The ongoing NHS crisis should cause the Government to “think hard” about how it approaches talks on pay, terms and conditions, says the RCN

The past few weeks have seen NHS services stretched to breaking point, with nursing staff around the country battling to deliver the best care possible in the face of mounting pressures.

Figures from NHS England showed only 85.1% of A&E patients were treated within the Government’s four-hour target in November and December, the lowest level since the target was introduced in 2004, and there have been reports of patients dying on trolleys in corridors because of overcrowded wards.

Prime Minister Theresa May has apologised to patients whose operations have been cancelled, but RCN Chief Executive & General Secretary Janet Davies said health care staff were also owed an apology.

“This crisis was entirely predictable,” said Janet. “For years, too few nurses have been trained, and vacancy levels have been allowed to get higher and higher. There are now 40,000 nurse vacancies in England alone. For years, the Government has underinvested in health and social care. That failure of planning lies behind this winter’s crisis.”

Janet added the resumption of exploratory talks on pay between the Government and NHS staff side was a chance for officials to “think hard” about their approach, and that there was a direct link between the current crisis and nursing pay.

“Squeezing the wage packets of nursing staff who are working harder than ever before leaves them feeling demoralised and undervalued. And for many, it’s the final straw that pushes them to take early retirement or quit the profession for an easier job. When nurses quit, beds have to be closed if there’s no one else to staff them.

“Until the Government takes the shortage of nurses seriously, ministers are likely to find themselves having to make many more apologies for shortfalls in care.”

Find out more about the pay talks on page 6.
Members have been keeping up the pressure on the Government in an effort to secure a meaningful pay award for nursing staff in the spring.

As part of the RCN’s Close the Gap campaign members across the UK have been meeting with their elected representatives to emphasise the impact of pay restraint and explain why any pay rise must not be linked to productivity.

Lucy Wright met with her MP, Health and Social Care Secretary Jeremy Hunt (pictured).

“I felt he needed to know what was happening on the ground in his constituency,” said Lucy, a community nursing clinical lead in Waverley, Surrey. “I told him I was really worried about patient care and the most vulnerable people in our society. He listened and I hope he went home and thought about what I said.”

Lara Carmona, RCN Associate Director for Policy and Public Affairs (UK & International), said: “It’s great to see members engaging with MPs, regardless of party.

“We want everyone to champion our causes to achieve the best deal for our members and for patients. An MP might not agree with you or with the RCN about some issues, but it’s important to consider how you can help change their mind. Campaigning to make change means using every chance we have to make our voice heard.”

Hear from another member about meeting his MP on page 5.
Have your say on organ donation

In 2009, RCN Council supported an opt-in system for donation. This was the system in place across the whole of the UK at that time. Since then, much has happened and the RCN has decided it’s time to review its position.

Each UK country is able to make its own laws on consent for organ and tissue donation. In England, Scotland and Northern Ireland there is currently an “opt-in” system in place. This means those who have expressed a wish to donate organs and tissue after death will be considered for donation. If someone has not expressed a wish to donate during their lifetime, their family would normally be approached to make a decision on their behalf.

In an “opt-out” system people are presumed to have given their consent to organ and tissue donation after death, unless they have actively recorded their decision to opt-out on a formal register. The law in Wales changed to a “soft opt-out” in 2015, which permits families some level of involvement in the decision to remove organs or tissue and also includes a number of safeguards on who is presumed to have given consent.

The RCN is reviewing its position, partly in response to plans to change the laws on consent in England and Scotland and to understand the experiences of members in Wales.

RCN policy adviser Rachel Cackett said: “This is an issue that many people feel passionately about. Whatever your views, please do share them through the survey to make sure your voice is heard in our review, and encourage others to do the same.

“All members’ views are important, regardless of how regularly they deal with these issues in their day-to-day work or where they live in the UK.”

The survey is anonymous and will take no more than 10 minutes to complete. Visit: https://www.smartsurvey.co.uk/s/AVQDU/

Members are encouraged to share their views on consent for organ and tissue donation after death in an RCN survey

Two important member consultations will shortly get underway and the views of activists will be vital.

Firstly, the College is asking members to share their experiences of working with digital technology. Nursing staff can take part in an interactive online seminar or attend one of a series of traditional workshops being held across the UK next month.

The RCN will use the information to identify any gaps in the digital literacy of the nursing workforce and lobby for improved education, training and development. The consultation results will be published before this year’s Congress in Belfast.

The College also needs to know if members think the RCN should lobby for a change to the legislative framework for termination of pregnancy services across the UK. The College currently doesn’t have a position on the decriminalisation of abortion but has published a position statement on termination of pregnancy.

Visit www.rcn.org.uk for more information.

Cabinet reshuffle

Following Prime Minister Theresa May’s recent cabinet reshuffle the Department of Health has now been renamed the Department of Health and Social Care. Jeremy Hunt remains in post with an expanded remit as Secretary of State for Health and Social Care.

He is joined by two new ministers, Caroline Dinenage and Stephen Barclay, who replace Philip Dunne in an enlarged ministerial team.

The RCN is in the process of writing to the new ministers to request introductory meetings to update them on the organisation’s priorities.

Bring on Belfast

If you’re yet to book your place at this year’s RCN Congress then now’s the time to do it.

Flybe has a special promotional offer for members on flights to and from Belfast – book by the end of February and receive a 10% discount. To take advantage of this offer, enter FLY2RCN in the promo code box on the Flybe homepage (you’ll find it just above the blue “Find Flights” button).

And don’t forget you can submit emergency agenda items right up until the end of Congress – visit www.rcn.org.uk/congress

RCN Congress takes place from 12-16 May at the Belfast Waterfront.
Maria Trewern shares her vision for her new position as Chair of RCN Council

"There’s a time to stand up and a time to speak out”

I’m so excited about my new role and the opportunity it gives me to steer the RCN forward. It’s my priority to increase the value of the profession and to ensure safe staffing so that patients receive high quality care. It’s about having values, and not being afraid to do or say what is right. There’s a time to stand up and there’s a time to speak out – I believe that time is now.

Another aim is to make sure that the new trade union and professional committees are able to do what they need to do. To be supported but also given the freedom to be creative and innovative. I want to bring a freshness to things. To work in a different way.

Chair of Council is a governance role which is there to make sure the organisation continues to deliver what it should do for members, without whom there would be no RCN. It’s my job, and that of RCN Council, to make sure things are on track and are being well managed. We make sure the organisation adheres to its core principles, its constitutional and strategic plan, and has a strong financial and member base.

I can see the challenges ahead but I have huge belief in this organisation. I want it to be strong, and to be there for members with its dual role as a trade union and professional body, which is its unique strength. It’s my mission to grow and develop the College so it has a firm reputation as a professional organisation both nationally and internationally. I’m looking forward to the months to come.

What to check before you commit to a contract

New Year’s resolutions can often include the aspiration of a new job or a new career direction. But looking for work can be a daunting experience, and when you’re offered a new job it’s hard to know what to ask and what to check before you sign on the dotted line.

RCN Direct receives a lot of calls from members related to contractual issues. These can include disputes over pay, annual leave and probationary and notice periods. Often these issues could have been resolved if the member had checked the contract and policies first.

Once signed, a contract is a legally binding document and if it’s breached there can be serious consequences. As a result, we’ve created a contract checklist – it includes ten key areas members should consider before they sign.

View the checklist online and download a PDF copy at http://tiny.cc/contract-checklist

For more information, speak in confidence to an RCN Direct adviser any time between 8.30am and 8.30pm, 365 days per year.
You need to take ownership

I’ve been an RCN member for most of my career but until recently I wouldn’t have described myself as “active”. If I’m honest, I thought the RCN didn’t do enough.

That all changed when I was talking to a friend, who said that it can only do what you ask it to. That was a lightbulb moment for me. I became a learning rep and set about increasing the RCN’s presence in my trust.

When I was offered the chance to meet my MP, Penny Mordaunt (see above), as part of the Scrap the Cap campaign I saw it as an opportunity to do something more. I spoke to her about the campaign and how pay is having a massive impact on recruitment and retention in the NHS, among other things.

It’s easy to think of politicians as dismissive, but she listened to me carefully and took what I was saying on board. I was pleasantly surprised with how the meeting went.

If we don’t try to engage MPs, we won’t change anything. You can’t just rely on someone else to speak for you – you need to take ownership. Without so many members getting involved in the campaign, the cap would never have been scrapped. Now we need to maintain the pressure on the Government if we want to secure a meaningful pay rise for nursing staff.

Chris Elston, RCN learning rep

Turn to page 6 for the latest on pay talks.

LEGAL UPDATE

Weekly rest periods

The EU Working Time Directive entitles workers to a minimum uninterrupted rest period of 24 hours in each seven-day period.

In Maio Marques da Rosa v Varzim Sol, the European Court of Justice was asked to determine whether these weekly rest periods can be given at any point during a 14-day period. The answer was yes.

Mr da Rosa was employed at a casino that operated every day, save for Christmas Eve. He alleged he was required on occasion to work for seven consecutive days without a weekly rest period, and when he was made redundant he sought damages, both for the overtime he believed he should have received for those days and because he had not benefited from his weekly rest periods.

No such limitation

He argued he should have been granted 24-hour rest periods after every sixth consecutive day of work. The casino maintained there was no such limitation in the directive and it would have been impossible for their business to operate if it provided workers with consecutive weekly rest periods (on the seventh day of week one and the first day of week two) if requested.

The court concluded there was no requirement for a weekly rest period to be provided after six consecutive days of work and it can be provided at any time within each seven-day period. Therefore, a worker can have weekly rest periods on both day one and day 14 of any 14-day period and, as such, working 12 days consecutively is permissible.

This interpretation is of course relevant for members working in health care and providing round-the-clock services.

Joanne Galbraith-Marten
RCN Head of Legal (Employment)
How is the RCN approaching talks with the Government on NHS pay, terms and conditions? And what happens next?

As reported in last month’s Activate, the NHS staff side is in “exploratory discussions” with the Government about possible reforms to Agenda for Change.

Although these talks are not formal negotiations, they nevertheless present an opportunity for the RCN and other unions representing NHS staff to come together with Government officials and representatives from NHS Employers to scope out how a pay deal might be achieved.

As the RCN’s Associate Director of Employment Relations, and its lead negotiator, Josie Irwin’s job is to get the best possible deal for members. She says that while no two negotiations are ever the same, good relationships with the other stakeholders, developed over years of working together on previous deals, make a difference.

“Having trade unions representing different groups of staff with different priorities around the table could be challenging,” Josie acknowledges.

“But strong working relationships have developed between the trade unions, employers and even Government officials since the discussions which grew into the Agenda for Change agreement in 2004. Partnership working in the NHS is more productive and positive than in other areas of the public sector, which is a help in any negotiation.”

“We try to be inclusive”

Josie says the trust built up among the staff side representatives helps offset the difficulty of having so many stakeholders involved.

“The six organisations which form the staff side executive, of which the RCN is one, do the bulk of the negotiating and the remaining unions trust us to get on with the job. We’re good at reporting back so they know what’s going on and we try to be inclusive.”

In terms of how much of what’s being discussed in the talks can be shared outside the four walls of the negotiating room, Josie says there’s a delicate balance to strike between transparency and confidentiality.

“On the one hand you want to be as open as possible so members are aware of what’s going on and can share their views, but you also need a degree of confidentiality because you sometimes need to take risks to get what you want.”

She says another challenge of these talks is the current economic climate, particularly with Brexit continuing to cause uncertainty.

“The Chancellor is reluctant to open his coffers for anyone at the moment, and when we’re talking about pay for 1.3 million NHS staff that’s potentially a lot of money that’s involved. We have to build a case for why the NHS is more deserving than other areas, which at the moment it’s doing for itself with all the headlines around winter pressures.

“But this is also where members have a vital role to play. All the campaigning work done over the summer for Scrap the Cap has really helped, but we need to make sure we keep up the noise. Members need to be putting pressure on the Government to unlock the coffers as that will make it easier for us to state our case.”

In terms of what comes next, Josie adds: “If we get a sense these talks could lead to formal negotiations, the RCN’s Trade Union Committee would be asked to give a steer on how to progress. Any deal outlined as a result of negotiations would be put to members for consultation.”

Members have a vital role to play”

www.rcn.org.uk/closethegap
Finding evidence

The RCN Library and Archive Service can help you support members. Here’s how

When you’re representing a member, no matter the situation, it pays to ensure you have all the tools at your disposal to achieve the best possible outcome for them.

One way to strengthen your case, according to Senior RCN Officer John Wilkinson, is to come armed with published evidence to support your arguments – and the RCN can find it for you.

“If I look at a situation and see there’s a plausible way I can help a member to articulate their point using evidence, I’ll contact the library team and ask them to do a literature search,” says John.

“I tend to find employers are impressed by it. It isn’t just a Google search, it’s something done by a qualified librarian at a credible organisation. A responsible employer should welcome that as an intelligent way of getting a fair outcome.”

By way of an example, John refers to a situation where he was working with a member who was accused of mishandling a patient during an epileptic fit and causing bruising while restraining the patient. John asked library staff to find evidence about the side effects of sodium valproate, a drug prescribed to control the patient’s epileptic seizures.

“We found four papers which linked the drug with abnormal bruising or with abnormalities of platelet function,” he explains. “I quoted the research as part of the evidence when presenting the case and the member was exonerated.”

Note of caution

John says asking for a literature search “couldn’t be easier” and encourages reps to consider it, although he does sound a note of caution.

“You need to know the right questions to ask the library team to get the most out of it,” he says. “There’s also a process of disclosure to follow, where you need to submit any evidence you intend to use in a meeting to the employer in advance. So if this is something you think could benefit you in your rep work, talk to your local RCN officer in the first instance.”

“Employers are impressed”

While John also stresses a literature search will only come in handy every now and then, and is by no means applicable to every case, he says it’s always worth having in the back of your mind, adding: “It helps employers view the RCN not just as a trade union, but as a credible clinical source too.”

Search me!

Kate Clark, the RCN library’s Information Manager, gives some advice to help you find what you’re looking for.

• Head to www.rcn.org.uk/library and find the “I’m looking for” search box on the library homepage. It works a bit like Google but will find books and articles.

• Type in the words most relevant to your case. In the case described here, for instance, sodium valproate side effects.

• When you have searched, limit your results on the left hand side of the screen – for example, to journal articles and to full text online.

• If you don't find what you're looking for, try alternative search words – for example, try valproic acid for sodium valproate. You could also try using one of the databases, such as CINAHL, available under the Books and Journals tab of the library homepage. Library staff will be happy to advise you about the best sources for your search, and about your search strategy.

• We have a range of video tutorials that demonstrate how to use the library search, CINAHL and other databases. Find them on the RCN’s YouTube channel: http://tiny.cc/librarytraining

Contact the library on 0345 337 3368, email rcn.library@rcn.org.uk or visit www.rcn.org.uk/library
The Government has published its response to the work, health and disability green paper. *Improving lives: the future of work, health and disability* sets out a 10-year strategy to transform the employment prospects for disabled people and those with long-term health conditions. Visit [http://tiny.cc/improvinglives](http://tiny.cc/improvinglives)

The Equality and Human Rights Commission has published guidance for employers on sexual harassment and the law. It includes advice on: employers’ responsibilities; sexual harassment policies and how to put them into practice; handling sexual harassment complaints; and criminal behaviour. Read it at [http://tiny.cc/equalityhumanrights](http://tiny.cc/equalityhumanrights)

An independent review for the Government sets out what employers can do to provide better mental health support for employees to help them thrive at work. It recommends all employers, regardless of size or industry, adopt six mental health core standards, with additional, more exacting, standards for large employers and the public sector. Find out more at [http://tiny.cc/thrivingatwork](http://tiny.cc/thrivingatwork)

An updated booklet from the Labour Research Department aims to support union members, reps and negotiators by explaining the complexities of TUPE, the new regulations and the latest case law. Access it at [http://tiny.cc/TUPEguide](http://tiny.cc/TUPEguide)

**Support and supervision for reps**

The RCN is piloting UK-wide standards aimed at ensuring learning and safety reps receive the same degree of support from the RCN wherever they are in the UK.

While nationwide standards already exist for stewards, the support learning and safety reps receive varies from place to place.

RCN Member Representation and Support Programme Lead Jonathan Bowker said: “This will mean there will be a UK-wide set of support and supervision standards for all learning and safety reps, which will outline what you can expect, how often and from whom.”

An “improvement project” will run over the course of the year at pilot sites around the country – two in England and one each in Scotland, Wales and Northern Ireland.

Each pilot site will nominate a patch and local RCN officers, administrators and reps will test ideas and feedback to the UK-wide committees.

Jonathan added: “By the end of 2018 we will have tried and tested ways of delivering support and supervision to learning reps and safety reps which can then be rolled out across the UK in 2019.

“If your region or country is taking part in the pilot and your patch is involved please consider volunteering.”

**Share your story**

**Members are invited to share their stories and experience of inclusion at work as part of RCN London’s Inclusion Solution project**

The project aims to develop inclusive workplace cultures in order to improve engagement, retention and patient outcomes across the capital.

Wendy Irwin, RCN Equalities Adviser, said: “We’re as curious about good practice in promoting equality and inclusion as we are about your personal experiences of discrimination in the workplace. Members have already shared stories about age, disability, LGBTQ+, gender, pregnancy, race and religious discrimination and we think that’s just the tip of the iceberg.”

The next RCN London Inclusion Solution meeting takes place on 21 March at RCN HQ. If you’re interested in attending or would just like to share your story, visit [www.rcn.org.uk/londoninclusion](http://www.rcn.org.uk/londoninclusion)

**Welsh reps’ conference**

The RCN in Wales recently held its annual representatives’ conference in Llandrindod Wells

The theme of the conference was “Supporting the Workforce” and reps met to identify a strategy for their regions following the introduction of the Nurse Staffing Levels (Wales) Act 2016. Delegates also received an update on the RCN’s partnership work with the Welsh Government and observed an open session of the quarterly RCN Welsh Board meeting.

John Love from the Gogledd Cymru North Wales branch said: “The conference was a great opportunity for representatives to network and to empower and sustain each other to provide excellent member support.”

**Tools of the trade**

**Resources**

- [http://tiny.cc/improvinglives](http://tiny.cc/improvinglives)
- [http://tiny.cc/equalityhumanrights](http://tiny.cc/equalityhumanrights)
- [http://tiny.cc/thrivingatwork](http://tiny.cc/thrivingatwork)
- [http://tiny.cc/TUPEguide](http://tiny.cc/TUPEguide)