



Royal College of Nursing  
Shaping nursing since 1916

ISSUE NO. 342 AUGUST 2016

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

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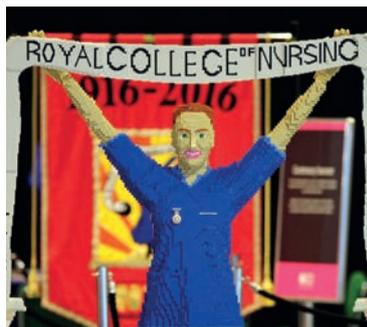
Cover image by Warren Page

Tickets for Two?



Watch the latest blockbuster for less when you buy your cinema tickets through RCNXtra. Save up to **55 per cent** at all the major chains including **Vue**, **Cineworld** and **Odeon**. You will also receive **WOWPoints** on your purchase which can be redeemed on site.

*Xtra benefits. Xtra easy.*  
Register now at [www.rcn.org.uk/xtra](http://www.rcn.org.uk/xtra)



## Lego nurse goes on display

A life-size Lego nurse, built over three days at RCN Congress, will go on display at the College's headquarters in London this month. The nurse, called Poppy Winkles after the third-year nursing student who entered a competition to name her, is made of approximately 35,000 bricks and measures in at an impressive 5' 7".

## Working longer

All members working in the NHS are asked to fill in an online survey about their plans for the future. The survey is part of a research project looking at issues surrounding NHS staff working later in life. Complete it at <http://tinyurl.com/h5q8ur2>

## ANP accreditation

The RCN is changing its criteria for accrediting advanced nurse practitioner (ANP) programmes. Applications for RCN accreditation will now only be considered if the programme leads to a full master's award. Those currently on RCN approved courses will not see their accreditation affected. RCN accreditation is available to all higher education institutions providing advanced practice education. Enquiries should be directed to [accreditation@rcn.org.uk](mailto:accreditation@rcn.org.uk) or call 020 7647 3716.

## Developing BME nursing talent

The RCN is responding to an independent review looking at the obstacles faced by black and minority ethnic (BME) individuals in the workplace.

The review aims to determine why people from BME backgrounds don't progress in their careers in the same way as their white counterparts. To share your views, visit <http://bit.ly/23HrWGX> and complete the online survey.

🕒 You can also send your comments to [diversity.team@rcn.org.uk](mailto:diversity.team@rcn.org.uk) by 11 August to contribute to the RCN's formal response.

## Sign petition to save nursing unit



Nursing staff are encouraged to sign a petition set up by RCN member Deborah Glover, calling for the nursing policy unit to be kept in the Department of Health. At RCN Congress, delegates criticised the Government decision to remove nursing expertise from the department without consultation. The proposals are part of a bid to reduce its running costs by 30 per cent over the next five years. The RCN has written to Health Secretary Jeremy Hunt seeking an urgent meeting to discuss the plans.

I urge you to sign this petition. It's your profession we're fighting for

Deborah Glover

🕒 Sign the petition at <https://petition.parliament.uk/petitions/132672>

## Centenary walk raises thousands



RCN supporters are raising money for the RCN Foundation in the College's centenary year by carrying a replica Florence Nightingale lamp 1,500 miles around the UK. So far walkers have raised more than £3,000. The RCNWalk100 started in Exeter and will finish in Belfast bypassing all RCN offices along the way. Email [walk100@rcn.org.uk](mailto:walk100@rcn.org.uk) to take part.



## Stuart and BJ to stay in Congress roles

Clinical nurse manager Stuart McKenzie will remain Chair of RCN Congress until the event closes in 2018 after being re-elected to the position unopposed.

Stuart, who has been an active member of the RCN for almost 20 years, has helped organise Congress since 2007, first as a member of the Agenda Committee, then as Vice Chair from 2010 and since 2014 as Chair of the event.

Alongside BJ Waltho, who has been re-elected unopposed to the position of Vice Chair of RCN Congress, he has overseen significant changes to the way the event is organised and structured, including a move away from a reliance on technology to manage debates at the event this year.

## Ready to revalidate

More than 50,000 registrants will submit their NMC revalidation evidence next month. Members who received their revalidation requests in July are reminded to ensure their fees are paid and all documents are submitted by the September deadline. Janet Davies, RCN Chief Executive, urged members not to be afraid of the process. "It will lead to increased professionalism and allow nurses to reflect on their achievements," she said. Helpful resources are available at [www.rcn.org.uk/revalidation](http://www.rcn.org.uk/revalidation)

# Student funding changes 'a job half-done'

Concessions have been made but concerns remain about the Government's untested plans



The Government has announced it will go ahead with student nurse funding reforms, despite huge opposition from the nursing community.

The RCN previously called for suspension of the changes, which include replacing student bursaries with loans in England. From August next year, trainee nurses will have to pay tuition fees of up to £9,000 per year.

RCN Chief Executive Janet Davies said that while the plans were an "untested gamble", the Government had at least listened to some of the College's concerns and made concessions in certain areas.

Postgraduate students starting in 2017/18 will still receive a bursary as a transitional arrangement and students with children will be given £1,000 to cover childcare costs. There will also be an exceptional hardship fund for those in serious financial difficulty.

Janet said: "Nurses will be dismayed that these plans will go ahead with no testing,

despite the overwhelming concerns they've raised. The Government has committed to monitoring and evaluating the impact of these changes but they remain a risk to the future supply of nurses. There is a worrying lack of clarity on clinical placements."

**“ These plans remain a risk to the future supply of nurses**

The Government has said Health Education England (HEE) will continue to commission the minimum number of placements for 2017/18, with universities able to create additional placements with their local trusts. It said more work was needed to design a future system for administering placements, with more details to be released in the autumn.

Janet added: "Although there have been some answers, this remains a job half-done and the RCN stands ready to work with the Government on the challenges ahead."

## RCN seeks security for EU nurses



The RCN is calling on the Government to secure the future of EU nurses as new figures reveal the extent to which the health service relies on them. More than 33,000 EU trained nurses are registered to work in the UK, which is more than the total number of nurses currently working in Wales.

It comes as research reveals the scale of challenges facing the NHS nursing workforce, with one in three nurses due to retire in the next 10 years and a lack of homegrown staff to fill the gap.

RCN Chief Executive Janet Davies said: "These are uncertain times for safe staffing in the health

service, and a lack of concrete assurances over the future of EU nursing staff working in the UK is making the situation worse."

A sustained lack of investment in training new nurses and years of pay restraint mean many experienced staff can't afford to remain in the profession. Changes to student funding and question marks over the UK's future relationship with the EU place even greater pressure on the NHS.

The RCN believes the Government must take urgent action to develop a coherent and sustainable workforce strategy for the future that recognises the critical contribution of overseas nurses as well as the pressing need to educate, recruit and retain homegrown nursing staff.

"Allowing this ambiguity about our NHS workforce to continue is a completely unfair way of treating people who are caring for our friends and families every single day," added Janet. "It may also prompt many to leave the UK, making it even harder for the NHS to provide safe patient care."



Allowing this ambiguity to continue is completely unfair

Find out more at <http://tinyurl.com/jslxttl>

## Seacole statue unveiled

A statue honouring the nurse Mary Seacole has been unveiled in the garden of St Thomas' Hospital, opposite the Houses of Parliament. The statue, created by sculptor Martin Jennings, honours the Jamaican-born nurse who cared for wounded British soldiers during the Crimean War. It is the first statue in the UK dedicated to a named black woman, and came to being following a 12-year fundraising campaign, supported by the RCN (see page 7).



### HAVE YOU BOOKED YOUR PLACE?

Come along to the RCN's International Centenary Conference on 22-23 November in London to:

1. Hear informative talks from world health leaders including those from the UN and WHO.
2. Attend a choice of more than 120 breakout sessions.
3. Accrue up to 14 hours of CPD time towards revalidation.
4. Discover best practice from around the world and inject this back into your workplace.
5. Expand your global contacts and celebrate our centenary.

Find out more at [www.rcn.org.uk/icc](http://www.rcn.org.uk/icc)

## A way forward for older people's care?

The family and friends of older people should be recruited and trained to look after them argued a leading dementia expert at the RCN Fellows 40th Anniversary Public Lecture last month. Professor June Andrews said this was the only affordable way forward to meet the health care needs of an ageing population. Families often "expect nurses to do everything" when their relatives are admitted to hospital but, stressed June, recovery would be improved and readmissions reduced if families were encouraged to help ensure their loved one was eating, drinking and taking medication.

## Race equality project commended

An RCN project to reduce the risk of discrimination against black and minority ethnic (BME) nursing staff facing disciplinary action has come runner-up in a national awards competition. The cultural ambassador programme – devised by the RCN in the West Midlands and delivered in partnership with Birmingham and Solihull Mental Health NHS Foundation Trust – was a finalist in the awards run by the Healthcare People Management Association. Through it, senior BME nurses were recruited, trained and assigned to investigation teams considering disciplinary allegations against BME staff.

## THE VIEW FROM HERE



**Juan Manuel Garcia Medina**  
Cardiac intensive care nurse

On the day of the EU referendum I couldn't stop thinking about the momentous decision that the British people were about to make.

I was nervous about the possible consequences for hundreds of people who, like me, were hard workers from the European Union trying to do their best every day.

Upon hearing the results, I felt like crying. I began to worry. Was I not welcome here? Did I need to leave at once? Would I be able to get a visa? Would I still receive a proper retirement pension?

I was nearly in tears when the lovely lady I was looking after assured me that everything would be fine. "You are still loved, you are still valued. If you were not here, I don't know who could have looked after me. You are doing a wonderful job."

Her kindness was enough to console me. I realised at that moment that although there were many uncertainties, both for British people and for those from overseas, I was truly valued. I feel confident that the Government will do its best to help the many overseas workers who play vital roles across the country.

Whatever happens next I will proudly continue delivering the highest quality nursing care.

<http://tinyurl.com/h5xkr2c>



## 'We mustn't repeat the mistakes of the past'

Financial improvement plans could see staff cut and patient care suffer

The RCN has expressed serious concerns about the announcement of new measures to improve the financial performance of NHS trusts by reducing spend on staff and suspending services.

NHS Improvement last month released a range of requirements health providers must adhere to, in order to cut the anticipated £550 million NHS deficit this year. It set out three specific areas where action is required to improve the financial position. The first of these was tackling growth of the NHS pay bill.

“These comments risk a return to the days before the Francis report”

Lara Carmona, RCN Associate Director of Policy, International and Parliamentary, said: "Some trusts are doing everything they can to keep care safe and some are having to pay over the odds to do so.

"Penalising them without tackling the root cause of the issue sends a very clear message that finance is more important than safety.



"Efforts to get finances under control should not include cuts to the workforce. Staff, patients and their families deserve better."

Earlier in the month NHS Improvement Chief Executive Jim Mackay was reported as saying that trusts exceeding the ratio of one nurse to every eight patients could be told it was unaffordable. Lara warned: "These comments risk a return to the days before the Francis report. We mustn't repeat the mistakes of the past, when staff could not properly care for patients because of financially driven cuts."

## WHAT I'M THINKING



**Helen**

Ophthalmic nurse practitioner

Nurses are naturally empathetic, so when we were told that pay was being frozen for the greater good, I think many of us said: "Yes OK, I can deal with that." Six years later this goodwill has been abused.

We are real people with mortgages, cars to run and families to look after. I've reduced my own hours to care for my children but pay remains so low that it's not worth returning full time – it won't cover childcare costs.

I knew nursing wouldn't make me rich but the satisfaction I got from helping sick and vulnerable people more than made up the gap. Now this gap is greater than ever and I despair when I hear of colleagues using payday loans or missing their child's birthday to work overtime – just to put food on the table.

I love nursing and the camaraderie between team members is great when the system works, but it's not working anymore – there aren't enough of us to make it work.

Nursing pay is a national disgrace and while this is the case I would not encourage anybody to join the profession – a profession that has given me so much. That's the greatest shame of all.

*The RCN's Nursing Counts campaign calls on the Government to give nursing staff a fair pay deal. Order your campaign pack at <http://tinyurl.com/grabtnv>*

[www.rcn.org.uk/nursingcounts](http://www.rcn.org.uk/nursingcounts)



## What you've been saying

### You're not your mistake

I lost my job as a nurse after making a mistake. Having experienced the disciplinary procedure, I am aware of the trauma it causes and want to support those going through the process. My aim is to gather like-minded people to discuss how we can learn from one other.

I believe nurses and junior doctors are under huge pressure. More mistakes will occur and I think we need to join forces to promote a more compassionate and supportive approach.

To that end I have set up a private support group entitled "You Are Not Your Mistake", which is attached to a Facebook group called "Tea and Empathy". I encourage anyone interested to join.

[Jemima Reynolds, by email](#)

### Patients deserve better

I agree that we need more clarity in the seven-day care debate (*RCN Bulletin* 340) and, as a nurse who has recently cared for terminally ill parents, I feel strongly about this issue.

My sisters and I chose to give my parents 24-hour care. Over an eight-month period we grew to dread weekends and bank holidays as most of the crises occurred then. The staff were excellent but there were so few of them at these times that my parents had to wait long periods for pain and nausea relief. The distress this caused my family and the nurses was unbearable.

It is an issue that urgently needs addressing as palliative care patients and their families deserve better.

[M. Lewis, by email](#)



### QUOTE OF THE MONTH

Very sad that nursing will lose the kind of people the profession needs - kind, caring and compassionate

*Member Sally Lambert in response to the Government's student funding plans*

### I'VE BEEN READING...



*All the Light We Cannot See* by Anthony Doerr won the Pulitzer Prize in 2015. It's a novel about a young, blind French girl and her father driven from Paris by the Nazis, and a brutalised young German orphan whose skill with radio sets is utilised by occupation forces. Both find themselves in St Malo, Brittany. This deeply moving story captures the extraordinary way that ordinary people find inner resources to survive. Much of my nursing career has been spent supporting those who face great adversity. I have a home near St Malo, so this wonderful book resonated deeply with me.

Vicki Matthews, RCN Neuroscience Forum member

### 3 THINGS I BELIEVE



1. One needs to be the difference that makes a difference.
2. An act of random kindness each day brings a smile to another's day.
3. You need to believe and love yourself to enable you to give ample respect to others.

Catriona Forsyth, Chair of the RCN UK Safety Reps Committee

### GOT SOMETHING TO SAY?

The *RCN Bulletin* team is always looking for members to contribute to the opinion pages. If you're keen to share your views, email [bulletin@rcn.org.uk](mailto:bulletin@rcn.org.uk)

## HOT TOPIC



It's been 30 years since the first episode of hospital drama *Casualty* aired. Back in 1986 the RCN complained to the BBC about the way nurses were portrayed.

### What do you think of how nursing is currently depicted on TV?

"I used to watch all the nurse-type programmes, but not anymore," says emergency nurse practitioner **Anne Shaw**. "I got sick of seeing us portrayed as second fiddle and mindless. The nurses in *ER* were good examples of the characters I like to see and then another American TV show, *Nurse Jackie*, came along; a good ethos, but a drug addict! No, I don't think so, so I can't bear to watch anymore."

Semi-retired nurse **Liz Horder** agrees: "The profession is not always shown in a way that earns the respect and

admiration of the public," she says. Infection control matron **Jenny Kirsch** thinks not all TV shows are bad, but that they shouldn't be considered a realistic version of nursing.

She says: "Most portrayals of nurses on TV are not reflective of real-life nursing. Some programmes are more believable than others, but they are made for entertainment purposes, so of course they are going to have unrealistic stories attached and will reflect the profession in a dramatic way."

Nursing student **Ruth Francis** says she would like to see TV shows featuring more about the role of nurses. "The focus of nurses portrayed on TV is nearly always on their personal life, and rarely on their profession as a nurse," she says. "I find this insulting as it leads to a lack of understanding as to what nurses actually do and that we are a profession in our own right."

## MESSAGE TO MEMBERS



**Janet Davies**  
RCN Chief Executive

The referendum result means this is a time of uncertainty for many, but particularly for our EU nursing staff working in health care settings across the UK.

Not only has the vote caused concern for job security and safe staffing, it has led to a worrying increase in reported hate crime, with attacks targeted at those who have moved here from overseas. To say this is unacceptable is an understatement and we wholeheartedly condemn any prejudice or abuse directed at nursing staff.

All our nurses are valuable, wherever they have originated from, and there is absolutely no place in nursing for racism or behaviours that make people feel that they are not part of the health care team. Nursing is a profession that heals and there should be zero tolerance of this sort of discrimination.

It is not yet clear what the long-term impact of the referendum result will be on the wider nursing profession but the RCN will continue to work closely with our European partners and make sure the voice of nursing is heard in future negotiations to leave the EU.

Whatever happens, we have time. Withdrawal from the EU is a complex operation. Be assured that the RCN will tirelessly press for fair treatment for all nurses and for a secure long-term supply of staff to protect patient safety.

<http://tinyurl.com/h5xkr2c>



## A fitting tribute

**Emeritus Professor of Nursing Elizabeth Anionwu** reflects on her involvement with the **Mary Seacole Memorial Statue Appeal**

For over a decade, I've been at the heart of an inspirational movement to honour Mary Seacole, the Jamaican-born nurse and Crimean War heroine. On 30 June, a memorial statue was finally erected to recognise her achievements.

The campaign took 12 years for two main reasons. Firstly, we had to raise £500,000, a difficult task in the aftermath of the recession, and secondly we needed to raise the public profile around Mary Seacole. Despite being named the Greatest Black Briton in a 2004 poll, surprisingly few people knew of her achievements.

Lord Soley, Chairman of the Mary Seacole Memorial Statue Appeal, worked incredibly hard to raise donations, whilst I wrote a history of her work for the RCN,



as well as setting up a successful social media campaign – **@seacolestatue** has almost 6,000 followers on Twitter!

I think the statue is highly significant. It demonstrates what perseverance can achieve and I hope this beautiful piece of art will be a fitting tribute to Mary's vital work. I also hope it will enable more nurses to be publically recognised, particularly from black and minority ethnic backgrounds. We live in a diverse society and their achievements deserve recognition.

# 8 FEATURES

## One year on...

Janet Davies talks candidly about the trials, tribulations and triumphs of her first year leading the world's largest nursing union and professional body

It's been a testing time for nursing. Since Janet Davies took over as Chief Executive of the RCN in August last year she's seen the Government announce plans to scrap student bursaries in England, introduce a new "nursing associate" role and remove the nursing policy unit from the Department of Health. And that's before you even consider wider issues that will impact on health care, such as Britain's decision to leave the European Union.

### So, 12 months on from taking up the post, is it what she expected?

"In some ways," Janet says. "The role has been what I anticipated it would be, but the things that have happened since taking up the position certainly aren't.

"There have been a lot of challenges and frustrations in the past year, but it's also confirmed to me that this is a great job and I made the right decision to apply for it."

### What's been the biggest challenge?

"Being taken seriously as an organisation and having our concerns listened to," says Janet. "It's frustrating when the Government makes decisions affecting nursing without consulting us – an organisation that represents so many nurses. And then trying to negotiate and build relationships after the event is difficult."

As the former Chief Executive of Mersey Regional Ambulance Service, Janet has considerable experience of managing organisations, but she says her current role has presented its own unique tests.

"It's very different because it's about working within the political system, which is something I'm having to learn a lot about," she says. "But I've been fortunate enough to have some really good support from people like nursing peer Baroness Emerton, who have been willing to share their skills."

She feels the RCN has made some progress in building political relationships, but adds: "There's still a lot of work to do to get the voice of nursing heard."

Despite the challenges, Janet also says there's much for the RCN and its members to be proud of. "There have been some great things, such as the safe staffing legislation in Wales, the decision to honour the recommendations of the NHS Pay Review Body in Northern Ireland and the move to an integrated model of care in Scotland. The way students in England have responded to the bursary decision and got involved in the debate has also been really encouraging."

### What are the RCN's priorities for the next few months?

"Our priority, as always, is our members," says Janet. In relation to the EU referendum, she says the immediate focus will be campaigning to ensure members from EU nations are not asked to leave, and also fighting any attempts to undermine health and safety legislation.

"But all our other work will continue," she adds. "We're not out of the woods in terms of attacks on unsocial hours, and we also need to make sure we're involved in shaping nursing education, both pre and post-registration."

She also reaffirms her belief that the RCN's greatest strength is its members. "They make the difference," she says. "Nursing is still the greatest profession in the world."



Nursing is still the greatest profession in the world



# Broad church

The work is varied, brings huge rewards and could be a great late-career option, says one of the UK's few parish nurses

Lesley Williams has a varied workload: counselling the bereaved, accompanying vulnerable patients to hospital appointments, visiting people, first aid training, health promotion and more.

But Lesley is not paid. As a parish nurse, she provides these services free to the community where she works, on the Moreton Hall estate, Bury St Edmunds.

There are only about 90 parish nurses in the UK and while some receive payment, others don't. Lesley is happy as a volunteer but says to attract new recruits the church needs to think about paying salaries. "Many nurses coming to the end of their long span of working don't want to give up all together, and could easily fit into parish nursing. It's very rewarding."

Lesley specialised in older people's care and worked for East Coast Community Health Care for 15 years, teaching student nurses. She became aware of the parish nurse role in 2008 when asked to mentor a colleague applying for a course in parish nursing. "As soon as I found out more I knew it was something I wanted to do in the future," she says.

## Qualified for the role

Parish nurses must complete a course and build a portfolio of work before becoming qualified for the role. They sign a contract with the minister of the church they are working with and must remain on the nursing register.



As soon as I found out more I knew it was something I wanted to do

Picture by Warren Page

The church pays their NMC registration fee and the covering insurance, and also has to comply with the required quality assurance.

Lesley left her NHS education facilitator post and came to Moreton Hall last year. She says: "Visiting is a great part of parish nursing, often in a person's home, but sometimes in hospital. A lot of the community are older and quite lonely. I never mind visiting people when it's mainly for companionship, but over a cup of tea I ask them health questions and can observe potential issues that need referring to a GP."

Lesley also works with people who are grieving. "District nurses want to be able to do these things, but they have time restraints."

She adds: "It's not about pushing Christianity but being an example of how it can help. If I

sense someone needs spiritual guidance, I ask if they would like me to say a prayer with them."

Lesley has started a service called Hospital Connections, seeing people before, during and after a hospital appointment and supporting them through the process. She is also involved in falls prevention work.

She was afraid she might miss the students when she left her previous job, but finds teaching is still part of her work. "Instead of thinking this is an academic situation, I have to think this is an elderly lady who doesn't understand something – this is where my teaching comes in."

She says: "I love the role of parish nurse and will be one until I stop nursing altogether. It's so diverse. You never know what's around the corner."

# 10 FEATURES

## Dedicated, passionate, inspirational

Daniel Allen speaks to two members recently awarded a prestigious RCN Fellowship for their exceptional contribution to nursing and health care



Fiona (far left on the front row) with health care staff at the Chitwan Spinal Injury Centre in Nepal



I used every single life skill and professional skill possible, learning along the way

On 12 January 2010, a devastating earthquake ripped through Haiti, the poorest country in the Western hemisphere. At least 220,000 people were killed, more than 300,000 injured and 1.5 million made homeless.

International rescue teams were quick to mobilise. A British nurse, Fiona Stephenson, was among them, arriving within a week of the 7.0-magnitude quake. It was her first time in a disaster zone. She was meant to be in Haiti for a fortnight. She stayed three years.

Fiona was also one of the first nurses with spinal cord injury experience to respond to the 2015 earthquake in Nepal where she helped co-ordinate volunteers and assisted with building health care capacity. She was back there

earlier this year and still returns regularly to Haiti to train, teach and mentor others.

Fiona's dedicated, passionate and inspirational work in helping people injured in natural disasters recently won her a prestigious RCN Fellowship. Fellowships are the highest award the RCN bestows. They are given to those whose contribution to nursing has been truly exceptional – as a leader, through research or practice, or as an innovator.

Fiona perhaps exemplifies the resourcefulness of nurses and what they can achieve even in the most extreme circumstances. Asked by the charity she was working with in Haiti to set up somewhere to treat spinal cord injuries, she had to think on her feet.

The challenges were huge and the devastation almost unimaginable. "People had lost family members, their homes, everything. But they'd also lost their health, their ability to walk. I thought, 'Someone's got to do something for these patients because if they don't get health care support they will surely die.'"

She focused at first on the basics, getting the infrastructure right – "setting up from ground zero". With a building and some basic equipment secured, she prioritised nutrition and access to safe water, then medication, dressings and intravenous fluids.

Local cooks, cleaners and nursing staff were supplemented by rotating teams of international health professionals. "I used every

single life skill and professional skill possible, learning along the way,” Fiona says. “We went from zero to 15 patients in a few days, then up to 25. It doesn’t sound much but these people were very sick, so it was really back to fundamentals, basic nursing care, creating a safe environment.”

### Commitment to the speciality

Typically for the nursing profession, Fiona is modest about her achievements in Haiti and Nepal, praising the team effort. But her Fellowship also acknowledges her overall commitment to her speciality. She is co-founder of the International Network of Spinal Cord Injury Nurses whose aim is to link staff worldwide and enhance the holistic care given to adults and children with spinal cord injury. She also represents nurses on the International Spinal Cord Society (ISCoS) education committee and has visited a number of low and middle income countries to share best practice relating to spinal cord injury and pressure ulcer prevention.

The work of Anne Harriss, also recognised in this year’s Fellowship awards, has a similarly global reach and philosophy. In this country, Anne is known as a driving force for occupational health (OH) nursing and education, and as a leader in her

field. But it was during a holiday 15 years ago that her influence began to stretch beyond the UK and Europe.

Staying in a remote safari lodge in Limpopo, a province in South Africa, she visited a social enterprise project, the Mogalakwena Craft Art Development Foundation, which offered employment opportunities to local women. Anne became friendly with Dr Elbé Coetsee, who ran the project, and offered to return the following year to deliver a teaching package focusing on HIV and Aids awareness as well as general health and safety, and first aid – accidents, especially involving children, were common in the community.

What started as a one-off, day-long event has evolved into an annual four-day course taught by Anne, medical, nursing and health visiting colleagues, and graduates from the OH programmes at London South Bank University where she is an associate professor.

Anne’s work as an OH specialist has long been recognised but the RCN Fellowship means a lot, she says. “It puts OH nursing on the map.” But until the Fellowship ceremony at RCN Congress this year she hadn’t really considered the value of the contribution she makes in South Africa. “I hadn’t

appreciated the extent of its impact. To me it’s just going out there, doing what we do and then leaving. But we get people to go back to their villages and teach others what we’ve taught them, so the first aid and health skills get disseminated.”

Those who attend the course – some of whom walk miles to get there – receive a certificate. And that piece of paper can change lives. Anne says: “It’s not like saying you’ve got GCSEs or a degree or anything but it recognises that people have done something amazing.”

With unemployment high in Limpopo and many people living on less than a pound a day finding work can be transformational. “If the course helps people to get jobs, and thus far it has helped a few, then that’s fantastic,” Anne says. “I find contributing to public health in Limpopo very gratifying and a great adjunct to my day job. It’s still education but it’s also hands-on public health.”



I find contributing to public health in Limpopo very gratifying and a great adjunct to my day job

## Fine fellows

RCN Fellowships were also awarded this year to Liz Bonner, Janice Gabriel, Professor Daniel Kelly and Professor Angela Wallace.

The first Fellowships were awarded in 1976. They are bestowed on RCN members who are registered nurses in the UK and who have made an exceptional contribution to the profession and/or health care. Honorary Fellowships are given to individuals who are not nurses.

Nominations can be submitted throughout the year and will be considered by the next scheduled meeting of the awards panel. This comprises the RCN President and Deputy President, the Chair and Vice Chair of Council, the Chief Executive and other Council members.

The nominator and three supporters are asked to write testimonials that demonstrate how the nominee has made a unique contribution to the advancement of nursing and/or health care through leadership, practice development or academic achievement, and the impact of that contribution on patient care.

More information and nomination forms can be found at [www.rcn.org.uk/renawards](http://www.rcn.org.uk/renawards)



Anne (fourth from the right on the second row) with fellow trainers and course delegates in Limpopo

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\*10% of new RCN customers paid £186 or less between 01/02/2016 to 30/04/2016. †10% of new RCN customers paid £99 or less for buildings and contents between 01/02/2016 to 30/04/2016. The Royal College of Nursing acts as an Introducer Appointed Representative to the Liverpool Victoria group of companies for General Insurance. 7573-2016

# Securing a second chance

The RCN's legal team stepped in to help a member who was not allowed to move on from the mistakes he'd made in his youth

Like many others, John\* had done some regrettable things when he was younger. He'd got in with the wrong crowd and had a string of shoplifting convictions that funded a drug habit. But then he turned his life around. He went into rehabilitation, got clean, and won awards for sharing his experiences and encouraging others not to make the same mistakes he had.

Life moved on and John decided to train as a mental health nurse. He fought to get a university place to fulfil his dream, always being completely honest about his past. He proved himself to be an exceptional student who, through his own life experiences, could show more empathy than most with his patients.

## Leaving the past behind

At the end of his training John had three job offers. He'd been open about his now distant past with all his potential employers, and was thrilled to accept a role as a registered mental health nurse in a local hospital. It seemed that John could finally leave his past behind.

That was until the Nursing and Midwifery Council (NMC) said he wasn't honest enough or of sufficient character to be registered as a nurse. It looked like John was going to be continually punished for mistakes he'd made more than a decade ago.

But there was a glimmer of hope. His new employer told him he could come back to them if he could get the NMC to let him on the register. He also had the



If someone places obstacles in your way, keep plugging away

Find out more about RCN legal services and advice at [www.rcn.org.uk/get-help](http://www.rcn.org.uk/get-help)

support of his university and the RCN, and if his past had shown anything, it had proved he wasn't the type to give up easily.

"Mental health nursing today is based on recovery, and for my registration to be declined; it suggested the NMC believed recovery isn't possible and that I wasn't rehabilitated," John says. "But I am a totally different person to the one I was."

## Don't give up

With backing from the RCN's legal team and a barrister arguing his case at the NMC appeal hearing, John entered court armed with numerous glowing references from his university and workplace mentors. The RCN won the appeal and four days later John was re-interviewed for his job as a registered nurse and has since started working in the role he long wished for.

The fact that the case had to happen though is concerning.

The university checks were stringent and as John points out, his employer was willing to employ him as a health care assistant, while he awaited an NMC decision on his registration, so they were also convinced that he was suitable to work in that environment.

"I've got so much value for money for my membership. I couldn't have afforded to employ lawyers and a barrister myself, and they really were brilliant," John says.

"If you find yourself in a situation where someone places obstacles in the way of something you really want to do, keep plugging away."

Emma Davies, from the RCN's legal team, says John's experiences have put him in a unique position to be a valuable employee in any organisation. "We have also raised this issue with the NMC to seek clarification on processes," she adds.

*\*The member's name has been changed*

## RCN signs psychotropic drug pledge

The RCN has supported a pledge to tackle the over-prescribing of psychotropic drugs to people with learning disabilities

Approximately 35,000 adults with a learning disability are being prescribed an antipsychotic, an antidepressant or both without appropriate clinical justification.

Long-term use of these drugs can lead to significant weight gain, organ failure and, in some cases, death.

The Stopping Over-Medication of People with a Learning Disability (STOMPLD) pledge was signed by the Royal Colleges of Nursing, Psychiatrists and GPs, as well as the Royal Pharmaceutical Society, the British Psychological Society and NHS England.

It commits the signatories to “work together, and with people with a learning disability and their loved ones, to take real and measurable steps to stop over-medication”.

Ann Norman, Professional Lead for Learning Disabilities, said: “The RCN has repeatedly highlighted that people with learning disabilities are still being failed by the health care system. “It is simply not acceptable that people with a learning disability are being prescribed anti-psychotic drugs without appropriate clinical justification.

“This pledge should be an opportunity for health and medical professionals to work more closely together to provide a more person-centred approach to the care of people with learning disabilities, to give them a better quality of life. They deserve so much better from the health service.”

New guidance to support prescribing health care professionals review the medications of people with a



learning disability was launched alongside the pledge. It provides a framework to implement planned, supervised dose reduction and stopping of inappropriate psychotropic drugs.

🔗 Find out more and download the guidance from <http://tinyurl.com/LDpledge>

## Member designs heart device manual

An RCN member has developed guidance for nurses working in heart surgery to help improve patient safety and prevent “never events”. A theatre nurse for 25 years, cardiac theatre sister Minija Joseph found there was no training in place for identifying specific valves and equipment used in heart operations.

She put together a manual mainly for her own use to help her in her job, outlining the many different devices used in heart surgery. Through word of mouth, news



Patient safety is what is most important

of Minija’s document spread and with the help of heart valve manufacturing companies, her guidance was produced.

“I am passionate about patient safety and quality in theatre,” said Minija, who works at King’s College Hospital in London. “There’s a lot of guidance available for surgeons, but not much for nurses in this field. There is no specific manual for nurses who specialise in cardiac theatre and it’s hard to remember the many hundreds of

cardiac devices available and the preparation involved. There is lots to learn, even for me after all these years. I discover something new all the time.”

The document took Minija six months to develop and will eventually be sent to cardiac centres around the world. “This is very specific to my specialty and will be useful for all cardiac theatre nurses, especially newly qualified nurses and trainee doctors. Patient safety is what is most important.”

## Pharmaceutical payments published

Payments health care professionals receive from pharmaceutical companies are now being published on an open online database. This will enable the public, clinicians and journalists to find out who is receiving payments and from which companies. The list of payments dates back to 1 January 2015.

Many professional conferences are sponsored by pharmaceutical companies

and some specialist nursing posts are funded by the industry. Examples of possible payments include conference speakers' fees, funding to attend a conference and the provision of professional advice.

The data is accessible at [www.disclosureuk.org.uk](http://www.disclosureuk.org.uk) and is being disclosed as a requirement of the Association of the British Pharmaceutical Industry code of practice.

## Survey to shape support for victims

Members are being encouraged to complete a survey about their knowledge, attitude and skills related to domestic violence and its management. Responses will help determine the training needs of nurses and midwives and assist the development of appropriate resources.

The RCN is revising its online guidance on supporting victims of domestic violence. From next year, a pocket guide will be available to help nursing staff recognise the signs of abuse and refer victims on to appropriate services. Complete the survey at <http://tinyurl.com/h9x4f33>



## A first for a nurse

RCN Women's Health Forum Chair Debby Holloway is the first nurse to be awarded a fellowship by the Royal College of Obstetricians and Gynaecologists.

Nurse consultant Debby said: "I was really pleased and surprised to be given the accolade. It's nice to be recognised for the work I've done in women's health in this way."

The Women's Health Forum is working on a number of projects including the creation of fact cards for nurses working with patients going through the menopause. Join the forum at [www.rcn.org.uk/forums](http://www.rcn.org.uk/forums)

## Find your forum on Facebook

Did you know that 18 RCN forums and networks are now on Facebook, and this number is increasing? Forum members are encouraged to join these new Facebook groups to hear important updates about nursing practice. Gastrointestinal Forum member Kathy Whayman said: "We started the group in May and already have more than 600 members. It's great for sharing news and meeting like-minded professionals in a friendly and welcoming community." Check your RCN emails and the forum pages of the RCN website for more information. If you're interested in finding out more email [andrew.greasley@rcn.org.uk](mailto:andrew.greasley@rcn.org.uk)

## THE VIEW FROM HERE



**Hannah Andrews**  
Mental health nurse

My first placement in mental health made me quickly realise that work-related violence was commonplace in my chosen field. I could either run a mile or learn to deal with it. I chose the latter.

Over the years, I've been called every name under the sun and experienced some very colourful language. I have also been physically assaulted and hurt during restraint, all in the name of doing my job.

How do I deal with this? I cope by recalling all the amazing, positive experiences I've had as a nurse and thankfully there are far more positives.

I talk to peers and this reassures me that I am not the only target. I listen to their coping strategies. Talking about how I'm feeling helps me remember why I do the job I love.

It's important to try and take a compassionate stance, and understand that when patients or relatives are being aggressive, it's normally because they are unwell or distressed. They also need our help.

Ultimately, I use my own resilience. Thick-skinned or not, I love being a nurse and even during the difficult times, I wouldn't choose to do anything else.

*Employers have a legal duty to assess and reduce the risks of workplace violence. For more information, see the RCN's Healthy Workplace, Healthy You campaign.*

<http://bit.ly/29Jujbv>



## Child health

# RCN school nurses conference

**25 August**  
Thistle Marble Arch  
London

This event will enable members to meet other like-minded nurses and remain professionally up to date. All members working in schools and educational settings, including those from academies, independent, free and boarding schools are encouraged to attend.

Delegates will develop their professional and clinical practice knowledge and learn about the RCN's Children and Young People Staying Healthy Forum. Members will also gain an understanding of how school nurses can get involved in political influencing and

shaping future health and social care policy and practice.

Hear from some of the most powerful voices in school nursing, including Sangeet Bhullar, Executive Director of WISE KIDS, and Sophie Wood, Head of Participation at the National Children's Bureau.

Fiona Smith, Professional Lead for Children and Young People's Nursing, said: "School nurses often feel quite isolated. This annual conference provides an ideal opportunity for school nurses in both mainstream and independent schools to network, keep up to date and learn about new initiatives and developments – all of which are vital to meet NMC revalidation requirements."

📍 Visit [www.rcn.org.uk/events](http://www.rcn.org.uk/events) and search "school" to find out more.



## Workplace bullying

# Learning to cope

**August-November**  
Various locations  
Scotland

Last year, RCN Direct received more than 3,700 calls from members concerned about bullying. Are you able to recognise the signs that you're being bullied? Do you know what strategies you can use to help cope?

These free half-day workshops, being held on a range of dates and locations across Scotland, will cover the signs of bullying and the tools and techniques members can use to deal with such behaviour.

📍 Visit <http://tinyurl.com/RCN-bullying>

## Refresher training

# Travel health roadshows

**September-November**  
Various locations  
England

Travel health is a fast-moving field of practice and members may find it useful to attend annual refresher sessions. Jane Chiodini, Director of Travel Health Training, has linked with the RCN to provide education for health care professionals practising travel medicine.

These workshops will offer members an update on topics including vaccines, malaria, professional issues and the latest developments in travel health. Members will also have the opportunity



to network with friends, colleagues and exhibitors. Workshops will be held in London, Newcastle, Cardiff, Leicester and Leeds.

📍 Go to [www.rcn.org.uk/events](http://www.rcn.org.uk/events) and search for "travel".

## Nursing in challenging places

Nurses must develop the necessary skills to enable them to work in developing countries and conflict zones, writes Erin Dean

Josie Gilday has worked in some of the world's most challenging places, including Haiti after the devastating earthquake and civil war-plagued Ivory Coast.

The specialist HIV nurse has been on a six-month whistle-stop tour of Ethiopia, Myanmar and the Democratic Republic of Congo, helping improve medicine management and supply. She carried out placements and implemented a training programme for health care staff in South Sudan for charity Médecins Sans Frontières (MSF).

“You see what you can do with next to nothing,” says Josie. “My team makes changes quickly. On my first mission to South Sudan, I ran an inpatient therapeutic feeding centre and a centre treating people with infectious disease kala-azar. On arrival, I found the nursing station was outside the centre, away from the patients, so I changed it.”

### The necessary skills

Many nurses dream of working in conflict zones and developing countries, but charities stress that applicants ensure they develop the necessary skills. MSF's staff must have significant experience, and a diploma in tropical nursing or relevant nursing experience in a tropical environment.

Nurses' work overseas will include:

- providing primary health care
- setting up and guiding health care posts



- operating feeding centres, clinics and hospitals
- implementing vaccination campaigns in the community
- organising mother and child health programmes.

MSF Human Resources Officer Stella Qendro says nurses working in infectious diseases, obstetrics, intensive and emergency care, nutrition, paediatrics and theatres are particularly needed. French speakers have an advantage, too, and management experience is essential.

British Red Cross international recruiter Sophie Da Silva adds: “We request at least three years' experience post-registration as nurses need to hit the ground running in the field.”

Ms Gilday plans to work overseas for MSF again. “It's the best job in the world. When I'm away, I wake up and wonder what will happen that day – it could be anything.”



I wake up and wonder what will happen that day – it could be anything

### Opportunities

- Médecins Sans Frontières recruits nurses for developing countries in or near conflict zones for nine to 12-month projects. Visit [www.msf.org](http://www.msf.org)
- Voluntary Service Overseas places nurses in developing countries on one to two-year projects. Visit [www.vsointernational.org](http://www.vsointernational.org)
- British Red Cross recruits nurses to work in dangerous places. Visit [www.redcross.org.uk](http://www.redcross.org.uk)
- UK-MED runs international emergency registers for trauma, medical and public health staff for UK NHS doctors and nurses volunteering at short notice. Visit [www.uk-med.org](http://www.uk-med.org)
- Organisations such as Projects Abroad and Work the World arrange student nurse placements in developing countries. Visit [www.projects-abroad.co.uk](http://www.projects-abroad.co.uk) and [www.worktheworld.co.uk](http://www.worktheworld.co.uk)