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LEADING THE WAY

LEARNING DISABILITIES P9

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

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Raising funds for Bangladesh

RCN President Cecilia Anim has raised more than £5,400 for the RCN Foundation to help fund two training places for student nurses in Bangladesh. Since being re-elected, she has chosen to continue fundraising for this project.

“A heartfelt thank you to everyone who has supported my fundraising efforts so far,” Cecilia said. “I want to carry on supporting women from some of the poorest backgrounds as this will give them opportunity to develop a career. Once trained, these women will provide care in rural and urban areas, making a lasting difference to those communities.”

To support, please visit www.justgiving.com/fundraising/renpresident and read more at www.rcnfoundation.org.uk

Skin winners

The five lucky winners of last month's draw to win a copy of *Psyche on the Skin* by Sarah Chaney have been randomly selected and notified. We had a massive response – thank you for your interest. For those who missed out, publisher Reaktion is offering a 20% discount to RCN members.

To buy the book for £16, go to www.reaktionbooks.co.uk, find the *Psyche on the Skin* page and enter the promotion code RCN20 at the checkout.

‘Inadequate’ courses for OH nurses

A survey of 1,400 occupational health (OH) nurses shows almost half believe the content of OH nursing courses is inadequate. The findings, published in *Occupational Health [at Work]*, suggest the system for training OH nurses needs a major overhaul. Helen Donovan, RCN Professional Lead for Public Health, said: “The RCN has developed a document that sets out a recommended approach for assessing and refreshing OH nursing courses to ensure high quality OH services.”

🔗 Read more about educating OH nurses on page 14. And visit www.rcn.org.uk/ohnursing for more information.

New leader for Eastern region

Teresa Budrey has been appointed as Director of RCN Eastern region. Teresa started her career as a health care assistant before qualifying as a nurse in 1989. She spent 20 years in NHS learning disabilities nursing services before joining the RCN in 2003 as an officer in the Eastern region. She then became a senior officer in the RCN's South East office before returning to the Eastern region last year as operational manager.



I am delighted to lead our team in the Eastern region

Teresa Budrey

Glasgow plans ‘make no sense’



RCN Scotland says that cost-cutting measures proposed for Glasgow's community health and care services for older people threaten the delivery of care. Glasgow City's Integration Joint Board is looking to save £450,000 by “releasing” posts. Theresa Fyffe, RCN Scotland Director, said: “Cutting the number of nursing staff on the ground who deliver services to older people makes no sense whatsoever. RCN Scotland will be keeping up the pressure to get the proposals stopped.”

Ballooning in Barbados?



Wherever your holiday takes you, start your search on **RCNXtra**. We search trusted travel sites including **Thomas Cook**, **Expedia** and **Booking.com** to find the best price for your trip. Visit between **13 and 19 March** to receive additional discounts and **WOWPoints** as you shop.

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Super-nurses set to celebrate

Spring is in the air, which means Nurses' Day is drawing closer.

Held on 12 May, the anniversary of Florence Nightingale's birth, this annual event is a chance to celebrate the hard work and dedication of nursing staff around the world. The RCN's theme for this year's Nurses' Day is nursing superheroes, in recognition of the extraordinary work nurses do day in, day out.

See the Nurses' Day website (www.rcn.org.uk/nursesday) for more information, including how to order your Nurses' Day party pack, and tweet using the hashtag [#nurseheroes](https://twitter.com/nurseheroes)

Chance for change

A £95 million boost for the education of health care professionals in Wales represents a chance to "change the nursing landscape", the RCN has said. The College welcomed in particular the Welsh Government's investment in education for district, community psychiatric and practice nurses.

Peter Meredith-Smith, Associate Director (Employment Relations) for RCN Wales, said: The priority now is for education providers across Wales and the NHS in Wales to ensure that this investment is well used to improve the quality and sustainability of services."

RCN Congress 2017: the build-up begins

With just over two months to go until RCN Congress begins in Liverpool preparations are in full swing



On 13 May thousands of nursing staff from across the UK will gather at the Liverpool Arena and Convention Centre for four days of debate, discussion and development – and booking for the event is now open.

Free to attend for RCN members and non-members alike, Congress is a highlight of the profession's year, with staff coming together to learn, develop and share nursing practice, and to influence UK-wide nursing and health policy.

Lindsay Cardwell, an assistant practitioner and member of the RCN Health Practitioner Committee, captures why you should come to Congress if you can: "It's an amazing buzz – it brings the whole nursing family together. Come along, you'll get so much out of it."

The centrepiece of the week is the debates programme, where delegates can share their views on a whole range of topics affecting the nursing profession. Last year's agenda took in such diverse themes

as the effects of Brexit on health care, mandatory CPR lessons in schools and the implications of seven-day NHS services.

This year's programme is due to be announced in the coming days, so keep an eye on www.rcn.org.uk/congress for all the latest developments and the full agenda.

“ Congress brings the whole nursing family together

And if there's an urgent issue you feel warrants discussion, you can submit emergency agenda items up to and during Congress itself – again, details are on the Congress website.

Alongside the debates, there's also a full programme of fringe events, an exhibition featuring employers, universities and recruitment agencies, and prominent keynote speakers.

See Message to Members, page 7.

RCN maintains pay pressure



Staff should not have to fund the NHS deficit from their own pay

The RCN is keeping up the pressure on politicians in the run up to the budget and the NHS pay announcement expected this month.

Nursing staff are being encouraged to keep the issue of pay foremost in politicians' minds through social media or by contacting MPs directly.

In his response to the January parliamentary debate on nursing pay, triggered by an RCN member's petition, Health Minister Philip Dunne hinted that he could not lift pay restraint because the country

was not in "normal economic times". He cited the pressure of rising demand for NHS services but the RCN says his argument that money for pay strips funding from services must be challenged.

"Nursing staff are entitled to be valued for caring for their patients and rewarded appropriately," said Josie Irwin, RCN Head of Employment Relations. "We must force politicians to acknowledge the hypocrisy of previously ignoring the independent NHS Pay Review Body, while agreeing with recommendations on MPs' pay."

"Staff should not have to fund the NHS deficit from their own pay," Josie added. "Mr Dunne said that staff working in new and creative ways was essential to the long-term sustainability of the NHS. But for staff to give their best and be creative, they need to feel valued and receive fair pay."

Members joined an RCN parliamentary lobby ahead of last month's debate (pictured). In the debate itself, MPs shared nurses' stories and asked how staff can be expected to deliver high-quality care while facing economic hardship.

👉 To add your voice to the RCN's pay campaign, go to www.rcn.org.uk/nursingcounts

Deaths 'linked to cuts'

The stark human consequences of serious underfunding of health and care services is demonstrated by research into the causes of excess deaths, the RCN has said. Analysis published in the *Journal of the Royal Society of Medicine* suggests that cuts to health and social care were linked to 30,000 deaths in 2015. The RCN warned that without adequate funding from the Government, the situation would continue to deteriorate.

Call for immediate action on student funding

Falling numbers of applicants for nursing courses will exacerbate an already unsustainable staffing situation, the RCN has said. UCAS figures show 10,000 fewer applicants this year compared to last, following the Government's decision to charge fees to nursing students in England. RCN Chief Executive Janet Davies said: "With 24,000 nursing vacancies in the UK, the Government needs to take immediate action by reinstating student funding."



STPs 'will fail without funding'

The RCN has warned that proposals to join up services and deliver care closer to home will fail without proper funding. Sustainability and transformation plans are meant to solve problems in England's health and care system but the British Medical Association said that at least £9.5 million would be needed to deliver them. The RCN called on the Government to use this month's budget to address the continuing funding crisis. See page 8.

Court of Appeal success

As a result of the RCN's persistence in a Court of Appeal case involving a member, many applicants for NHS permanent injury benefits may now be granted them when previously they would have been refused. "This is an excellent result," said Kate Matravers, RCN Legal Officer. "Many more members may now be granted permanent injury benefits."

For information about legal advice and representation, go to www.rcn.org.uk/membership/legal-help

WHAT I'M THINKING



Jess Davidson

Chair, RCN Nursing in Justice and Forensic Nursing Forum

The first response I had to the news that prison suicides are the highest since records began in 1978 is deep sorrow for those who committed suicide and for their grieving families: 119 people died in prisons in England and Wales last year as a result of suicide.

What's the cause? Is it because of the increase in prisoner population? Or because there are fewer staff? A reduction in staff numbers causes greater isolation for prisoners as it seriously curtails activity and occupation.

There has also been a rise in violent incidents in prisons. And a toxic mixture of boredom, loneliness and physical inactivity allows people to dwell on hopelessness and powerlessness.

As professionals we recognise the complex health and care needs of people in prison. The solution lies in a shift in culture that allows for recovery and rejuvenation. That may sound naïve but it comes from experience.

A good place to start is by building on what we have already and supporting the expertise and experience of all staff in prisons. They must be allowed to work together to safeguard this most vulnerable of patient groups.

www.rcn.org.uk/forums



Pay rise agreed for members at independent provider

Agreement reached but campaign for real living wage continues

RCN members working for Four Seasons Health Care (FSHC) have voted to accept an improved pay offer. The ballot came following RCN negotiations. The offer included a rise of between 1% and 1.5% for staff with more than six months' service who have not received a pay increase since April 2016, to be backdated to October. FSHC also confirmed that time spent working in handovers will be paid, as will management-approved worked breaks and training.

“ The RCN continues to campaign for the real living wage

Negotiations were complicated by the additional cost of implementing the national living wage in April, which is currently being phased in, and severe funding problems in the social care sector.

Clare Jacobs, RCN lead negotiator for FSHC, said: "We are pleased to have reached this agreement. However, the RCN continues to campaign for the real living wage to underpin all basic pay in health and social care as the absolute minimum and strive for better pay,



terms and working conditions for all our members."

The real living wage is independently calculated each year based on what employees and their families need to live. Visit www.livingwage.org.uk to find out more about a "fair day's wage".

The RCN has also negotiated an improved pay offer for members at Brighterkind. Results of their ballot were due as *RCN Bulletin* went to press. Visit www.rcn.org.uk

ARE YOUR MEMBERSHIP DETAILS UP TO DATE?

CHECK ONLINE AT MYRCN, CALL 0345 7726 100, OR WRITE TO RCN MEMBERSHIP TEAM, COPSE WALK, CARDIFF GATE BUSINESS PARK, CARDIFF CF23 8XG.

THE VIEW FROM HERE



Dr Jane Brooks
Senior Lecturer,
University of Manchester

On 8 March, Dr Brooks will be giving a talk exploring the history of health visiting as part of the RCN Library and Heritage Centre's exhibition on the history of public health.

I first became interested in the history of health visiting when, some years ago, I was researching university education for nurses in the inter-war period.

Although there were debates about whether nurses needed to attend university to prepare them for senior positions in hospitals, there was a general acceptance that a university education was needed for public health work.

The belief that supporting women in their homes to create a healthy environment required a different sort of education culminated in the course known as the "Manchester Scheme" – the diploma and eventually the first degree in nursing in England, based in community nursing. Arguably the reason for this more liberal and critical education, rather than procedural training, was due to the complexity of the health visitor's role. She was to enter the homes of the public, and advise and support mothers in their children's upbringing, while at the same time being obligated to the medical officer of health to report "problem families".

Such an apparently dichotomous role would both concentrate the minds of the early 20th-century health visitor and require complete tact and the preservation of trust.

<http://tinyurl.com/zo7m471>



What you've been saying

Lymphoedema in Wales

In Wales we're working towards early recognition and prompt management of lymphoedema (*RCN Bulletin*, February). We've developed and deliver Agored Cymru-accredited work-based units on lymphoedema and chronic oedema management. We were given a *Journal of Wound Care* Award in 2016 for this work. I am also leading the "On the Ground Educator" programme, supported by Welsh Government health technology funding and created because community nurses could not be released for education sessions. Our aim is to improve the management of chronic oedema and significantly improve the efficiency of prescribing dressings, bandages and compression garments. The initial results are promising.

Karen Morgan, National Lymphoedema Education and Research Specialist, Welsh Government

Brutal bullies

Thank you so much for your piece on bullying (*RCN Bulletin*, February). As a student nurse, I have faced some horrible treatment from fellow students. I can't understand why people would be cruel to others. If they are like that with their peers, what are they like with their patients?

Anonymous, by email

Full circle?

Nursing associates – the new enrolled nurse (*RCN Bulletin*, January)? They say if you wait 10 years all will change back again. Why was so much pressure put on enrolled nurse colleagues to become first-level nurses just to reinvent them again?

G Robinson, by email



QUOTE OF THE MONTH

We have a very good plan.

Health Secretary Jeremy Hunt on the BBC, responding to questions about NHS pressures.

I'VE BEEN READING...



As a student nurse I certainly didn't concentrate on research. However, I've now started working on my MSc research module and my perception has changed.

Reading research books has helped me appreciate research articles as I am now able to understand which are of value and those which may raise further questions or even the need for further research. Our practice is based on sound evidence so it's worthwhile revisiting research. You could be surprised how you change your thoughts.

Nicola Milligan, specialist health visitor

3 THINGS I BELIEVE



1. We need to think more about the emotional wellbeing of patients.
2. Nursing staff need to learn to be more resilient, to prevent burnout.
3. We need to showcase and celebrate the very high quality care in many nursing and care homes.

Fiona Cassells, health care and clinical teacher

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

HOT TOPIC



UCAS figures show that nearly 10,000 fewer people have chosen to study nursing in England compared to last year. The RCN is calling on the Government to take immediate action by reinstating student funding and investing in student education. RCN members have been sharing their views.

Mark Colley said: "Most students enter nursing from their late twenties onwards when they feel a vocation in life to help the needy and have life skills to offer. But they also need to support themselves and a family."

Rosemary Gosden agreed. "The removal of student bursaries prevents those older students who have invaluable life experience applying as many of these people have loans already and families to support,"

she said. "It replaces the workforce with school leavers who, although keen, lack essential life experience which is so vital in nursing and midwifery. We need to bring back full bursaries."

Claire Ogle said career progression should be considered, too. "I'm a health care assistant and I would love to do my nursing. However, I'm expected to leave my job and go to university which I could not afford as I need to still work."

A retired SRN said: "It's time that the system reverted to the training that was being given when the NHS began. Procedures were learned on the job but essentially we learned people skills at the start. You don't learn that at university."

MESSAGE TO MEMBERS



Janet Davies
RCN Chief Executive

In the face of the hardest winter the NHS has ever known, the last few months have presented massive challenges for nursing staff across the service. It would be comforting to think we are now through the worst but sadly, as we all know, there's no end in sight: "winter pressures" have now become year-round pressures.

So there will be plenty more battles ahead but as spring approaches we can at least begin to look forward and think about that key annual event that always manages to energise and unite – RCN Congress.

It's difficult to capture the amazing transformative experience that members go through at Congress. They arrive feeling weary – I can see the fatigue in their faces. Some are demoralised, some have fallen out of love with their profession. But by the week's end, they're renewed. How does it happen?

For me, it's something about the passion Congress generates. Instead of having to struggle all the time – battling with too few resources and insufficient staff – those who attend suddenly find they're all pushing in the same direction. Yes, there are arguments and fierce debates but there's a shared goal – better nursing, better care.

The magic of Congress means members return to their workplaces restored. It's a wonderful feeling and I really do urge you to come and share it.

www.rcn.org.uk/congress



Innovative, self-aware, professional

Kathryn Yates, RCN Professional Lead for Primary and Community Care, on workplace pressures outside hospital

In the year I've been working for the RCN, I've been determined to highlight the amazing work of members in the field of primary and community care. Hospitals are constantly hitting the headlines but the reality is primary and community staff are feeling the pressure, too. Hospitals need to discharge patients promptly and the impact this has on nursing staff working in primary and community care settings cannot be overestimated.

But nursing staff are resilient. Many members get in touch with me because they want support and information to help them make the decisions necessary to enable change, support new ways of working and improve care. The members I've spoken to are self-aware, innovative and professional. They ensure services are delivered.



Looking to the future, nursing students need to be made more aware of and have access to primary and community care practice placements. This is essential to help them make informed career pathway choices. We must share our experiences and raise our profile to safeguard the future.

If you are working in primary or community care and have a story to share, email bulletin@rcn.org.uk

8 FEATURES

STPs: sense or smokescreen?

Plans to better integrate services across England will deliver improved care locally, health chiefs insist. Not without proper funding, says the RCN



Will STPs result in cuts to community services?

What are STPs?

Sustainability and transformation plans. In 44 areas across England, the NHS and local councils have come together to develop proposals aimed at improving health and care – and saving money. STPs are, says the Government, built around the needs of the local population.

Aren't health services already built around local need?

Kind of. But NHS England wants to make “common-sense” alterations to the way health services have worked in the past. And there's undoubtedly a need to address challenges such as an ageing population. Changes are certainly needed.

Such as?

Easier access to GPs; more community services; speeding up cancer diagnoses.

Sounds promising. Any concerns?

Yes, lots. Chief among them the fear that STPs are a smokescreen for cuts to hospital beds and community services. The RCN backs the aspiration of more integrated care but says that if reducing costs is their main purpose, STPs will not be able to meet those local health needs.

Because...?

Because the NHS and social care are both in crisis and seriously underfunded – and the RCN will not support plans that compromise access to safe, dignified, compassionate care. Tom Sandford, RCN Director of England, says: “While the aspirations of STPs may be admirable, the lack of any financial commitment from the Government is their Achilles heel.” The British Medical Association

says STPs will require at least £9.5 billion to be delivered.

Even so, aren't STPs really about bureaucracy rather than frontline care?

Wrong. Ways of working are sure to change.

How exactly?

Hard to be certain at the moment, so it's vital that nursing staff seek to understand and influence proposed changes locally. But with the drive to treat patients “closer to home”, it's safe to assume that some nursing roles will change, and employers may change too – from NHS to local authority, for example. Every provider of NHS care in England is going to be affected – which is why the College expects each STP to involve RCN officers and local nursing staff in the development of clinical and workforce implementation plans – and full and transparent consultation with the public.

Nursing redundancies?

Can't say until more detail is provided but it's not unreasonable to assume that funding pressures may see nursing posts downgraded and nationally agreed pay scales coming under threat. That could mean unsafe staffing levels and skill mix.

I need to know more. Where do I start?

With the RCN website: www.rcn.org.uk/stps NHS England has a page of FAQs (www.england.nhs.uk/stps/faqs) and a search for “STPs” on the King's Fund website will bring up lots of helpful information.



Although the aspirations of STPs may be admirable, the lack of any financial commitment is their Achilles heel

Learning from the best

An RCN member in Eastern region has taken on a key role in ensuring the needs of people with learning disabilities are met and that services are accessible to all

RCN member Sue Bridges (pictured) has worked in learning disabilities for nearly 30 years. She's passionate about ensuring high quality services for people with learning disabilities and that access to those services is equitable.

After working in a number of roles at local, regional and national level, Sue recently took up a new post as professional lead for learning disabilities and autism at Norfolk and Suffolk NHS Foundation Trust. She'll help ensure the trust implements the *Learning Disabilities Core Skills Education and Training Framework* so all staff are able to meet people's needs. The framework was published last year by Skills for Health and partners, and is intended to improve the skills and knowledge of health care staff.

Equipped to help

Sue's role includes important work with the universities of East Anglia and Suffolk, ensuring the future workforce is equipped to help and support. Learning disability nurses focus on improving or maintaining physical and mental health, but must also be skilled in helping people tackle any barriers to living a full and independent life; for example, helping someone learn the skills to get a job – another important factor in supporting individuals to lead healthy, fulfilling lives.

Following several high-profile reports highlighting the inequalities and greater ill-health suffered by those with learning disabilities, the role of nursing staff in overcoming



It's an exciting time to be a learning disability nurse leader



these problems has never been more important. This focus has also helped highlight the importance of having nurses in leadership roles to drive change in their own organisations and beyond.

"It's an exciting time to be a learning disability nurse leader," Sue says. "The national agenda is moving quickly, and with a range of new guidelines and frameworks now available learning disability nurses have the ability to influence future care provision in different roles across the sector."

Sue believes nursing staff working in learning disabilities are able to think holistically and offer very person-centred care, which enables them to be influential when dealing with other care providers. "The continued employment of learning disability nurses in multi-professional teams across health and social care is essential to ensure positive progress," she says.

Sue believes that being in a position where she is able to advise

a large mental health trust about learning disability issues is a great privilege. "To embed a change in culture and ensure that mental health services meet the needs of all service users is challenging," she says. "But influencing change strategically and having local champions on board means that the ability to move in the right direction is an exciting prospect."

Find out more

The RCN Learning Disability Nursing Forum is open to all members interested in discovering more about the specialty and helping to influence policy and practice. *The Needs of People with Learning Disabilities: What Pre-registration Students Need to Know* is available at www.rcn.org.uk/publications. *The Learning Disabilities Core Skills Education and Training Framework* is available on the Skills for Health website: <http://tiny.cc/xv9wiw>



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Gain hours towards
your revalidation
requirements

Revalidation reminder

Everyone on the Nursing and Midwifery Council (NMC) register must comply with the requirements of revalidation. Just in case you need a reminder, here are the key facts

Read your emails...

...because the NMC uses email to **remind registrants** to pay their fees and revalidate. In fact, most NMC communications are now sent by email but 5% of registrants – or **30,000 nurses and midwives** – have yet to supply an email address. Assuming you have signed up at **NMC Online**, make sure that crucial messages are not getting caught in **spam filters**. And if you habitually delete or ignore NMC emails, be aware that your revalidation could be **at risk**. It is the **registrant's responsibility** to check that his or her email address is correct and working.

Lapsed registration means...

...you cannot practise as a nurse or midwife. It is an **offence** to falsely represent yourself as being on the register, and failure to submit your revalidation application before your three-year renewal period ends means your registration will **expire automatically**. You will then have to apply for **readmission** to the register. That can take two to six weeks. **Unintentional lapsing** should not be used as an excuse for employers to suspend or dismiss staff but you will have to undertake different duties.

Revalidation is...

...the process by which nurses' and midwives' registration is renewed. The purpose of revalidation, which came into effect in April last year, is to **improve public protection** by making sure registrants practise **safely and effectively** throughout their careers. Registration must be renewed **every three years** and your revalidation is due on the **first day** of the month in which your registration expires. If you're not already, you need to get up to speed with what's required.



Commons myths...

...about revalidation include "I don't work in a permanent role so I can't revalidate". If you work as an **agency or bank nurse**, you still need to revalidate. And if you're an NMC registrant but don't work in a **hands-on clinical role**, you must revalidate if you want to remain on the register.

Action to take today...

...includes **joining NMC Online**, if you haven't done so already, and checking your **renewal date**. Set up email on your smartphone if you don't get the chance to check your inbox on your computer regularly. You should also ensure you're familiar with the **requirements of revalidation**. These cover practice hours, continuing professional development, practice-related feedback, written reflective accounts, reflective discussion, a health and character declaration, professional indemnity, and confirmation – someone who looks at the evidence you have collected and confirms you have met the revalidation requirements.

Finding out more...

...is easy. There's a huge amount of information on the **RCN website** (www.rcn.org.uk/revalidation) including advice on preparing for revalidation, examples, advice for agency staff, even suggestions on **using social media** as part of your CPD. And the NMC has an entire **microsite** dedicated to guiding nurses and midwives through their **revalidation journey**. You can also download guidance to read at your convenience. <http://revalidation.nmc.org.uk>

12 FEATURES

Good credentials

The RCN's new credentialing programme allows those practising at an advanced level an opportunity to gain proper recognition of their knowledge and skills

Clinical practice, leadership, education, research – the four pillars of advanced nursing practice. But how do you demonstrate you have those qualities in sufficient quantity to attain formal recognition of your expertise? The short answer is RCN credentialing.

Devised following extensive engagement with experienced nurses and educators, credentialing is a means of endorsing the skills of nurses and midwives working at an advanced level.

The RCN's Associate Consultant for credentialing, Professor Shirley Reveley, says: "Credentialing is a formal

recognition of educational experience and competence for an advanced nurse, measured against a set of criteria." Those criteria include a relevant master's degree and a prescribing qualification.

Shirley adds: "There is a robust assessment process to assure the quality of the offer, and its aim is to drive standards forward and give credibility to the profession."

Career prospects

Practitioners who meet the necessary standards will be given a certificate and included on a register, thereby enhancing their career prospects and giving

patients and the public extra confidence in their skills.

After a successful pilot, the service will officially launch next month. Until December 2020, there will be transitional arrangements in place so any nurses who don't currently meet the criteria but are undertaking advanced level practice can apply for the credential on submission of a portfolio.

But what does credentialing mean in practice? Davina Collins is a clinical nurse manager who took part in the credentialing pilot and is now registered as an RCN Advanced Level Nurse Practitioner. Read her perspective in the box below.



For me, RCN credentialing was about bringing credibility to the role of the ANP

Davina Collins Senior Clinical Nurse Manager, Cumbria

I manage a team of nurses and advanced nurse practitioners (ANPs), and work as a clinical nurse practitioner. The staff on my team are incredibly competent ANPs, but they all have different backgrounds. Some have master's degrees, some a BSc. For me, RCN credentialing was about bringing credibility to the role of the ANP.

The RCN credential complements the MSc in practice development I'm doing. It's different because it looks at competency in the four pillars of advanced practice and gives recognition in addition to the master's qualification.

Credentialing was relatively straightforward. The hardest part for me was identifying the research aspect but I related this to using evidence-based

practice. Creating a job plan covering the four pillars made me consider how my role covers these areas in daily practice.

I needed a clinical reference and my work had to be signed off by my line manager, who was very supportive and interested in the credential.

I've been telling other ANPs in my team credentialing is good for credibility and recognition. It's also good for nurses coming into our profession because it provides a clear pathway, which has always been there but this gives improved structure.

If you're thinking of doing the RCN credential, I'd say go for it.
www.rcn.org.uk/credentialing



Women in high places

As of January this year, just 17% of Wikipedia biographies chronicled the lives of women. Sarah Abley hears about a project aiming to increase entries about nurses

The Wellcome Library's Wikimedian in Residence, Dr Alice White, is on a mission to change Wikipedia's "women in red" to blue – and if you're struggling to know what that means, you're not alone.

Wikimedia is the umbrella group of free-to-use online sites including the encyclopaedia Wikipedia, Wiktionary, a dictionary, Wikimedia Commons, an image library, and many more. Wikimedians are the people who encourage, train and facilitate volunteer editors to populate these sites. In Alice's case, she's working with the Wellcome Library on the WikiProject *Women in Red*.

Wikipedia's red links are those within its text which, unlike their blue counterparts, don't lead anywhere. They highlight where information is missing and, in the case of notable women, there's an extensive list that covers the past and present, fact and fiction. Since November 2014, the project has boosted the number of female biographies by nearly 2% and when you take into account the 1.5 million biographies on the site, that's no mean feat. Alice's focus is on women in medicine and health, and she's already begun working with RCN members to ensure nursing is high on the agenda.

Inspirational women

"There are some key women in history who are inspirational, incredible. They have benefited the world and people don't know about them," says Alice. "We're



A recent event at RCN headquarters saw staff and members working together to increase nurses' presence on Wikipedia



We're making the history of nursing more accessible

making the history of nursing more accessible and I think the more knowledge there is available to people the better."

Currently, the College's own history is under-represented on the website, with several RCN presidents on the red list and many others existing as stumps – truncated entries offering no more than a couple sentences. However, under Alice's guidance, a group of members and staff are taking up the challenge to boost the profile of our nursing leaders.

Jessica Anstee, a pre-registration master's student, is eager to get started. "I'm passionate about getting nursing more recognition as a profession," she says. "We all benefit from and use Wikipedia so it's good to give something back. Nursing role models are important – they inspired me in my career."

Training is not a requirement to become a wiki-editor and anyone can add to or create a new entry. Additionally, RCN libraries offer a wealth of resources and support to research nursing leaders. As Alice says: "It's so easy to start. If you can use Word or send an email, all you need is the courage to dive in and press the edit button. The hardest part is finding a unique user name!"

Wiki-stats

- Wikipedia authors are more trusted than BBC, ITV and broadsheet journalists (YouGov poll).
- If printed, Wikipedia would fill 2,421 volumes with 5.3 million entries.
- Volunteer work on Wikipedia has been valued at \$5.4 million and increases every day.

The changing face of OH nursing

A member of the RCN Public Health Forum has been involved in helping to educate future occupational health nurses – a specialism that has changed much over recent years

The role of the occupational health nurse has changed over the past 20 years from that of an industrial nurse dealing with accidents and first-aid to a function that covers all aspects of preventative health care. Health and safety in the workplace has improved but levels of lifestyle-related chronic ill-health conditions have increased, which has led to employers placing a greater emphasis on health and wellbeing.

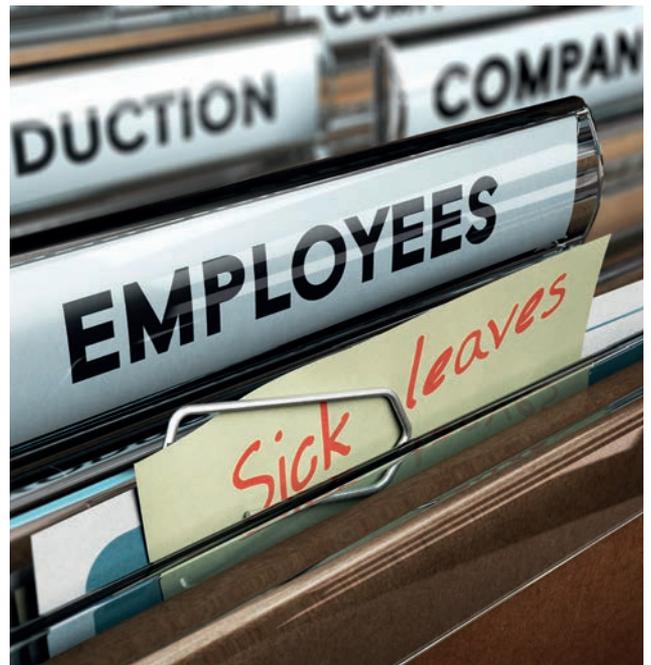
RCN member Helen Kirk works for Public Health England and represents occupational health nurses on the RCN Public Health Forum's steering committee. She has helped develop a publication ensuring all nurses going into occupational health are assessed in the same way and to the same standards by universities.

“Occupational health nursing is an important part of the public health workforce,” Helen says.

“As the role has changed, this document is designed to ensure higher education institutions are up to date with the theory, knowledge and skills that cover the profession.”

As well as ensuring the ongoing educational needs of occupational health nurses are met, it is hoped the guidance will raise the profile of the role and clarify what these specialist nurses do. It also aims to enthuse others to consider a career in this area of nursing.

Read *Educating Occupational Health Nurses* at www.rcn.org.uk/OHnursing



Shining a light on experiences of cancer

A performance inspired by the findings of research into young people's cancer services will be staged at the RCN International Nursing Research Conference next month.

Rachel Taylor, a committee member of the RCN Research Society, which is hosting the conference, is the lead for the research.

Four young people with cancer will join the Contact Young Company to present the findings from BRIGHTLIGHT, a major study funded by the National Institute for Health Research.



The aim of the BRIGHTLIGHT is to evaluate whether specialist services add value

The study began six years ago with the aim of evaluating cancer services in England for young people aged 13 to 24. More than 1,000 young patients with cancer have been involved in the research, which covers all aspects of their care from diagnosis onwards.

Rachel said: “The aim of BRIGHTLIGHT is to evaluate whether specialist services add value – and value is not just surviving but young people being able to continue with their lives, employment and school. Those in this age group are not children but not quite adults, and there are services in the UK

designed specifically for their needs. BRIGHTLIGHT aims to see if these services are better at meeting those needs as well as being cost effective for the NHS.”

There is a Light, the show inspired by the findings of BRIGHTLIGHT, will be staged as part of the SICK! Festival at the Contact Theatre in Manchester on 8-10 March, the ACCA, Brighton, on 21 March, and at the RCN International Nursing Research Conference, which runs from 5-7 April in Oxford.

Visit www.sickfestival.com and www.rcn.org.uk/research17

Delirium resources coming soon

Members of the RCN Older People's Forum are developing learning resources to help community nurses and nursing assistants spot early signs of delirium. Delirium is common among older people, with symptoms ranging from "not being themselves" to reduced consciousness or disorientation. It is a serious condition but can be prevented if recognised early and treated.

Vicki Leah, Chair of the forum, said: "RCN members have told us that delirium education is important to them. We aim to train 300 'delirium champions' over the next two years who will receive a badge acknowledging they've been trained in delirium, which will help to spread awareness of the condition." For further information email nicola.mills@rcn.org.uk

Guidance on supporting detainees

Members of the RCN's newest forum have contributed to a publication advising nursing staff in hospital settings on optimum care for those who have come from prisons, immigration centres and similar settings. Jess Davidson, Chair of the Nursing in Justice and Forensic Health Care Forum, said: "Few detained patients will be dangerous or violent but many will be highly anxious and the greatest challenge is forming that therapeutic relationship. We hope this guidance will go some way to assist in the process."

Download *Supporting Nursing Staff Caring for Patients from Places of Detention* from www.rcn.org.uk/publications



Rewarding excellence in palliative care

If you know an excellent palliative care nurse why not nominate him or her for the Morag McEwan Bell Memorial Award for Outstanding Service in Palliative Care Nursing in Scotland.

Send your nomination, with a short summary of the reasons why the person deserves the award in no more than 500 words, together with your contact details and those of your nominee to rcnfoundation@rcn.org.uk by 10 April.

The winner will be announced at RCN Congress, taking place in Liverpool in May, and will receive an engraved glass trophy, a watch and a certificate.

Patient research

RCN members can get involved in health research to improve care for NHS patients. Every year the National Institute for Health Research marks International Clinical Trials Day, which takes place on 20 May this year, by running the *OK to Ask* campaign.

The campaign aims to encourage patients and the public to ask about opportunities available for them to take part in research and to raise awareness of health research among health professionals.

You can order information packs and find out more about the campaign and ways you can help at <http://tinyurl.com/hrzt94f>

WHAT I'M THINKING



Carmel Bagness RCN Professional Lead, Midwifery and Women's Health

We all want what is best for ourselves and our families, and many of the public health messages that are available to us focus on being in the best health, place and frame of mind to get the most from life and living.

The newly published report, *Better Beginnings: Improving Health for Pregnancy*, brings together research findings on some of the key public health issues that can be modified or eradicated before or during pregnancy, or postnatally, and which are beneficial for mother, baby, partner and wider family.

The research is published by the National Institute for Health Research. It focuses on smoking, healthy diet and weight, alcohol and drugs, mental health and violence against women. It looks at how health care professionals can best support, in partnership with women and their families, ways of adapting or adopting new behaviours seen as more conducive to health and wellbeing – although some, such as violence against women, may be more challenging than just supporting the woman.

A positive pregnancy and childbirth, enhanced by trying to be in the best possible health, underpins a healthy start to life and subsequent wellbeing. This report brings together some of the important life chances that can impact on wellbeing and will be helpful for staff in all settings, not just women's health and midwifery.

Search for "Better beginnings" at www.dc.nihr.ac.uk



RCN Fertility Forum

Advances in fertility nursing

8 April

RCN headquarters
20 Cavendish Square
London W1G 0RN

The RCN Fertility Nursing Conference will help to inform all nursing staff about the latest issues in this field.

Topics for discussion on the day include female genital mutilation, transgender patients and legal issues around surrogacy. Recruitment of donors and fertility preservation guidelines are also on the programme.

As well as hearing about evidenced-based clinical, scientific and regulatory advances in the field of artificial reproductive

technologies, delegates at the event will have plenty of opportunities to speak with fellow professionals and to attend the conference exhibition.

Carmel Bagness, RCN Professional Lead for Midwifery and Women's Health, said: "The day will include many interesting discussions and speakers and we will be launching updated RCN guidance on fertility preservation for people with long-term health conditions."

By attending the conference, to be held at the RCN's London headquarters next month, you will accrue up to six hours of continuing professional development time that will count towards revalidation.

📍 To book, please visit www.rcn.org.uk/fertility17



RCN History of Nursing Society

Nurse veterans of the Great War

30 March

RCN headquarters
20 Cavendish Square
London W1G 0RN

In this inaugural History of Nursing Society Lecture, Professor Alison Fell from the University of Leeds will look at associations of former war nurses, both trained and volunteers.

These groups lobbied for improved rights for former nurses and served as social networks for those who had served in the First World War. The event is free to attend. The lecture starts at 6.30pm.

📍 Visit www.rcn.org.uk/greatwarlecture

RCN West Midlands

Forward-thinking leadership

23 March

Birmingham Botanical Gardens
Westbourne Road
Birmingham B15 3TR

This conference will enable health service leaders at every level to better understand the inclusion agenda and take action to incorporate inclusion into their working practices.

Organised by RCN West Midlands, the West Midlands Leadership Academy and Health Education England, the conference will also explore what resources and development opportunities are available to support you in embedding inclusion. Delegates will hear from a wide



range of leading experts in the field of inclusive practice.

At its core the forward-thinking leadership initiative encompasses values-based leadership, unconscious bias and maximising potential, as well as coaching conversations and better understanding of the generation gap.

📍 Details of speakers and how to book are available at www.rcn.org.uk/inclusion-conference