



Royal College of Nursing

Nursing pay

Find out all you need to know about the NHS pay deal for England

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TRANSFORMING LIVES

SADIE PROVIDES HOPE TO PATIENTS AWAITING ORGAN TRANSPLANTS

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

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Share your views on nursing associate plans

The RCN is running workshops where members can find out more about the proposed professional code, skills and standards for nursing associates.

The nursing associate role, introduced by the Department of Health and Social Care in England, is designed to bridge the gap between health care assistants and registered nurses. The NMC is currently consulting on nursing associate regulation and member perspectives will feed into the RCN response.

The workshops are free and will allow members to explore the NMC's proposals and share their views. For details and dates, visit www.rcn.org.uk/nursing-associate-consultation-workshops

Women stung by pension age plans

Women born in the 1950s and adversely affected by government plans to raise their state pension age (SPA) should contact their MP, the RCN has said. Legislation to equalise the SPA for men and women left many angry, with some women claiming they received inadequate notice. The SPA for women is due to rise to 65 by November and to 66 for everyone by October 2020. Then again to 67 by 2028 and to 68 by 2048 at the latest. For more information visit www.waspi.co.uk

Loan errors cause student hardship

Hundreds of nursing students have been warned not to expect further loan payments this academic year due to admin errors in the loans system, leaving many concerned about rent and living costs.

The RCN has called on the Student Loans Company (SLC) to write off the overpayments, which range from £600 to £3,900.

Students from at least nine universities in England received letters explaining how the government-owned body will not pay further loan instalments in order to recover the amounts. Nursing students said the decision would affect their personal budgeting through to September.

RCN Chief Executive Janet Davies has urged the loans company to use existing overpayment policies to reach agreement with the Education Secretary not to recover the money.

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I'm worried sick about being left with barely enough money to pay the rent

Nursing student
Emma Moss

🕒 Students affected should visit the RCN Students Facebook page for the latest information and advice

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Order your Nurses' Day packs now

You can now order RCN party packs and download posters to celebrate Nurses' Day on 12 May. It's an opportunity to say thank you to members who make nursing such a modern and dynamic profession. The campaign this year, #ThisNurse, showcases all the varied roles you do and vast amount of skills you have. Visit www.rcn.org.uk/nurses-day to share your story of how you make a difference to patients' lives and order your celebration pack.

Have your say on new NHS pay deal for England

Members will be consulted on the deal that sees all nursing staff get a pay rise of at least 6.5% and up to 29% over three years

Lets do
the deal

www.rcn.org.uk/nursing-pay

Nursing
pay

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This is the best deal in eight years from a Government that is still committed to austerity

The pay deal, negotiated jointly by the RCN and other NHS trade unions, will see every member working for the NHS in England get a pay rise.

It will amount to an increase of at least 6.5% over three years, but much more for some members, up to 29%. That's because it comes with changes to the NHS pay structure, which reduce the number of pay points in each band and remove the current overlap between bands. Starting salaries will increase and staff will be able to progress to the top of their band quicker.

The pay increase each member gets will be different but an online calculator is available to help staff work out the exact amounts they'll receive in each year of the three-year deal.

The RCN successfully protected payments for working unsocial

hours and defended members' entitlement to annual leave during negotiations. Though it was reported that staff would have to give up a day's holiday as part of the deal, this is not the case, and members' leave will remain the same.

The RCN believes this is the best deal that can be negotiated in a time of continued restraint on public sector spending and is urging members to vote yes to it during a consultation period, which will run from 23 April to 5 June.

The RCN Trade Union Committee, made up of elected members from every region and country in the UK, has endorsed the deal.

Lors Allford is Chair of that committee. She said: "This is the best pay deal in eight years from a Government that is still committed to austerity. Failure to accept it will put us back

to square one, and at risk of returning to the 1% pay rises we've fought so hard to overturn.

"This is our chance to lock in a pay deal for three years, that not only guarantees our members will get more money, but simplifies the pay structure so that they get recognised for their increasing skill and experience quicker. It provides certainty at a time of great political and economic uncertainty and I urge our members to accept it."

The deal is for staff working for the NHS in England only. However, it provides funding for Scotland, Wales and Northern Ireland to replicate the pay framework if employers, governments and trade unions agree to it. The RCN is committed to maintaining UK-wide pay, terms and conditions and expects a similar deal to be available for members in each country.

See page 9
for more

4 DOING THE ROUNDS

Royal reception celebrates nursing

RCN members were among 350 nursing staff honoured at a Buckingham Palace reception hosted by Prince Charles



The event was organised to thank those who deliver frontline nursing care across the UK. Staff from all four countries were invited, representing the full range of nursing specialties.

The Prince of Wales circulated the room talking to nursing staff and finding out first-hand about their work and experiences.

RCN member Ed Freshwater said: “Never in a million years did I think I’d be invited to Buckingham Palace. It was a very surreal experience. It was also completely wonderful, both to be in a room with so many incredible nurses and to have a high profile figure like the Prince of Wales speak out in support of the work we do.”

In a speech given to close the reception, Prince Charles reflected on the importance of the NHS – in this year in which both he and the institution turn 70 – and the essential role that nurses play. “Thank you more than I can say for the difference you make to this nation,” he said.

He also shared his earliest hospital memory, when he was admitted to Great Ormond Street with appendicitis as a child. He said he had never forgotten “how wonderfully” he was looked after and how he was struck by the dedication and care of nurses.

Other members at the event included the RCN 2017 Nurse of the Year Melanie Davies, who said it was “such a privilege” to be there, and RCN member Debra Holloway, who enthused how fantastic it was for there to be such a “public recognition of frontline nursing.”

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Thank you more than I can say for the difference you make to this nation

Education grants available

Members with an interest in primary care nursing, long term or chronic conditions are encouraged to apply for the RCN Foundation Professional Bursary Scheme which provides support for post-graduate university study or professional short courses. Funding of up to £1,000 is also available through the Monica Baly bursary, awarded annually for studying nursing history. Occupational health nurses can get up to £5,000 through the Mair Scholarship to enhance standards of practice in Scotland. Apply by 5pm on 30 May. Visit <https://tinyurl.com/bursary-schemes>

Jude ‘privileged’ to be RCN London leader

Jude Diggins is to be the new RCN London Director, taking over from Bernell Bussue who retires this month. Jude moved to the UK after nurse training in Dublin and has been nursing for 33 years.

She said: “At a time when nursing in the capital presents some incredible opportunities for our members as well as some specific challenges, it is essential that RCN London continues to speak up loudly and clearly for the nursing profession as well as our health and social care services. I am looking forward to rolling my sleeves up and doing just that.”



The big picture



RCN District Nursing Forum members kept smiling as they braved the “Beast from the East” to provide care to their patients.

MEET THE MEMBER



Each month *RCN Bulletin* asks a member to share a little bit about themselves.

Name: Sheila McSharry

Role: Practice educator, medicines management

Describe your job in three words: Full-on, important, but unappreciated.

What item can't you do without at work? A USB memory stick. I do training all over the place and can't do my job without one.

If you could have a superpower, what would it be? I'd love to be able to fly, soar up with the birds and totally escape.

Why did you choose this profession? Both my parents were nurses. I'm one of nine children and four of us became nurses so it's in the blood.

What three things would you take to a desert island? I'd need lip gloss as I get really dry lips, and I'd take a wine-making kit and a musical instrument too, probably violin or piano. I'd have loads of time to torture myself practising!

Where is your dream holiday destination? I've always wanted to go to Florence in Italy. I just imagine it to be the most beautiful place and I want to sit in a piazza drinking real Italian coffee and watching the world go by.

PATIENT PERSPECTIVE



Eric Scoones was fit and healthy until a genetic condition caused heart failure leading to a heart transplant aged 58

“ I used to run marathons, but all of a sudden it became a challenge to even climb the stairs. Finding out I needed a heart transplant was hard, but coming to terms with this being my only option, I felt positive. A year passed and I struggled to do anything. I was admitted to the Royal Papworth Hospital and put on the urgent transplant list, where I spent the next two months. The care of the nurses was fantastic, they were very empathetic and thoughtful. It's easy to feel negative, but they made such a difference to my time there.

I was in bed around 2am when I saw a nurse with a torch coming towards me. “Eric,” she said, “we think we've found you a heart.” Once all the necessary checks were carried out, there was a quick kiss with my wife and I was taken to surgery. I honestly didn't feel scared, I was very hopeful. This was my only chance.

Twenty-two hours later I woke up and felt better straight away. I barely had a pulse before and now I could feel this heart beating. I couldn't sleep as it felt so strange. Six years on, I can do so much more. I can travel and have had six grandchildren born since then. I'm so grateful to all the nursing staff as I know I recovered faster thanks to them.”

www.rcn.org.uk/myrcn



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.

6 OPINION

What you've been saying

Don't disregard nursing older people

Since qualifying 30 years ago I have always worked in older people's care, a specialty that is always looked down on, even from within the profession. You get the constant comments: "Don't you want to be a proper nurse", or "What do you want to do that for"?

Older people's wards are still acute medical wards. They take the patients who are prioritised out of medical wards or ITU just because they happen to be over 70. Patients on these wards still have the same intensive input, but they also have many pre-existing conditions to manage, and unfortunately in many cases delirium or dementia or both.

Acute older people's wards are medically intensive but also very physically and mentally challenging. Please, before you

dismiss those of us who work in this vital area of care, work a few shifts with us and see what it is like.

 Jo Strange

Help us safeguard investment in future nurses

I knew I wanted to become a nurse when I began volunteering at a hospital while working as a reporter. I fell in love with it but without the bursary, nursing would have remained a dream.

Many of my course mates are in a similar position. The profession generally attracts more mature students, especially on the postgrad diploma, who are more likely to have other financial commitments and responsibilities. It simply wouldn't have been feasible for many of us to go back to studying without the financial support.

When I first heard about plans to remove the post-graduate bursary, I couldn't believe it. When they removed the undergraduate funding, it was pitched as a way to increase available training places and therefore boost numbers. However, that has failed spectacularly and nursing student numbers haven't increased. In fact, over the last two years, applications to nursing courses have fallen by 33%.

Removing this funding is a short-sighted decision which threatens the future supply of nurses. The RCN is calling on the Government to immediately stop plans to cut this post-graduate funding while a review of post-18 education is carried out. Please join us to safeguard investment in other future nurses like me by asking your MP to sign the early day motion (EDM) opposing the cuts: <https://ren.eaction.org.uk/lobby/postgradbursary>

 Lauren Bryant

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HOT TOPIC



Is there too much negativity surrounding nursing as a profession?

There is negativity in the NHS, but there is also negativity from nurses about nurses. We'll find it hard to change anything until we start working as a community. We need to bring back the pride of the job for everyone. [Victoria Spires via Twitter](#)

There is far too much negativity around nursing when I feel it's one of the most rewarding and satisfying careers out there. Yes, times are really hard and stressful, but when a patient tells you how fantastic you are as a nurse and how much you've made their recovery and life better, how can you not love nursing? [Colette Nikpavlovich via email](#)

I'm proud to be a nurse and when asked about it as a career, while I can share the pleasure and joy I've had, it's not what it was when I started over 20 years ago. Not negative just honest. [Jane Richards via Twitter](#)

It does seem like nurses are continually unsupported by our government and these are challenging times. However, let's not be a negative down-beaten profession. Let's be strong and fight for our amazing profession. Positivity is so important. [Emily Goss via Twitter](#)

Real terms pay cuts, severe cuts to bed numbers, understaffing, ineffective computer systems, increased threat of litigation, downgrading of bands, constant restructuring, lack of management support, etc, have all attributed to the negativity around nursing as a profession. [Gail Taylor via Twitter](#)

I've had many nurses tell me I'm mad to want to be a nurse and that I should get out while I still can. I've told them they've lost the drive and enthusiasm that brought them to nursing and should reflect on their own practice and why they went into nursing. [Diane Tierney via Twitter](#)

MESSAGE TO MEMBERS



Lora Allford Chair of the RCN Trade Union Committee

The Government has paid attention to RCN campaigning, got rid of the 1% pay cap, and agreed to a pay deal for NHS staff in England that's significantly better than we've seen in the last eight years.

It means as much as 29% and at least 6.5% over the next three years, as well as pay reliability at a time of great political and economic uncertainty. It means higher starting salaries for all bands, which will help recruitment at a time of staffing crisis.

It also means a simpler pay structure, so that staff reach the top of their pay band faster, and promotion that really means promotion, which helps staff retention. A pay deal that brings more people into nursing and encourages staff to stay is good for patient care.

It's thanks to the partnership work of NHS trade unions, alongside the tireless campaigning of RCN members that the Government has agreed to find the money to pay for this deal, a deal better than that offered any other public sector workers.

We believe it's the best offer we can get in a time of austerity and we urge you to accept it. If we reject it, we risk returning to the 1% pay rises we fought so hard to overturn.

www.rcn.org.uk/nursing-pay



Bringing nursing history back to life



History of Nursing Society member Pat Keegan volunteered as a researcher on the RCN project to immortalise nurses from the First World War

I've always had an interest in wartime history and when I saw the email about this project, digitising the stories of 10 brave and inspirational nurses, I was immediately interested. Though when I was asked to do research, my initial thought was that it sounded like a lot of hard work! But from the moment I started looking into the life of Josephine Angois (pictured), I was hooked. While the happenings from this time are well-documented, there's nothing

quite like reading about it from a first-hand perspective to really bring home the difficulties faced and friendships formed.

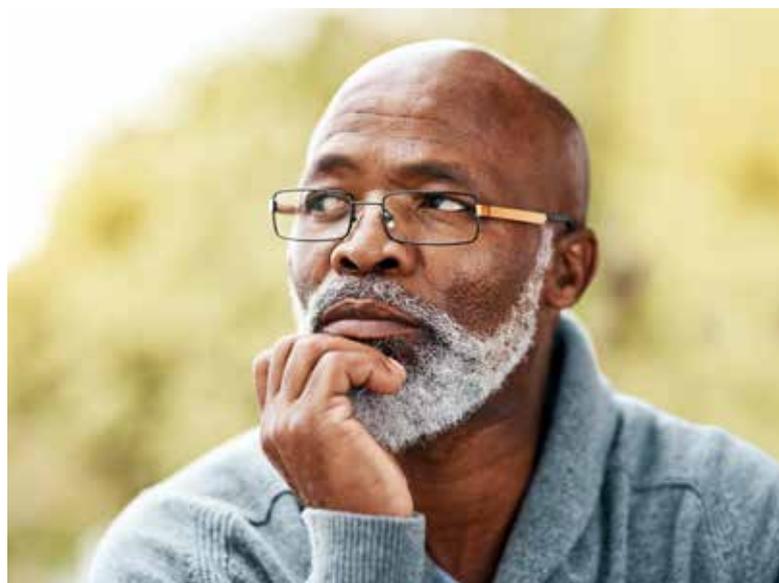
My admiration is completely boundless. You know that these things happened but when you see it through the eyes of an individual who lived through it, it's impossible not to feel tremendously proud of the profession. This is one of the best things I've ever done and I'm so happy to have been part of bringing these women's stories back to life.

I've been an RCN member for a long time and joined the History of Nursing Society after retirement. Ten years out of nursing this project has really made me feel connected again. It's wonderful to see the finished website – www.rcn.org.uk/servicescrapbooks – live for everyone to delve into the amazing history of these special women.

8 FEATURES

Regaining confidence

A member describes how the RCN careers service helped him rediscover his passion for nursing



In my previous two NHS nursing posts, I was bullied. My situation was very poorly managed and over four years, this wore down my self-belief and confidence to such a degree I couldn't cope and eventually became physically ill. I couldn't work for two years and, as a direct result of the stress, have been left with a permanent, though thankfully well-controlled, heart condition.

When my sick pay and limited savings ran out, I realised I'd have to go back to work. My confidence was so low by this point that just the thought of deciding what work to look for was extremely daunting, let alone going for an interview or starting a new job. I wasn't even sure I'd be able to work as a nurse again.

I'm in my early 50s and found it difficult to ask for help. There's a perceived expectation, even if self-imposed, that if you're older

you should be able to just get on with things. Eventually I called the RCN and was directed to the careers service.

Such a relief

I was so surprised by the level of support provided. I was shown understanding and empathy right from the very start. My career coach really listened to me - and it was such a relief to hear someone say they weren't the least bit surprised I felt the way I did.

I was given as much time and space as I needed to explain what had happened and its impact, and I soon found myself trusting them. From there, I was gently reintroduced to the world of work, initially through some clever, simple-to-use tools exploring the basics of what's important to me and how this might relate to my work, then looking at ways of rediscovering and drawing on

previous successes and positive experiences. The sessions were set at the right pace for me, arranged at a time to suit, and my career coach was able to be flexible when unexpected issues arose.

My confidence grew quickly and after a few sessions I found the strength to apply for two posts, each completely different to my previous work. I secured an interview for both - and was offered the two roles. I'm now looking forward to getting back to the job I have been trained for: caring for patients.

The RCN careers telephone coaching sessions have been invaluable. Genuine support and an easy-to-use system have helped me out of a dark place and back into work. I'd recommend the sessions to anyone. However simple or complex your issues, you'll be dealt with as an individual, professionally, and with genuine care.

"A lot of members feel they're alone and don't want to ask for help, but if your career has come to a standstill and you need some unbiased help, look at our website or get in touch to arrange a careers coaching session," says Julie Watkins, RCN careers coach.

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There's an expectation that if you're older you should be able to just get on with things

The picture used in this feature is not of the member interviewed

Developing your career

The RCN has recently revamped its online careers advice and members now have access to information specifically for nurses, health care assistants and students. You can also access advice on writing CVs, covering letters, interview techniques and much more. Take a look at www.rcn.org.uk/careers. For information on personal careers coaching, contact RCN Direct on 0345 772 6100.

8 things you need to know about the NHS pay deal

1 You'll get more money

Every member working for the NHS in England will get a pay rise of at least 6.5% over three years. That's for those at the top of their band. If you're in the middle, you could get much more, up to 29%. It's because the number of pay points in each band is being reduced. So, over three years, some points will disappear. If you're on a point that goes, you'll automatically move up, so get more money. The deal means different pay increases for different people. Find out what you can expect to get by using the NHS joint union pay calculator found at www.rcn.org.uk/nursing-pay

2 You'll be able to progress to the top of your band quicker

The pay structure is being simplified as part of the deal. The number of points in each band is being reduced, so you'll be on the highest rate for your band sooner and get more money faster. Overlaps between pay bands are being removed so when you're promoted you'll be properly rewarded for it.

3 Starting salaries are rising

The deal comes with higher starting salaries for each band, which will help attract new staff to nursing roles. For the first time in the NHS in England, the lowest paid rates will be above the living wage. Band 1 roles are being phased out, with all staff being moved to band 2 by 2021.

4 Unsocial hours payments are protected

There has been talk of attacks on unsocial hours payments for a number of years. However, we know how vital these payments are to you and for the RCN, this was a red line in negotiations. We successfully protected unsocial hours payments in this deal.

5 You won't have to give up any annual leave

You may have heard that staff would have to sacrifice a day of annual leave as part of this deal. This is not the case. The RCN defended your entitlement to annual leave and it will stay the same.

6 It's for England only

The deal is for staff working for the NHS in England only. However, it provides funding for Scotland, Wales and Northern Ireland to replicate the pay framework if employers, governments and trade unions agree to it. The RCN is committed to maintaining UK-wide pay, terms and conditions and expects a similar deal to be made available for members in each country.

7 We think you should accept it

This is the best pay deal in eight years from a Government that is still committed to austerity. It gives nursing staff a higher pay rise than any other public sector workers have been offered. The deal delivers a modernised pay system, better starting salaries, faster progress to the top of pay bands, promotion that means promotion, and an increase for everyone. The RCN is urging its members to accept the deal.

8 You can have your say

NHS trade unions will be consulting their members about the pay deal soon. The RCN is no different. Over the coming weeks, we'll be running events in each region and country to explain the deal in detail and get your views. Details of these will be made available at www.rcn.org.uk/nursing-pay.

Then on 23 April it'll go to a vote. Each member working in the NHS in England will be asked to respond yes or no to a single question in an online survey. You'll need your membership number to respond. This can be found on your membership card, inside the front cover of your RCN handbook or by calling the RCN membership team on 0345 7726 100.

If you work for the NHS in Scotland, Wales or Northern Ireland, you'll be asked if you support the deal. Though it won't apply to you, if it's accepted, it could be adopted where you live, so we're keen to hear your views.

Find out more

To find out more about the deal and how it affects nursing staff, visit www.rcn.org.uk/nursing-pay. For full details of the NHS pay deal for England, and to access the pay calculator, visit www.nhspay.org

Transforming lives

Meet two nurse specialists in organ donation who deliver care in the best and worst of times



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Giving the family options for organ donation puts some control back in their hands

There's been a major incident on one of Britain's motorways. Several vehicles are involved and many people are injured, some of them, as it will later turn out, fatally. In another part of the country, someone has been desperately waiting for a heart transplant, struggling to get on with the simplest of tasks in their daily lives. They get a call in the middle of the night. The voice on the other end, familiar and calming: "We've found you a heart."

Although this reads like a scene from a hospital television drama, this is a real situation for RCN

members Becky Evans and Sadie Von Joel, working at both ends of the organ donation spectrum.

As a specialist nurse requestor in the Midlands organ donation and transplant team, Becky meets families at a very emotional time when a loved one is in critical care and not expected to recover. It's her job to speak to relatives about organ donation and support them through that process.

"We're there for the conversation about the end of a person's life, which is not always expected. Even when a family has been told

their loved one will not survive, they're not always in acceptance of this."

Becky gives advice on options should the family decide they would like to donate organs or if it was the patient's decision. "The organ donation register means that someone has expressed their own wish, should the worst happen. But there is always a conversation to be had with the family and we would want the family to support their loved one to be an organ donor. Unfortunately, some families don't feel they can support this decision and do override it."

Words by Susan Embley. Picture by Warren Page

Around 36% of people are signed up to the organ donation register, but only 1% of the population die in such a way that they can donate.

“I’m extremely fortunate to have the skills to provide support at such a devastating time, and giving the family options for organ donation puts some control back in their hands,” says Becky.

Once it’s been decided that someone is able to become a donor, Becky carries out the necessary consent paperwork and tests to check blood and tissue type. “This is a lengthy process, sometimes over 24 hours,” she says. “There are a lot of phone calls, finding out the medical history from the family, what sort of a person they were and their lifestyle.”

Becky and her team are with the families through the whole process from when someone’s treatment in critical care has come to an end to when they have completed the donation. “We do

keep in touch with the families and send letters to thank them for allowing their loved one to donate, explaining how they’ve helped others. It’s an honour to do what I do.”

Last year more than 450 people died waiting for an organ transplant in the UK and there are currently around 6,500 people waiting for a transplant.

Providing a second chance

Sadie Von Joel (pictured far left) is a transplant co-ordinator at the Royal Papworth Hospital in Cambridgeshire, one of the largest heart and lung transplant centres in Europe. Sadie assesses whether people are eligible for a transplant and is the link between the donor and the recipient.

“It’s a very special moment when you tell someone a transplant will go ahead,” she says. “You’ve built up a rapport with this person, got to know their families and know what a difference this will mean for their lives. We take for granted

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It’s a very special moment when you tell someone a transplant will go ahead

things like tying our shoelaces or taking a shower, tasks that can be near on impossible for someone waiting for a transplant.”

Sadie was recently involved in a record five transplants in 36 hours. “I was on-call when my pager went off with the offers,” says Sadie. “We look for matches through our database, checking blood and tissue type and then make various calls to the recipient, surgeon and the organ donation team. On this particular occasion it was as if all the stars aligned and we were able to find five suitable matches, which is a very rare occurrence.”

It’s equivalent to almost 5% of the hospital’s total number of annual transplants in just a few hours. “It’s only when you get home exhausted that you reflect on what has happened and know that person now has the chance of a better life.”

Timing is crucial to limit how long the organs are without a blood supply. This means liaising with the organ donation nurses at the other end, making sure the donor is ready and relaying information back to the surgeons.

“Adrenaline helps,” Sadie says. “It’s a very busy time when a match is found and the day just whips by. When a transplant is set to go ahead and someone is taken to theatre, we always say ‘see you later’, not ‘goodbye’ and you do get choked up as it’s very emotional for all involved.

“When a transplant is successful, it transforms lives. We’ve seen people get married, have babies, and ultimately, we’re carrying out the wishes of the donor. It’s a very unique and privileged job, seeing people at the best and worst of times. We see people through their whole journey and it’s a very special relationship, like a family.”

📍 Visit www.rcn.org.uk/organ-donation to read the RCN’s new position statement on consent for organ and tissue donation after death.

Members have their say on organ and tissue donation

The RCN has published its new position on consent for organ and tissue donation after death, stating qualified support for an opt-out system. This means the RCN supports an opt-out system of consent so long as certain safeguards, supports and resources are in place. These include limiting the opt-out to adults, trained professionals discussing donation with families, the need for sustained awareness campaigns and a call to review any opt-out on the basis of an impact evaluation.

This follows a UK-wide consultation with members. A significant number responded to an online survey, with 71% broadly in favour of an opt-out system. The results were reviewed by the RCN Professional Nursing Committee before agreeing the new position.

Committee Chair Melanie Johnson says: “The matter of organ and tissue donation is a sensitive and complex one, but the response from RCN members clearly supports the move to an opt-out system with conditions attached. The survey shows our members understand the issues at play in attempts to increase donations, and with almost 90% saying we need more donors there is still much to do. I would like to thank every member who participated in shaping this RCN position.”

Great War nurses immortalised

The personal stories of wartime nurses have been brought to life by the RCN

The RCN Library and Heritage Centre has launched a new website – *Service Scrapbooks: Nursing and Storytelling in the First World War* – that uncovers the memories, experiences and achievements of nurses working in the Great War. Through their scrapbooks and diaries filled with poems, drawings, letters and musings, we can take a glimpse into the world of these brave nurses.



Mabel in her TFNS uniform at the start of the war

◀ Mabel Pearce

Mabel was 27 years old and already working as a nurse when the war started. She signed up to the Territorial Force Nursing Service (TFNS) straight away, first working in a military hospital in Lincoln and then later being posted to Salonica, a military hospital in Greece. The entries in her scrapbook show she wasn't short of grateful patients. A few of them took the opportunity to pen poems in her honour. One describes her as "radiant and smiling". The RCN's founder Dame Sidney Browne wrote a comment in one of Mabel's later scrapbooks, saying: "Work has been excellent and appreciated by all those you have served under."



Portrait presumed to be of Florence painted in one of her scrapbooks by a soldier she treated in 1918

▲ Florence Blythe Brown

Florence was working as a seamstress until the war broke out in 1914. She went to train at the Hampstead New End Military Hospital in London where she then worked right through the war, during which time she kept extensive diaries and scrapbooks. After the war ended she returned home to Northampton where she worked as a district nurse and midwife until she died.

Nellie Carter ▶

Nellie joined the Queen Alexandra's Imperial Military Nursing Service (QAIMNS) in 1913 and was posted to the Military Families Hospital in County Kildare less than a month later. During the war, she worked on board the hospital ship HMS Asturias and in France. She suffered a nervous breakdown towards the end of the war but later went back to working in military hospitals.



To discover more about these, and other, wartime nurses' stories, visit the *Service Scrapbooks* website: www.rcn.org.uk/servicescrapbooks

This project was made possible by funding from the Heritage Lottery Fund as well as the time and dedication of volunteers from the RCN History of Nursing Society. Join at www.rcn.org.uk/forums

Take your breaks

The RCN has launched a campaign to encourage nursing staff to rest, rehydrate and refuel during shifts to ensure patient care is not compromised

Imagine walking several miles with no drink, food or rest. Do-able, probably, but not good for you, especially if the finish line is always moving further away and you have to do it all again tomorrow.

A resource published by the RCN as part of a new campaign encouraging members to look after themselves at work says nursing staff cover long distances during the average shift – four to six miles, according to one study; up to seven miles says another.

“Breaks should be seen as a necessity, rather than a luxury

The 3Rs initiative, covering the need to “rest, rehydrate, refuel”, emphasises the link between proper breaks and safety.

The campaign materials stress that because staff in health care environments are constantly making safety-critical decisions, “breaks should be seen as a necessity, rather than a luxury”. And yet an RCN survey last year found that nearly 60% of respondents did not get to take sufficient breaks on their last shift.

So what steps can you take to help yourself? The 3Rs campaign materials offer the following advice.

Find out more and download 3Rs campaign resources from www.rcn.org.uk/rest-rehydrate-refuel

R Rest

- Don't feel guilty about taking your rest breaks and encourage others to adopt the same attitude. A culture of skipped breaks threatens patient and staff safety.
- If missed breaks are becoming a pattern, alert your line manager. Keep a tally and complete an incident form that covers a stretch of shifts.
- Ask your manager about action being taken to address the problem. And let your RCN rep know what's happening.
- Remember that health and welfare at work is enshrined in law.

R Rehydrate

- Begin your shift well hydrated and ensure that you keep hydrated. Among the 3Rs resources available to download is a chart that matches urine colour to hydration levels.
- Dehydration can affect your health and your performance through its impact on concentration and cognitive performance. It also triggers fatigue. A study in one NHS hospital found that 45% of staff were dehydrated at the end of their shift. Dry lips and mouth, dizziness and headache are among other warning signs.
- Always act on signs of dehydration.
- Raise with your manager and RCN rep any issue concerning access to drinking water. It could represent a breach of health and safety legislation.

R Refuel

- Healthy eating is crucial to getting through a busy shift safely. Make sure you have access to, and sufficient time to eat, nutritional food that releases energy slowly.
- Night shifts have been associated with obesity and poor health outcomes, so for night staff good nutrition is especially important.
- If you know access to food may be difficult because, for example, the staff canteen is closed, remember to bring in additional snacks such as almonds and bananas.
- All staff, including those who are community based, should have somewhere they can eat that is free from contamination.
- Remember, the risks are real: a nurse was banned from driving last year after crashing her car on the way home from a long night shift with no breaks. She had been too busy to eat or drink.

Truly unmissable



Zeba Arif, Criminal Justice and Forensic Nursing Forum member, explains why RCN Congress is one of the highlights of her year



I first went to RCN Congress in 1992 when I took up a post as North East London Regional Officer. It was in Bournemouth and I still remember the experience vividly.

Since then, I've only missed one year and it was with a heavy heart! Congress is where I first became

aware of the professional forums and I would always attend as many forum events as possible. I learnt so much that informed my own work and development through attending forum debates and events. There's such a wealth of information, expertise and knowledge that you can access.

When I became a forum member – and later Chair of the Nursing in Justice and Forensic Health Care Forum – I was able to delve even deeper into the possibilities on offer. One of my greatest memories was having our resolution for controlling restraint voted for by members at Congress in 2013. That led to a series of roadshows across the UK and a publication, *Positive and Proactive Care* (publication code 005459), which we launched at the 2016 Congress in Glasgow.

I would urge any forum members to attend Congress if they can. It offers such a great way to connect with the professional side of the RCN and you never know what you might learn or what further professional opportunities may come from it.

Then there are the speakers and debates you get to witness and participate in. Without a doubt, you come away buzzing every single year from all the amazing things you've seen, done and heard.

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You come away buzzing every single year

Forum debates this year

Congress provides forums with an invaluable platform to bring important specialty matters to the wider RCN community and to begin setting in motion steps for change. Forum debates this year include:

Mental health staffing, which will call on RCN Council to commission research into therapeutic staffing levels for mental health nursing.

Proposer and Chair of the Mental Health Forum Ed Freshwater says: “We welcome

research and guidance on minimum or safe levels of staffing. However, the establishment of a therapeutic relationship underpins mental health nursing and this often requires open-ended interactions – staff must have both support and flexibility to build trust and rapport.

“Safe practice in mental health is not just about minimum staffing, but effective, therapeutic relationships between nurses and service users,” he adds. “What we need now is robust evidence that demonstrates how vital that relationship really is.”

Community nursing, from the District Nursing Forum, will address the need for funding and resources to follow the patient so that community nursing capacity is able to meet increasing demand.

Suicide from the Mental Health Forum, will discuss ways to improve suicide awareness within nursing practice.

There's also a diverse programme of professional events. To view the full agenda or to sign up to attend Congress for free, go to www.rcn.org.uk/congress

IN THE SPOTLIGHT



Society of Orthopaedic and Trauma Nursing

Who's the Chair?

Sonya Clarke, Senior Lecturer, Pathway Leader for Orthopaedics and Fracture Trauma/Continuing Professional Education, and Professional Lead for Children's Nursing at Queen's University in Belfast. Sonya was on the forum steering committee for four years before becoming Chair three years ago.

Highlights?

The forum worked alongside the British Orthopaedic Association to produce important guidance and an observation chart for the early detection of compartment syndrome. Since Sonya became Chair, there has also been a concerted effort to make the forum more representative of the whole of the UK, with members from three of the four countries currently sitting on the committee.

What's coming up?

The forum will be hosting a fringe event at Congress in Belfast on

Tuesday 15 May, which will look at updating a competency framework for orthopaedic and trauma practitioners.

Why join?

Sonya says: "Being involved in the forum is really rewarding. It's a fantastic opportunity to help move your specialty forwards. We have members working across the lifespan in orthopaedic and trauma nursing practice and education, so it's a really unique network that has something to offer everyone."

Find out more about the Society of Orthopaedic and Trauma Nursing at www.ren.org.uk/forums or visit its Facebook page.



Specialty developments... within neuroscience

Towards the end of last year, it was reported that the development of treatments for Huntington's disease took a significant step forwards with the successful trial of a new drug that disrupts the creation of the harmful protein which attacks the brain cells of those who have it.

Experts were said to have seen this development as the biggest breakthrough in neurodegenerative diseases in half a century.

Elise Adam from the Neuroscience Forum says: "IONIS-HTTRx has been shown to lower the mutant huntingtin

protein and, although this development is not a cure for Huntington's disease, it may lead to a potential treatment and provides hope for the future.

"Since the announcement regarding this trial, several of my patients and their relatives have contacted me to learn more about it and possible future research. My patients realise this might not be available to benefit them, but they are excited that their children or grandchildren could possibly be able to access an effective treatment. This is a really exciting breakthrough, thanks to the research teams and especially the courageous volunteers who took part in the trials."

WHAT I'M THINKING



Linda Bailey Public Health Forum committee member

Even if it hasn't impacted on your work yet, every branch of nursing will be affected by advances in knowledge about genomics and the human genome.

There is a real possibility that some hereditary conditions, such as haemophilia, will disappear altogether, while treatments for other conditions, such as cancer, will change dramatically. Nurses and midwives working in infertility and maternity services may also find the care, treatment and advice they have traditionally given will change in future.

According to the Journal of Gene Medicine, there are nearly 2,500 clinical trials involving gene therapy in progress or completed, with the majority of these (64.6%) addressing various cancers.

With the advances in knowledge gained through such trials comes a rise in "personalised medicine" with many more treatments being tailored directly to individuals. In December 2017 the New England Journal of Medicine reported a successful trial using gene therapy with people with haemophilia B and another reporting significant advances in gene therapy for haemophilia A.

These recent, rapid advances in what we know about genomes, genetics and epigenetics will all have wide implications for nursing.

<https://tinyurl.com/ycstmnen>



16 EVENTS

For details of more events visit the region and country pages of the RCN website or go to www.rcn.org.uk/events

London

Hand in glove: glove use and skin health masterclass

26 April
RCN HQ
20 Cavendish Square
London W1G 0RN

This masterclass marks Glove Awareness Week, which the RCN is hosting at the end of April to remind members about the importance of appropriate glove use.

An updated version of the RCN's popular *Tools of the Trade* guidance highlighting issues around work-related dermatitis and choosing the right gloves will be launched at the masterclass. The event will focus on important issues relating to gloves, skin

health and infection prevention, including the association between glove use and hand-hygiene improvement strategies, and the drivers for early recognition and management of workplace dermatitis.

Rose Gallagher, RCN Professional Lead for Infection Prevention and Control, said: "Glove awareness is more important now than ever and the masterclass will really drive home some key messages that all nurses should note."

🕒 The event, for nursing staff in all settings, is free for RCN members and £20 for non-members. For details and to book your place go to www.rcn.org.uk/glovemasterclass or call 02920 546460.



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Looking after yourself

A workshop on the importance of self-care is among the highlights of the RCNi Nursing and Careers Jobs Fair, which will be held on 20 April in London

“Taking care of yourself is important not only to sustain your nursing practice and provide excellent patient care,” says RCN counsellor and service co-ordinator, Tanja Koch. “It also helps ensure you have a good work-life balance. A good level of self-care benefits all areas of your life.”

But in reality, many nursing staff don't value their own needs highly enough, she says. “In the counselling service, we often find that nurses put themselves last.

“They have a real dedication to ensuring that patients come first, so they don't look after themselves, assess how they're feeling and whether or not they're struggling,” says Tanja.

This can mean that when nursing staff finally seek help, they're no longer coping. “More members are coming to us in crisis,” Tanja says. “They may have sacrificed their own wellbeing to look after patients, but if they make a mistake, the responsibility is theirs. We want to avoid that.”

To that end, the RCN has developed an interactive workshop, delivered nationally since 2015, which encourages participants to share their own experiences after assessing their self-care. “It's to help nurses re-engage with what they already know, transferring some of the skills to themselves that they would apply in patient care,”



explains Tanja. “It's a reminder that if they can't look after themselves, they won't be in the best state to look after patients.”

Tanja will be running two hour-long workshops at the London Jobs Fair, with up to 40 nursing staff taking part each time. Among the aims is to equip them with tools that encourage them to assess themselves more regularly, even on a daily basis. “If they then find they're struggling, we want them to seek help sooner,” she says. “If they come to counselling earlier, recovery is a lot quicker.”

Early warning signs include sleep disturbance, changes in appetite, lack of concentration, making mistakes and being anxious or irritable. “We all go through

short-term stresses, and everyone can work with that, but if it's prolonged and can't be resolved, then it needs to be addressed,” she advises.

Tips to better manage your own self-care include regularly checking in with how you're feeling. “You can do it while brushing your teeth or commuting to work,” says Tanja. “And remember that small things can make a big difference.

“Ask yourself - if there is one thing you could change this week, what would it be? It could be as simple as actually taking your lunch break or seeing your friends. And if you are really struggling, talk to someone you trust, whether at work, a friend, family member or counsellor.”

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Small things can make a big difference

🕒 For more information about the RCNi Nursing and Careers Jobs Fair, including the seminar programme and a full list of exhibitors, visit www.rcnbulletinjobsfair.co.uk/london

Find out more about the RCN's Healthy Workplace, Healthy You campaign at www.rcn.org.uk/healthy-workplace

Words by Lynne Pearce