undertaken across the RCN.

### Activities

We have:

- met with the proposer and contributors (19 September 2025)
- agreed to review existing activity already underway across the RCN
- held regular meetings throughout 2025 and 2026
- conducted a survey of committee members, as requested by the Committee Lead and proposer. The results demonstrate a good understanding of quality improvement (QI) but highlight a lack of capacity to undertake QI activity
- kept Country Associate Directors informed and updated on progress relating to this matter for discussion.

The RCN Foundation currently has a programme in place.

Through a co-production approach, the RCNF LV QI Programme was identified following engagement with nurses and midwives, who consistently reported frustration that QI projects undertaken as part of M-level studies often did not come to fruition. In response, the RCNF established an annual QI Project Grants Programme.

In 2025, eight grants of £3,000 each were awarded, covering all fields of practice and all four countries. A celebration event was held in December, attended by the General Secretary, where grant recipients presented posters showcasing their work to key stakeholders.



The first cohort of recipients is due to complete their projects around June 2026. An online event is planned to support development of a community of practice involving both the 2025 cohort and the current year's recipients, enabling sharing of outputs, outcomes, and learning.

Information on grant applications is available via the RCN Foundation

We will scope the resources currently in place across the RCN to support the membership.

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## Impact

RCN Foundation have done a substantial amount of work. Impact will be measured via their community of practice but feedback so far has been positive for members.

Above, Luke Evans, Public Health Forum

# 17/E28. Support for men who experience domestic abuse / Advocating for men's health issues

<b>Submitting Entity/Proposer</b>	Item 17: Christopher Barber, Solihull Branch, West Midlands Region Item E28: Ian Peate and Nicola Yiasoumi, Inner South East London Branch
<b>Seconder</b>	Item 17: Katy Welsh, Chair, Learning Disability Forum Item E28: Mary McHugh, Public Health Forum
<b>Institute/team alignment</b>	Nursing Practice Academy
<b>Matter for discussion or Resolution?</b>	Resolution

## You said

Item 17 - That this meeting of RCN Congress asks RCN Council to lobby UK governments to review the lack of availability of practical, psychological, and emotional support mechanisms for men who experience domestic abuse.

Item E28 - That this meeting of Congress asks RCN Council to explore what more it could do to advocate for men's health issues.



Christopher Barber, Birmingham East and North, West Midlands Region

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## Key message

To explore what the RCN can do to advocate for men's health issues including support for men who experience domestic abuse.

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## Agreed scope of project

- Ensure the RCN is using strategic opportunities to lobby for better advocacy for men's health issues.
  - Develop a range of activities to raise awareness among RCN members on men's health issues.
  - Capitalise on national campaigns that target specific areas affecting men's health.
  - To provide expert analysis and feedback on the Men's Health Strategy once it is published.
- 

## Activities

We have:

- met with internal stakeholders to identify and discuss the key issues within the men's health agenda
- identified relevant external stakeholders
- defined initial workstreams to support the development of the programme
- designed and planned two webinars to be delivered in 2026. The first webinar took place in April 2026, with expert speakers confirmed to address men's physical health and men's mental health. A second webinar is planned for September 2026, with one expert speaker secured to focus on male survivors of domestic abuse
- worked with the Independent Health and Social Care (IHSC) lead to develop an additional men's health webinar planned for June 2026
- arranged and held a meeting with Men's Health charity Northern Ireland on 13 April 2026 to strengthen relationships and explore opportunities for collaboration
- met with Global Action on Men's Health in March 2026 to discuss the Congress item and identify joint opportunities to progress this work
- requested the establishment of a men's health forum - this is currently going through the approval process.

We will identify how the RCN can collaborate effectively with other stakeholders in the campaigning space and, where appropriate, join or support a wider coalition to drive progress on men's health.

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## Impact

Developing and providing resources aimed at increasing awareness of men's health issues

# 18. Establishment of a member credit union

Submitting Entity/Proposer	Evan Kier, Dumfries and Galloway Branch, RCN Scotland
Seconder	Leonore Newson, Plymouth Branch
Institute/team alignment	n/a
Matter for discussion or Resolution?	Resolution

### You said

That this meeting of RCN Congress calls on RCN Council to explore the establishment of a member credit union.

### Impact

This item was not passed at Congress.



Evan Kier, Dumfries and Galloway Branch, RCN Scotland

## 19. Leadership support for person-centred care

Submitting Entity/Proposer	Zeba Arif, Mental Health Forum
Seconder	Cielito Caneja, Outer South West London Branch
Institute/team alignment	Nursing Practice Academy
Matter for discussion or Resolution?	Resolution

### You said

That this meeting of RCN Congress asks RCN Council to urge health care systems and providers across the UK to empower nurse leaders to develop clear, active practice policies that promote safe, culturally appropriate, person-centred care.

### Key message

It is imperative to promote safe, culturally appropriate, person-centred care.

### Agreed scope

Use existing RCN and external resources to assist senior nursing leaders to promote person-centred culturally appropriate care within their organisation's care

### Activities

We have:

- met with the proposer and agreed the scope and approach for this item of work
- scheduled further meetings with the proposer to maintain momentum and oversight
- continued to hold regular meetings with the committee lead and the proposer.

We will:

- consider existing resources available such as the cultural leadership programme.
- develop and deliver an online event to explore person centred care with CNOs/DCNOs.

### Impact

An online event will promote engagement and establish what gaps there are in person-centred care the conversation can include care for all with protected characteristics.



Sophie McKay, CYP Acute Care Forum

## 20. Tackling health inequalities

<b>Submitting Entity/Proposer</b>	Sophie McKay and Daniel Gooding, CYP Acute Care Forum
<b>Secunder</b>	n/a
<b>Institute/team alignment</b>	Nursing Practice Academy
<b>Matter for discussion or Resolution?</b>	Matter for discussion

### You said

That this meeting of RCN Congress discusses the role that nursing staff can undertake in tackling health inequalities

### Key message

That inequalities are considered and will be included in projects undertaken by RCN forums.

### Agreed scope

- The project is to utilise resources already present.
- Develop a position statement.

### Activities

We have:

- met with the proposer and agreed the work plan for this item
- scheduled further meetings with the proposer to support ongoing delivery
- held additional meetings and maintained regular communication via email to develop a position statement
- met with the Director of Research, and Policy colleagues to progress the requested position statement
- (on 21 April 2026), met with new PNC members, Sophie Du Plessis and Anna Young, where the draft position statement and project plan was shared. Their comments will be reflected in the draft statement
- developed a position statement that will be presented to the Professional Nursing Committee for approval after Congress 2026. Once approved, the position statement will be published on the RCN website.

We will:

- review existing resources and identify what is already available, or can be signposted, to support work on inequalities
- consider the feasibility of a joint event on inequalities in collaboration with the proposers.

### Impact

An evidenced-based position to ensure health inequalities are considered and will be included in projects undertaken by RCN forums.

## 21. Is current nursing regulation fit for purpose?

Submitting Entity/Proposer	Luke Evans, Public Health Forum
Seconder	Ruth Bailey, Chair of Women's Health Forum
Institute/team alignment	Policy / Legal / Employment relations
Matter for discussion or Resolution?	Resolution

### You said

That this meeting of RCN Congress calls on RCN Council to undertake work on the future regulation of nurses, midwives and nursing associates to ensure the protection and safety of the public and nursing profession.

### Key message

It is likely that the Nursing and Midwifery Council regulation will be reformed in 2026. It is important that the RCN undertakes preliminary activities to be well placed to influence the shape and direction of future nursing regulation.



Ruth Bailey, seconder for this resolution

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## Agreed scope

We will:

- explore opportunities to engage with members, to help inform policy development activity
- also establish a small project with a specific focus on bias and discrimination within NMC processes.

Alongside these activities, we will draft, test and iterate RCN policy content and positioning on regulatory issues (to include NSW regulation and the regulation of managers). This will be accompanied by influencing activities.

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## Activities

We have:

- agreed the delivery plan with the proposer
  - begun developing content and testing positioning in preparation for the forthcoming period of regulatory reform
  - attended a joint session of the Professional Nursing Committee (PNC) and Nursing Support Worker (NSW) committees to discuss issues related to nursing support worker regulation in the spring, followed by a more detailed discussion with the NSW Committee in England
  - agreed to publish a policy output on nursing support worker regulation in 2026
  - explored issues of discrimination through analysis of data and evidence, alongside discussions with relevant RCN teams, including the Legal and Equity, Diversity and Inclusion (EDI) teams
  - worked with colleagues and members to examine discrimination within regulatory processes and begun capturing testimonies from members with lived experience. This includes data from RCND and the NMC, and contributes to the development of new policy content
  - made formal submissions to the NMC on reforms to Fitness to Practise, including specific consideration of discrimination, as well as on the proposed uplift to fees. Secured a commitment that protection of the title 'nurse' will be addressed within forthcoming NMC reforms.
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## Impact

The RCN will be well placed to engage in regulatory reform period and other opportunities for influence on regulation issues, with a particular emphasis on discrimination.

## 22. Physicians associates

<b>Submitting Entity/Proposer</b>	Jason Warriner, Public Health Forum (Luke Evans, chair of Public Health Forum presented the item on behalf of the proposer.)
<b>Seconder</b>	Samantha Spence, Inner North Central London Branch
<b>Institute/team alignment</b>	Institute of Nursing Excellence
<b>Matter for discussion or Resolution?</b>	Resolution

### You said

That this meeting of RCN Congress calls on RCN Council to investigate the impact of physician associates on nursing.

### Key message

The deployment of physician associates was identified as a potential example of substitution of the registered nurse. This has been discussed by the Professional Nursing Committee (PNC) and there has been an updated position statement regarding substitution published.

### Agreed scope

Existing work – review of the RCN substitution position statement and ensuring there is a case example related to physician associates (soon to be known as physician assistants).

### Activities

We have:

- updated the RCN webpage on registered nurse substitution to include a new position statement and a case example on the substitution of specialist nursing roles, including substitution by physician associates (31/07/2025)
- published an updated position statement on registered nurse substitution (31/07/2025).

We will:

- work with the proposer and the PNC Lead for this item to develop an article for the RCN Magazine or blog
- continue to monitor activity and emerging intelligence related to physician associates/assistants.

### Impact

A government-commissioned independent report on physician associates and anaesthetic associates was published on 16 July 2025. The report highlighted the need for employers to review how this workforce is deployed, recognising that inappropriate use could increase the risk of these roles being substituted into areas traditionally undertaken by registered nurses.

Discussion and debate on this issue at PNC informed the development of the updated position statements and revisions to the RCN webpage.



Jason Warriner, Public Health Forum

## 23. Internationally educated nurse title

Submitting Entity/Proposer	Chinenye Ubah, Eastern Board
Seconder	n/a
Institute/team alignment	Employment relations
Matter for discussion or Resolution?	Matter for discussion

### You said

That this meeting of RCN Congress discusses the potential long-term effect of the use of the title 'internationally educated nurse'.

### Key message

Language and consistency of language should recognise the unique skills and contributions of nurses in their entirety. Nowhere is this need more pressing than for nurses who were educated and worked in other countries before arriving in the UK.

There are many variations of the descriptor across this group; at least eight can be found on the RCN website alone.

This inconsistency is damaging to the organisation and presents staff and members with the risk of inadvertently causing offence or distress by using wrong terminology.



Chinenye Ubah, Eastern Board

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## Agreed scope

The work will involve producing a glossary of terms/RCN guidance.

This initiative would address a current gap in policy and practice, promote professional respect, support accurate workforce data and align with national and global nursing priorities.

The glossary would be disseminated, helping to shape public narratives about the contribution of overseas nurses. It would serve as a reference in cross-sector collaborations with international nursing bodies, ensuring UK terminology aligns with global standards such as those promoted by the International Council of Nurses (ICN, 2021).

In February 2026, following the listening event, the scope evolved. It became clear that the challenge is not solely the terminology itself, but how such terms can be used in negative or reductive ways. More importantly, the discussion highlighted the distinct needs and vulnerabilities of individuals and groups working in the UK on visas, particularly the risks of exploitation, poor employment practices and discrimination. As a result, the RCN's focus will shift from debating labels to ensuring that our language, guidance and glossary promote inclusion, belonging and respect, while centring the real experiences and needs of internationally educated nurses.

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## Activities

We have:

- held discussions with the RCN International Committee and secured support for the development of an RCN guidance product
- presented to the RCN International Committee, the Group Equity, Diversity and Inclusion Committee, and the Equity, Diversity and Inclusion Programme Board. Delivered a joint member and staff event, with invitations extended to members of Council, TUC, PNC, the International Committee, and Fellows.

We will:

- produce draft guidance for comment and approval by the International Committee
  - submit a draft version in May 2026..
- 

## Impact

The RCN guidance will ensure the glossary is grounded in the values, expertise, and lived experience of the profession. The RCN is recognised as a leader with proven contributions to policy, education, and clinical practice. Its members collective insight enables capture of the nuances of nursing language while ensuring that the final terminology is culturally sensitive, legally accurate, and aligned with professional standards.

## 24. Opioids

<b>Submitting Entity/Proposer</b>	Dawn Marr, Grampian and Orkney Branch, RCN Scotland
<b>Seconder</b>	n/a (as changed from a matter for discussion to a resolution at Congress)
<b>Institute/team alignment</b>	Nursing Practice Academy
<b>Matter for discussion or Resolution?</b>	Resolution

### You said

That this meeting of RCN Congress mandates RCN Council to lobby the UK governments to define a strategy on how nursing staff can reduce harm associated with the impact of opioids across the UK.

Changed from a Matter for discussion: 'that this meeting of RCN Congress discusses the impact of opioids and how nursing staff can reduce harm associated with these'.

### Key message

Opioids are potent analgesics that play a vital role in balanced, multimodal pain management strategies. However, it has become increasingly evident that there is an economic and social repercussion of opioid usage causing a crisis across many countries.

There is an increased concern amongst health professionals and governments about the use of illicit opioids in the UK and the increased deaths they are causing. People who use illicit opioids have a higher risk of premature mortality, causing a mortality burden associated with their use.

The statistics around the number of deaths associated with opioid use is fragmented. The Office of National Statistics (ONS) estimate that nearly 50% of fatal drug poisonings have been attributed to opioids. However, this is thought to be highly underestimated by the ONS.

### Agreed scope

This resolution was passed as an emergency agenda item; however, the scope of work subsequently agreed with the proposer differs from the original resolution.

The group concluded that this should not be progressed as a lobbying initiative, given the broad nature of the issue and the relatively low level of awareness among nurses regarding opioids and their use. Instead, there was clear agreement on the need for practical guidance and clear referral pathways to better support nurses caring for people who are taking opioids. The project group determined that this approach would deliver greater benefit to the RCN membership.

The project group will therefore seek to work collaboratively with pain management experts from the Pain and Palliative Care Forum to develop guidance for nurses on opioid awareness and appropriate referral pathways, with the aim of contributing to wider efforts to address the opioid crisis.

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## Activities

We have:

- held an initial meeting with the project group to discuss the resolution, including the proposer, a committee member, the staff lead, and the Chair of the Pain and Palliative Care Forum
- discussed the draft project plan, with the project group (including the proposer) agreeing to amend the scope from that debated at Congress
- met with the Chair of the Pain and Palliative Care Forum and agreed that the project scope does not align with the Forum's core focus. As a result, it was agreed that the Forum will not lead this work but will contribute to future stages
- continued recruitment to the project team, ensuring inclusion of relevant subject-matter expertise
- developed a project plan and timeline, confirming the scope of work as the development of clear RCN professional guidance and an organisational position on illicit opioid harm reduction. The project group will operate through two concurrent subgroups:
  - **position statement writing group**, responsible for evidence sourcing and drafting, with intended publication in May 2026
  - **digital learning and guidance development group**, responsible for content, structure, drafting and liaison with the digital team, with intended publication in November 2026.
- met with the Digital Team to support initial discussions and inform their forward work plan.

We will:

- further discuss and refine the project plan at the next meeting, including additional representative members from across the UK to ensure a UK-wide perspective
  - hold regular project group meetings to monitor progress and support development of the work
  - develop the position statement
  - agree the content of the guidance and allocate drafting responsibilities across project group members.
- 

## Impact

The work being undertaken as part of the Congress resolution will support health care professionals to deliver safe, compassionate, and consistent care to people taking illicit opioids by increasing understanding of opioid use, harm-reduction approaches, and risk management. It will aim to reduce stigma and improve staff confidence when engaging with this population.

## 25. Care workers' visas

<b>Submitting Entity/Proposer</b>	Zeba Arif, Mental Health Forum
<b>Seconder</b>	Cheryl Nyabezi, South Birmingham Branch
<b>Institute/team alignment</b>	Member relations/Employment relations
<b>Matter for discussion or Resolution?</b>	Resolution

### You said

That this meeting of RCN Congress urges RCN Council to consider the consequences of the Health and Care Worker Visa.

### Key message

On 12 May 2025, the UK government published their immigration white paper which includes several measures which impacts migrant workers, including health and care staff.

The white paper announced a closure of care workers and senior care workers (occupation codes 6135 and 6136) visa routes. Applications from those already in the UK who are switching from other visa routes will remain open for a transition period until 22 July 2028.

As of 11 March 2024, migrant care workers are no longer able to sponsor dependents, which means they cannot bring their spouses or children to the UK as part of their visa. This change was brought in under the previous Conservative government, however the current Labour government has confirmed that they do not have plans to reverse this.



Zeba Arif, Mental Health Forum

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## Agreed scope

The RCN will develop the issue of care worker visas within lobbying plans other immigration measures.

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## Activities

We have:

- undertaken policy analysis of immigration rule changes set out in the Government's White Paper (May 2025)
- updated members on care worker visa changes via the RCN website
- hosted a webinar for internationally educated nursing (IEN) staff to explain the impact of immigration rule changes (August 2025)
- written to the Home Secretary, Shabana Mahmood, to raise concerns about these changes
- published a report outlining RCN concerns regarding proposed changes to indefinite leave to remain (ILR) (January 2026)
- written multiple letters to the Home Secretary expressing concern about the changes and calling for faster, not longer, routes to settlement
- briefed MPs on the impact of immigration changes on nursing staff ahead of a Westminster Hall debate and engaged with parliamentarians on this issue
- responded to an inquiry by the Home Affairs Select Committee into changes to Indefinite Leave to Remain, highlighting the failure of the proposals to recognise the value of internationally educated nursing staff (December 2025)
- responded to an inquiry by the Justice and Home Affairs Committee (January 2026)
- responded to the UK Government consultation on routes to settlement (February 2026)
- delivered webinars for RCN members outlining how the changes may affect them.

We are continuing to:

- identify opportunities to raise concerns about care worker visas with government, including mapping stakeholder positions to identify potential areas for joint advocacy
  - lobby on immigration issues affecting care workers, with a particular focus on indefinite leave to remain.
- 

## Impact

The RCN raises awareness of care worker rule changes amongst members and highlights the impact of the changes with UK government.

## 26. Impact of worker fatigue

<b>Submitting Entity/Proposer</b>	Mike Travis, Trade Union Committee
<b>Seconder</b>	Helen Williams, UK Health and Safety Reps Committee
<b>Institute/team alignment</b>	Employment relations
<b>Matter for discussion or Resolution?</b>	Resolution

### You said

That this meeting of Congress asks Council to lobby employers to take urgent action in response to the recent published research on the impact of worker fatigue

Changed from 'that this meeting of Congress asks Council to commission research into the impact of worker fatigue on patient care and the health, safety and welfare of our members'.

### Key message

Fatigue is a risk to health care staff and the patients they care for. It should be treated like any other health and safety risk, and measures should be put in place by employers to mitigate risks.

### Agreed scope of the project

This work will be delivered through business-as-usual activity via the NHS Staff Council's Health, Safety and Wellbeing (HSWG) Sub-Group, which has been commissioned by the Health Services Safety Investigations Body (HSSIB).

HSSIB has recommended that the NHS Staff Council, working through the HSWG sub-group, brings together fatigue science experts and other key stakeholders to develop and test a consensus statement defining fatigue for all health care staff. The group will work with existing networks to promote both the agreed definition and a shared understanding of the causes and impacts of fatigue. This will support greater consistency in how fatigue is understood across health care providers and improve understanding of the factors that influence staff fatigue and patient safety.

The NHS Staff Council is representative of all four UK countries. In addition, the UK Health and Safety Representatives Committee is being consulted as part of this work.

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## Activities

We have:

- agreed the delivery plan with the proposer
- confirmed that the work will be undertaken as business as usual through the NHS Staff Council's Health, Safety and Wellbeing Group (HSWG), incorporated into the HSWG workplan, with activity scheduled to commence in March 2026 and conclude in September 2026
- responded to the commission from the Health Services Safety Investigations Body (HSSIB) on behalf of the HSWG
- completed a project implementation document, which has been formally signed off by the NHS Staff Council Executive
- undertaken stakeholder mapping, identifying and engaging fatigue experts from outside the NHS Staff Council's HSWG.

We will undertake the following activity via the NHS Staff Council's HSWG:

- scoping and desktop research: April–May 2026
  - convene a stakeholder roundtable event to inform development of the statement, including fatigue experts, the Health and Safety Executive (HSE), and employer and trade union representatives: April 2026
  - draft the consensus statement: June–July 2026
  - test the statement with stakeholders: July–August 2026
  - refine the statement based on feedback: August 2026
  - review existing HSWG guidance on shift working to ensure alignment with the statement: August 2026
  - review HSWG workplace health and safety standards to ensure alignment: August 2026
  - publish and promote the statement, including through social media and a webinar: September 2026.
- 

## Impact

A consensus statement defining fatigue for all health care staff to promote the definition and a shared understanding of the causes and impacts of fatigue. This will help to support a consistent understanding of fatigue among health care providers and improve the understanding of factors that may impact on staff fatigue and patient safety.

## E27. Shortage of newly registered nurse roles

Submitting Entity/Proposer	Alex Knight, Derbyshire Branch, East Midlands Region
Seconder	n/a (as changed from a matter for discussion to a resolution at Congress)
Institute/team alignment	Policy / Education / Employment relations
Matter for discussion or Resolution?	Resolution

### You said

That this meeting of RCN Congress asks RCN Council to lobby the UK governments, NHS and independent social care providers to develop a sustainable strategy to address the shortage of roles for newly registered nurses.



Alex Knight, Derbyshire Branch, East Midlands Region

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## Key message

In 2025, graduating nursing students found the employment market significantly more challenging to access compared to previous years. This led to many students being unable to find employment in their local NHS trust and being faced with the prospect of relocation. This has led to increased anxiety and financial pressures for new graduates and is at odds with the high numbers of vacancies within the nursing workforce. This issue primarily manifested in England due to previous overreliance on international staff, however, we are keeping a watching briefing in the other countries.

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## Agreed scope of the project

Since Congress 2025, and following a student-led RCN campaign, the government announced a 'graduate guarantee' for newly registered nurses in England. In practice, this means that all members of the 2025 summer graduating cohort are guaranteed an offer of employment, subject to a successful application process. The RCN has supported engagement between students and regional Chief Nursing Officers (CNOs). However, emerging evidence indicates that funding constraints are limiting some trusts' ability to recruit, despite requests from NHS England. The RCN is currently collating detailed intelligence and continuing to press for accountability in the delivery of the graduate guarantee.

Work stemming from this Congress resolution will focus on future graduating cohorts, with the aim of preventing similar challenges in relation to job availability. This will include seeking opportunities to influence workforce planning and strategy, and developing interventions to reduce pressure on forthcoming cohorts of newly registered nurses.

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## Activities

We have:

- agreed the plan with the proposer
  - identified priority areas for policy analysis, including workforce and student cohort data, access to and suitability of relocation packages, and support for students facing relocation prior to graduation. This work will be published in 2026
  - been monitoring of data from students and recent graduates
  - liaised with key stakeholders, including PNC and the student committee, to assess potential issues emerging in 2026
  - identified opportunities to influence policy and implement targeted interventions
  - led national and regional online events for students and decision-makers to identify region-specific issues and actions, ensuring student voices are heard
  - re-promoted the NRN email address and web form to gather data on student employment outcomes in 2026 and signpost RCN career resources
  - worked with the student ambassador network to promote support and communicate our actions to students.
- 

## Impact

The RCN will be better placed to support upcoming graduating cohorts, and to monitor issues ahead of time. We will also help to prepare students before graduation about the prospect of relocation.

## E29. Protecting nursing specialties

<b>Submitting Entity/Proposer</b>	Helen Rees, Mental Health Forum
<b>Seconder</b>	n/a (item passed directly to Council)
<b>Institute/team alignment</b>	Nursing Workforce Academy
<b>Matter for discussion or Resolution?</b>	Resolution

### You said

That this meeting of Congress ask Council to work on production of a College position statement protecting nursing specialties.

### Key message

The RCN is planning member engagement to establish a position on what future pre-registration education should look like. Council felt this resolution would be covered by this engagement and the member voice related to nursing specialties would be listened to and considered in this work.

### Agreed scope of the project

To listen to UK members and wider stakeholders from the four fields on pre-registration registered nurse education.

### Activities

We have:

- met with the proposer, the PNC Lead, and wider Mental Health Forum committee members (the submitting entity) to discuss Council's steer and agree an engagement plan
- held follow-up meetings which identified the need to develop a position statement on the fields of nursing
- arranged meetings with forum representatives (field-specific) and relevant staff to co-develop a position statement. The draft will be shared with all forum Chairs prior to submission to PNC for consideration.

We will:

- ensure there are opportunities for pre-registration education across the four fields of nursing to be discussed as part of the forthcoming education consultation.

### Impact

The impact will be the ability to provide the current RCN position regarding protection of the fields of nursing and to inform the forthcoming education consultation.







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