RCN ACTIVATE

FOR RCN ACTIVE MEMBERS ACROSS THE UK

AUTUMN 2020

MENTAL HEALTH SUPPORT P8
FAIR PAY FOR NURSING P10
UPSKILLING IN UNCERTAIN TIMES P20
YOUR TRADE UNION COMMITTEE P22

NON-UNIFORM APPROACH

HILARY’S MAKING SURE MEMBERS WHO WEAR UNIFORMS AT WORK CAN GET THE ADAPTATIONS THEY NEED
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Lines open: Mon-Fri 8am-8pm, Sat and Bank Holidays 9am-5pm and Sun 10am-4pm. For Text Phone: first dial 18001. Calls will be recorded 31967-2020
In these tough times, it is hard to always remain optimistic when faced with governments that treat the nursing profession with such disdain. But, when I say the early weeks of our Fair Pay For Nursing campaign have laid the foundations for success, I mean it. The campaign has been designed and driven by members like you and me. Members told us what they’re experiencing right now; members said what would make them feel valued no matter where they work; and members determined how much we are demanding in the next NHS pay round.

This campaign and COVID-19 are among the top priorities for the RCN Trade Union Committee I’m privileged to chair and, in this issue, you can find out more about the committee on page 22 and more about our pay campaign on pages 10 to 14. A second intense phase of the pandemic will be difficult, but the RCN will always be there for members, holding decision makers to account over PPE supplies, the availability of testing and full payment during sickness absence or quarantine, and supporting members through the psychological and physical impact of the pandemic.

In what’s left of this difficult year, you will see the RCN alongside fellow members become increasingly loud about what nursing deserves – starting with a significant and early pay rise. When politicians tell us they cannot afford it, we’ll tell them they cannot afford not to. When they tell us we’ve already had a good pay rise, we’ll tell them our salaries, in real terms, are lower than they were 10 years ago and never reflected the complexity of our role and the responsibility we carry. And when they suggest we must pick having more staff or more pay, we’ll reject that outright and demand safe and effective staffing delivered through fair pay for nursing.

Friends, we will only do this together, so I urge you to please get involved. Look after yourselves and stay in touch.

Graham Revie
Chair of the RCN Trade Union Committee
Talking about pay with other members is the most important thing you can do to support our Fair Pay For Nursing campaign. We’ve developed materials including badges, window stickers and placards to help you spread the word, initiate conversations and build support. Order yours at tinyurl.com/fair-pay-materials

You can also download a campaign leaflet and posters for your workplace at rcn.org.uk/fairpayfornursing or turn to page 11 for your pull-out copy of the leaflet. RCN reps can also find poster templates in our Portal for Online Design. Use the link in the RCN Reps Hub at rcn.org.uk/reps-hub

**Have your say**

Activate is your magazine. Help us get it right by completing our quick, online survey before 11pm on 22 November. Visit https://surveys.rcn.org.uk/s/ VENZG8/

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**Members to be consulted on rejoining the ICN**

In 2013, RCN members voted to discontinue membership of the International Council of Nurses (ICN).

The RCN International Committee and RCN Council have since agreed to consult members as to whether views in relation to the ICN have changed. The consultation will take place from 30 October until the end of November 2020.

Members will be asked to take part in a survey based on the criteria used to assess our international alliances. RCN President Professor Anne Marie Rafferty will also host online, drop-in question and answer sessions for members.

The results of this survey will be shared with members, including elected representatives, to inform the committee and Council’s recommendation to members, for a final decision to be taken by members at the RCN Annual General Meeting in 2021.

Look out for more information on our website at rcn.org.uk/news-and-events

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**Voting applications for Congress 2021 closing soon**

You have until 30 October to apply to represent your branch or first choice forum as a voting member at RCN Congress 2021. We’re also accepting submissions for the Congress agenda and fringe programmes and you have until early January to put forward your ideas.

RCN Congress 2021 is taking place from 16 to 20 May in Liverpool. In the event that the pandemic continues, we’re also making contingency plans for either a hybrid or fully virtual event. Visit rcn.org.uk/congress
RCN Council has confirmed that a General Meeting will be held at the end of November. The decision was agreed by Council members during a meeting on 1 October.

Council also gave approval to commission both an independent review of the presidential election process and market research to explore issues raised in the recent governance review. The decision was made not to recommence the RCN President elections until after the General Meeting.

In a recent email to members, newly-appointed Chair of RCN Council Dave Dawes (pictured) said: “I am determined as Chair to represent the full breadth of RCN members and the issues you care about most. I believe that not only do we need to become more member-led, but we need every single one of you to feel like we have become more member-led.”

As Activate went to press, details for the General Meeting were being finalised. Campaigning in the RCN Deputy President elections had also reopened.

For the latest information, visit rcn.org.uk/news-and-events. Don’t forget you can watch RCN Council meetings online at tinyurl.com/rcn-council-meetings

Your COVID-19 questions answered

We’re continuing to update our online advice guide with the latest information on issues relating to the pandemic and how it affects you or the members you support.

Find answers to frequently asked questions on topics including: pay when self-isolating, pregnancy, testing, mental health and self-care, and annual leave.

We’ve also developed advice guides on PPE (rcn.org.uk/covid-19-ppe) and temporary redeployment (rcn.org.uk/redeployment). If you can’t find what you’re looking for or you need support, call RCN Direct on 0345 772 6100.

Visit rcn.org.uk/covid-19-advice
When a member contacted RCN steward Hilary Nelson asking for support to procure an adapted uniform, it dawned on Hilary that it wasn’t something she’d thought about before.

Liz, the member, had recently had her lymph nodes removed due to breast cancer and as a result of this and other surgery, was unable to stretch her arms above her head making it difficult for her to put on and take off the NHS Scotland tunic.

“Liz told me that for a while she’d had to come in to work early or stay late to find someone to help her get changed,” says Hilary. “It wasn’t an issue I’d come across previously, but I realised so many other members could be in a similar position.”

Liz had spoken to her senior charge nurse who had taken on board her concerns but was struggling to find a resolution, so she approached Hilary for support.

“Liz had spoken to her senior charge nurse who had taken on board her concerns but was struggling to find a resolution, so she approached Hilary for support.

A long process

“In Scotland, we have a national uniform for NHS staff,” says Hilary. “I spoke to my senior officer and we got hold of the national uniform policy which says that uniforms with adaptations to meet religious or medical needs can be ordered.

“We had to go through occupational health and then put in a request with our procurement team. The tunics only cost £4.50, but the
process was long and difficult. We had to keep chasing the request up.”

During this time Liz was still having to ask for help from colleagues. Hilary says: “On rare occasions when there wasn’t help available, Liz would have to travel home in her uniform. When COVID-19 hit, that was no longer an option. We had to go back and say, this is even more serious now and we need a solution.”

Dignity at work

“This issue was very personal for Liz,” says Hilary. “I think it took a lot of courage to ask for support. Now she feels her dignity has been restored.”

Hilary and Liz want to raise awareness so that members can get support from an early stage. Hilary says: “It’s something we can consider when we’re representing members, perhaps through sickness absence or other processes. We can ask that question – will your uniform be OK when you return to work?”

“It’s also something we can raise awareness about more generally. Nursing staff may need adaptations to their uniform for other reasons, such as religious beliefs, but are people aware that’s an option? I think because the national uniform in Scotland was introduced a while ago, there may be less awareness, especially as a lot of the images we see don’t show adapted versions.”

Liz’s adapted tunic has a zip down the front and tunics with three quarter length sleeves, or full-length sleeves for those not undertaking patient care, are also available. Bespoke adaptations can be made too.

Hilary says: “I asked Liz’s senior charge nurse to share the order numbers and procurement information with me so that we’re not starting from scratch next time. “There could be so many other members struggling with their uniform. People in a similar situation to Liz but also people with musculoskeletal problems, arthritis or previous injuries. I hope this is something we can bear in mind as reps when we’re supporting members and working with employers.”

Liz’s view: ‘It’s given me back my self-esteem’

I felt very vulnerable having to ask for assistance to get undressed at work. I also felt awkward that I had to keep asking if there was any news on my adapted uniform.

When Hilary stepped in, she helped to explain the urgency. She made her presence and why she was supporting me known. I don’t think I would have managed to get my uniform without her support. It’s given me back my self-esteem and empowered me.
Supporting members to seek help

As the psychological impact of COVID-19 takes hold, reps can play a powerful role in signposting to sources of support.

It was inevitable that caring for patients in the high-stakes context of COVID-19 would take its toll on the mental health of nursing staff. But now, more than ever, the combination of exhaustion and trepidation about the scale of the second wave is having an impact on members’ ability to cope.

Reps’ work is being affected. Though many are managing fewer formal cases, such as disciplinaries and sickness absence, they’re receiving more calls from members seeking support. In some instances, reps could be the first person a member has felt able to speak to openly about their experiences at work during the pandemic.

Though it can be tempting to try to solve all members’ problems, it’s important for reps to signpost them to specialist psychological support. “We know how empathic our reps are,” says RCN National Officer Kim Sunley. “They want to do all they can, but it’s important that they protect their own mental health and don’t shoulder the emotional weight of what our members have been facing in these unprecedented times.”

**Signposting to support**

Kim says: “The most helpful thing reps can do is to be knowledgeable about the local and national psychological support available and to signpost to it with confidence. It’s crucial to identify the need for mental health support early, have an honest and empathetic conversation about it, but then lead members on to the specialist help they need.”

That support has been increased considerably in light of the pandemic. NHS People has introduced a confidential staff support line, operated by the Samaritans, which is free to access from 7am-11pm, seven days a week on 0800 069 6222.

There is also a confidential bereavement support line, operated by HospiceUK, which is also free to access from 8am-8pm, seven days a week on 0300 303 4434.
The RCN, of course, has its own resources. There’s a dedicated webpage with links to self-care advice, mindfulness videos, free wellbeing apps and country-specific mental health support for nursing staff: tinyurl.com/rcn-covid-mental-health

There’s also the RCN counselling service which offers brief therapy in six sessions to members for free. Members can make an appointment by calling RCN Direct on 0345 772 6100 or find out more at rcn.org.uk/counselling-service

Stopping the stigma

Kim says: “There is no shame in feeling upset, traumatised and distressed by this. It’s a normal response to a very abnormal situation.

“Active members can play a role in raising awareness and acceptance of mental health issues in their workplace and promoting relevant support services. Employers have a duty of care to their staff so should be taking active steps to minimise the impact of stress and working in partnership with reps to support and maximise their efforts.

“Of course, these are unfamiliar and stressful times for reps also. If you need advice, support and guidance in your RCN role, don’t hesitate to contact your supervisor in the first instance.”

Sources of national mental health support for nursing staff

- England: https://people.nhs.uk/pathways
- Northern Ireland: tinyurl.com/MH-support-hscni
- Scotland: tinyurl.com/MH-support-Scotland
- Wales: https://www.hhpwales.co.uk
- RCN: tinyurl.com/rcn-covid-mental-health
- Reps can also find information on mental health support on our online COVID-19 resource for reps. Use your MyRCN details to log into our online learning portal at learn.rcn.org.uk

RCNReps2020

As Activate went to press, reps from across the UK were preparing to discuss mental health and wellbeing, and the impact of COVID-19, as part of our online RCNReps2020 event. Read more at rcn.org.uk/activate

Ali Upton
Chair of the RCN UK Safety Reps Committee

Although we’re not here to provide psychological support to members, as safety reps we can help to ensure employers have adequate mental health support in place.

Through your local health and wellbeing committees, you can have input and oversight of the services offered during the pandemic. You can also use information from your organisation’s health and safety committee, such as sickness absence reports, to identify ‘hot spots’ and then work with employers to investigate this.

As well as signposting members to support, it’s important for reps to remember this support is there for them too. We must consider our own mental health and wellbeing. Taking time for ourselves isn’t selfish; it is vital. We need to advocate speaking out about the impact our roles can have on us and recognise the importance of taking care of ourselves.
Fighting for fair pay

North Lincolnshire branch chair Mel Kerr’s been busy spreading the word about our pay campaign. She explains what drives her and what tactics have proved effective.

Why do you feel so passionate about fair pay for nursing?  
Nursing has always been underpaid in my opinion, so when the government announced a pay rise for other public sector workers in July, it was breaking point for me. I know we’re not due our pay review until next year, but that’s what this campaign is all about—demanding that talks are brought forward so we can receive a meaningful, early pay rise.

What have you been doing locally?  
I share everything the RCN and its elected members put out on social media—videos, infographics, statistics—and have created my own videos too. I’ve also helped organise, and been a key speaker, at local pay protests.

How do you explain the campaign to the public?  
I try to help them understand the facts. We’ve had a real terms pay cut over the past decade. There are more than 40,000 nursing vacancies in the NHS in England.

Students have to pay to do a nursing degree and qualify with crushing debt. And we’re haemorrhaging staff because we can’t make this a desirable job to stay in. A meaningful pay rise would help address all these issues.

How do you start a conversation with nursing staff about pay?  
I always open with the leading question: do you feel you get fair and equal pay for the job you do? The majority of the time the answer is no, then I take it from there. I ask why they don’t feel their pay is fair, what they want, and explain how they can be part of campaigning for change.

How do you think this campaign will be won?  
It’s about numbers. We must get more people involved. The public is on our side, so we need to support them to be active too. We need to be vocal, every one of us, and campaign for what we deserve. It won’t come easily, but we must force the government to listen because honestly, we’re on our knees. We’re crying out for a meaningful pay rise that recognises the true skill, responsibility and knowledge of nursing staff who hold up the NHS.

Find out more at rcn.org.uk/fairpayfornursing
Fair Pay For Nursing campaign

Nursing staff are worse off now than we were ten years ago – a **12.5% pay increase** for staff in the NHS will recover some of that ground;

Nursing is struggling with record vacancies across the UK – a **12.5% pay increase** would help keep more in post and bring in the next generation;

Nursing leads care and changes lives – a **12.5% pay increase** would help show that nursing is valued as complex, skilled and responsible work.

#FairPayForNursing
Throughout the pandemic, the country has witnessed the most impressive demonstration of nursing, seeing it as a highly skilled profession deserving of fair pay. Nursing has been proven to be vital to public health.

But the Fair Pay For Nursing campaign is not about a response to COVID-19.

The Fair Pay For Nursing campaign is about recognising the complexity of skill, responsibility and experience demonstrated every day, by nursing support workers, nursing associates, registered nurses and all members of the profession.

The Fair Pay For Nursing campaign is about making sure that a safety critical profession can reach safe staffing levels and fill tens of thousands of unfilled nursing vacancies.

The Fair Pay For Nursing campaign is about recognising that the salaries of too many nursing professionals has not kept pace with increases to their living costs over the past decade.

Ultimately, the Fair Pay For Nursing campaign is about providing safe and effective care for all people of the United Kingdom.

The Fair Pay For Nursing campaign aims to secure a fully funded 12.5% pay increase for all nursing staff covered by Agenda for Change terms, as part of a one-year deal that applies equally to AfC staff on all bands.

Funding our health and care system is a political choice. After years of inadequate support for the largest health and care workforce in the UK, the government should make the right choice now.

The 12.5% pay demand is the first step in a long-term campaign to achieve Fair Pay For Nursing in all countries in the UK.
By committing to this pay rise in Westminster, funds can be released through devolved funding arrangements, allowing all parts of the UK to move forward on NHS pay.

The RCN expects fair pay for nursing staff regardless of employer, and continues to campaign for fair pay for members working across all independent health and social care sectors.

It is time to pay nursing staff fairly.

#FairPayForNursing

HOW CAN MEMBERS GET INVOLVED?

1. **Talk** to your colleagues about our campaign. This simple action is by far the most effective thing you can do.

2. **Become** an e-campaigner, and encourage your colleagues, friends and relatives to do the same.

3. **Follow** @theRCN on Twitter and Facebook, contribute to the conversations and get involved with campaign actions.

4. **Bookmark** rcn.org.uk/fairpayfornursing to keep up to date.

5. **Remember**, we can only do this together – the RCN, collectively as the voice of nursing.

Members decided the level of the RCN ask. Our members responded to the *Building a Better Future* survey and the Trade Union Committee directly engaged with elected and appointed member representatives, including boards, committees and RCN branch executives who confirmed commitment to pursuing a pay rise of 12.5%.
HOW TO START A CONVERSATION ABOUT PAY

Talking about pay is the single most important thing you can do. Every single member who is aware of and supports our campaign will make it more likely to succeed.

1. Do you think we are paid fairly?

2. What do you think about the RCN’s Fair Pay For Nursing campaign?

3. Do you ever have to do extra shifts or bank work to supplement your salary?

4. Do you think pay is a barrier for people either joining or staying in our profession?

5. Remember, if we, the members, are to be successful, then we, the members, need to be active in our campaign.

rcn.org.uk/fairpayfornursing
The future of nursing

With 2020 marking International Year of the Nurse and Midwife, members joined our #RCN2020 online debate to discuss the challenges and opportunities the future holds for the nursing profession.

There are so many people showing an interest in nursing right now. It’s our challenge and opportunity to pull these people in and make them thoroughly welcome.

**Phil Noyes, RCN steward and Agenda Committee member**

Nursing staff have a special link with patients, and we mustn’t lose that and become something distant at the end of the screen.

**Maggy Heaton, Chair of the RCN UK Stewards Committee and RCN Lancashire West Branch Chair**

What makes nursing unique? We need to formulate a unique identity and a plan to show the public and politicians where nursing wants to be. It needs to be a positive message and one defined by nursing staff themselves or we risk having it done to us.

**Ed Freshwater, RCN Mental Health Forum Chair**

We need to look towards the globalisation of nursing. As the World Health Organization’s *State of the World’s Nursing* report shows, we can learn so much from working together internationally.

**Craig Davidson, RCN Nurses in Management and Leadership Forum Steering Committee member**

As nursing staff, we should be championing all students, nurses and nursing support staff so that we’re all striving for the same thing; to improve care for patients.

**Samantha Spence, RCN learning rep and Agenda Committee member**

We need to value and retain skilled, experienced nurses enabling them to share their knowledge and expertise with their colleagues.

**Sue Haines, RCN Professional Nursing Committee member**

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**Get involved in #RCN2020**

With RCN Congress unable to take place this year, our Agenda Committee chose a selection of debates and events from the Congress programme to take place online this autumn.

Our series of #RCN2020 events runs into early November, so there’s still time to take part and share your opinions and experiences on issues vital to the nursing profession. You can also watch all of the debates and events again online. Visit rcn.org.uk/rcn2020

The World Health Organization recently announced that in Europe, International Year of the Nurse and Midwife will be extended into 2021.
Managing discrimination cases

RCN Head of Legal (Employment) Joanne Galbraith-Marten explains the key issues reps should consider when managing member cases involving discrimination

Use the protected characteristic questionnaire

Under the Equality Act 2010, it’s unlawful to discriminate against someone because of a protected characteristic.

There are nine protected characteristics including age, disability, sex, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief and sexual orientation.

The RCN’s protected characteristic questionnaire is a useful prompt for members to set out the issues as they see them in terms of discrimination. Members can fill in the questionnaire themselves and you get the information at the start of the process ensuring no points are missed when providing representation.

Your RCN supervisor will be able to provide you with a copy of the questionnaire if you don’t already have this.

Manage expectations from the outset

It’s important that you tell the member what is going to happen and who will be involved from the outset so there are no surprises.

Explain all eventualities and make sure you clearly document every conversation you have with the member about the case.

Keep them updated as the case progresses and when the case concludes, you should agree with the member to close it before doing so to ensure they are fully aware you are taking that action.

Carefully case plan the member’s journey

It’s useful to have a clear outline of what will happen
You should never feel that you're taking on a member case alone.

During the case and the member journey. Case plan for every possible outcome including for instances where things might not go as expected, for example, if new evidence comes to light.

**Always seek supervision**

You should never feel that you're taking on a member case alone. Seek support from your supervisor and if you feel out of your depth, have any questions or there is a deadline looming that you're struggling to meet, ask for help. It’s good practice to have someone supervise your work to keep you on the right track.

**Be proactive**

Be proactive and try to progress cases in a timely manner while keeping the member fully informed. Don’t sit on things or wait for them to happen. If your employer says they will do something, check that they have and if they haven’t, ask them why.

**Document everything**

Always document everything that happens so a clear record exists. This could be important if the case progresses to an employment tribunal claim. Aim to document things contemporaneously and use the case management system.

**Escalate legal deadlines**

Any legal deadlines must be escalated to your RCN office immediately. Cases that need legal input, particularly those that don’t have a reasonable prospect of success, should be escalated as soon as possible so that the member can find alternative representation if necessary. If you have any doubt regarding a deadline, please ask your supervisor.

**Time limits must always be acted upon**

For employment tribunal cases, time limits apply. We have three months less one day from the act of discrimination in question to pursue a claim. Do not sit on deadlines as this could have implications for the RCN as members may pursue professional negligence claims if a deadline is missed.

**If in doubt, ask**

Discrimination claims can be difficult. Use all available resources and if you have any doubts or questions, please ask your supervisor for help. They are there to support you.

**Resources to support you**

- Read our online advice guides on discrimination: [rcn.org.uk/discrimination](http://rcn.org.uk/discrimination)
- Find further guidance on the RCN Reps Hub and in the RCN Steward’s Handbook: [rcn.org.uk/reps-hub](http://rcn.org.uk/reps-hub)
- Look out for local RCN training events or ask your local RCN office about training opportunities.
Equality for black nurses

Agency nurse Neomi Bennett BEM has launched a grassroots movement to support black nurses who experience racial discrimination at work.

“The group started in March when the first wave of the pandemic began,” says Neomi. “I noticed that I was always sent to wards with COVID-19 positive patients and wasn’t rotated around the hot areas like other agency nurses. At that point there was a shortage of personal protective equipment (PPE) and there was an occasion when I was told that I could only have a surgical mask, not an FFP3 respirator that provides better protection. I thought it was because I wasn’t a permanent member of staff, but later found out that the other, white, agency nurse on the ward was given the right equipment.

“I would never walk away from patients, so continued my shift, regardless of the risk to my health. But I was so worried afterwards. I self-isolated for two weeks, not able to earn, because I couldn’t face the possibility of passing on COVID-19.”

Neomi wasn’t alone. After talking about her experiences with other black nurses, she learned that they too felt that they were being disproportionately asked to work on COVID-19 wards and weren’t always given the protection they needed.

The conversations she was having were informal at first – small groups of black nurses coming together via Zoom to share their experiences. But word quickly began to spread, and the need for support grew. Black nurses began to die at disproportionately high levels.

Traumatised and petrified

“I couldn’t just sit back and do nothing,” says Neomi. “We were inundated by nurses who wanted to join us. They needed a channel to express what they were going through. They were traumatised by their experiences and petrified about what might happen to them.”

The Equality 4 Black Nurses group was born and from June became more formalised,
with Zoom meetings held every Tuesday at 9pm and experts volunteering their time and advice.

The group now has more than 500 members with input from lawyers who specialise in human rights and race equality and culturally sensitive psychologists. It is run by Neomi and five others. Neomi has received more than 100 calls from nurses seeking support because they feel they have been discriminated against at work.

“Often, it’s that they feel they’ve been targeted in some way, their treatment hasn’t been fair, or they’re being disciplined more harshly than other colleagues who aren’t black when dealing with issues of either the same or very similar circumstances,” explains Neomi.

**Facts not fiction**

The statistics corroborate the anecdotes. The 2019-2020 inclusion data from the Nursing and Midwifery Council shows that black nurses made up 15.3% of new fitness to practice referrals, despite black nurses making up just 8.5% of the total register. Of those concerns raised, 62% of investigations against black nurses resulted in no case to answer.

“The focus of our work now is on supporting black nurses to lodge grievances with their employer,” says Neomi. “It’s about helping them to articulate what they’ve experienced and highlight systemic racism. We support nurses in a holistic way and consider how they perceive the situation as well as objectively review the available evidence. We then help them to write a testimony and seek legal advice to pinpoint discrimination.”

**What is the RCN doing?**

During the pandemic, we continue to call on health care employers to:

- review the allocation of shifts, access to PPE and fit testing for black, Asian and minority ethnic (BAME) staff
- update risk assessment processes to include ethnicity in vulnerable and at-risk groups
- include BAME staff in priority testing
- confirm that staff will receive full pay during any COVID-19 related absences.

See our full list of employer responsibilities for BAME staff at tinyurl.com/rcn-covid-bame

**Related RCN resources**

- Watch our webinar series about tackling race inequalities in nursing: [rcn.org.uk\tacklingracism20](http://rcn.org.uk\tacklingracism20)
- Listen to our Nursing Whilst Black podcast series: [tinyurl.com/nursing-whilst-black](http://tinyurl.com/nursing-whilst-black)
- Find out about and get involved with our cultural ambassador programme: [tinyurl.com/rcn-cultural-ambassador](http://tinyurl.com/rcn-cultural-ambassador)

If a member feels they’re being discriminated against at work, we would advise them to call RCN Direct for advice on 0345 772 6100.

Find out more about Equality 4 Black Nurses at [equality4blacknurses.com](http://equality4blacknurses.com)
District nurse and RCN steward Jill Gale developed online training to ensure nursing staff had access to CPD during the pandemic and to improve patient care in the community.

In April, during the height of the COVID-19 pandemic, Jill Gale, a specialist practitioner district nurse and RCN steward from North Yorkshire, was told to shield at home.

“Managers were looking at how they could utilise the skills of those shielding,” says Jill, who is also a member of the RCN Northern Board. “I’ve previously worked as a trust lead for end of life care and I have experience in developing palliative care policies.

“I was asked to look at what could be improved in this area and to roll out online verification of expected death training to nursing staff in our community services.”

Jill says that for those working clinically, training and continuing professional development (CPD) has been put on the back burner, and in some cases has almost stopped completely, due to the demand and extra workload that the pandemic has brought.

“We wanted to make sure our community staff still had the chance to access training and enhance their skills,” says Jill. “Delivering the training online through Microsoft Teams also meant that those shielding weren’t left out.”

Improving patient care

Jill developed the training herself, scoping the amount of community staff, putting together a presentation and an online teaching session. Jill says: “I’ve now trained
One nurse told me she felt empowered, and now recognised her own worth.

Jill completed her own training in this area many years ago but explains that because it’s not part of the essential criteria for employment, there was a gap in those able to carry it out.

Jill says: “All too often, especially during out of hours, families have to wait a long time before a GP can visit to perform verification of death. Nurse-led verification will help alleviate this problem and families will no longer have the added anxiety of waiting.

“It also enables community nursing staff to provide holistic care for families. They can verify an expected death for a patient they’ve possibly been nursing for quite a few weeks, giving the family support from someone they know at such a difficult time.”

Jill says that this is especially important during COVID-19 with some GPs carrying out verification of deaths remotely. “Community nursing staff in full personal protective equipment (PPE) can now go in and perform that task,” says Jill.

Fit for the future

Staff attending Jill’s course can record 90 minutes of face-to-face training for the purpose of revalidation, complete a self-assessment competency sheet and receive a certificate for their portfolio.

Jill, who has had lots of positive feedback, says: “Staff like the flexibility. They don’t have to spend time travelling and it’s cost effective for the trust as staff aren’t clocking up extra miles or parking fees.

“It’s also rewarding for staff to learn new skills, especially for those who might not be able to work clinically at the moment. One nurse told me that she felt empowered, more competent and now recognised her own worth.”

The training has been so successful that Jill’s trust has decided to make it mandatory for community nursing staff and Jill is working on future-proofing the course for new recruits and those returning from long-term leave by recording a training video that can be accessed at any time.

“We also recognise that some staff might not be doing this task regularly,” says Jill. “Going forward staff will have this extended skill reviewed as part of their annual development review and can refresh their training if needed.”

Jill, who is now looking at other opportunities to deliver training online, says that at the start of the pandemic she was feeling undervalued and left out. “I felt bad that I wasn’t on the frontline helping my colleagues,” says Jill. “But this project has allowed me to contribute to the nursing workforce at this crucial time and deliver safe, cost-effective training, upskilling nurses while we’re in the uncharted waters of COVID-19.”

For RCN advice and guidance on verification of death during the COVID-19 pandemic, visit tinyurl.com/COVID-19-verification-guidance

Words by Zara Davies. Picture by Simon Veit-Wilson
Who sits on the committee?

The Trade Union Committee has 14 members: one member each from Scotland, Wales and Northern Ireland, and one from each of the nine English regions. The remaining two members are from the student and nursing support worker membership categories. Members are elected by the members they represent and sit on the committee for four years, with one half of the committee changing every two years.

What’s the committee’s overall purpose?

It’s purpose is to ensure the RCN develops as a modern, progressive trade union. The committee is accountable to RCN Council, making decisions on its behalf on all the RCN’s trade union functions and activities.

How often does the committee meet?

The committee usually meets at least three times a year. This year, since January, the committee has met 16 times. Many of these meetings were specially convened to discuss and make decisions on important issues, such as the industrial action in Northern Ireland, the industrial action ballot on Guernsey, the COVID-19 pandemic and the RCN pay campaign. During the height of the pandemic, the committee also received COVID-19 briefings from the RCN’s Executive Team.

What work does the committee provide advice and strategic direction on?

The committee ensures member voices are reflected in RCN activity related to protecting and enhancing members’ pay, and terms and conditions of employment. Currently, the committee is leading the RCN’s Fair Pay For Nursing campaign, engaging with members to inform decisions and to raise awareness about the campaign and how pay processes work.

Individual committee members have been directly engaging with their local RCN boards and groups of members to discuss pay, and the committee has also hosted a series of pay webinars, including a session specifically for RCN reps, so members from across the UK can ask questions and share their views.

Although right now there is a huge focus on the pay campaign and supporting members during the pandemic, the committee is also involved in work around improving health and safety, tackling bullying and harassment and making sure members have access to good quality, stable and sustainable pensions.

The committee is also responsible for ensuring the RCN’s equality and inclusion strategy is embedded in all of the RCN’s structures and activities and is accountable.
Your committee members

- **Graham Revie (Chair)**
  Scotland

- **Tracey Budding (Vice Chair)**
  West Midlands

- **Carol Evans**
  Eastern

- **Neil Thompson**
  East Midlands

- **Karen Sanders**
  London

- **Michael Appleby**
  Northern

- **Denise Kelly**
  Northern Ireland

- **Mike Travis**
  North West

- **Liz Jeremiah**
  South East

- **Jeni Watts**
  South West

- **Jackie Davies**
  Wales

- **Anne Penny**
  Yorkshire & the Humber

- **Karen Pike**
  Nursing Support Worker Member

- **Heather Massie**
  Student Member

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for and monitors the RCN’s performance as a special registered trade union.

**How does the committee make decisions?**

The committee makes decisions based on evidence and member engagement. When a decision needs to be made, the committee members will come together for a meaningful discussion, taking into account views from each country and region across the UK. The committee will try to reach a consensus and then take a vote.

**How can I find out more about what the committee has discussed recently?**

If you’re logged in as an RCN member, you can see agendas and summaries from previous or upcoming Trade Union Committee meetings on our website. Visit [rcn.org.uk/trade-union-committee](http://rcn.org.uk/trade-union-committee)

**How can I feed my views into the committee?**

You can find contact details for your relevant representative at the website link above.

**Join the discussion**

The Trade Union Committee will be continuing to host pay webinars in October and November. These sessions are a chance to find out more about our pay campaign and strategy, ask questions and share your views.

Join in or watch our previous webinars at [tinyurl.com/rcn-pay-webinars](http://tinyurl.com/rcn-pay-webinars)
Look after yourself this winter

It’s important to take time for yourself and look after your own health with our tips below

Get your flu vaccine:

All health and care staff and nursing students should get the vaccine to protect yourself and your patients, and to stop the spread of the influenza virus. The vaccine cannot give you flu.

Stay healthy:

Make sure you eat well, stay hydrated and keep active. For example, take time to get fresh air, a brisk ten-minute walk every day can help you build stamina and make your heart healthier.

Care for your hands:

Regular hand washing is an effective way to help reduce the spread of influenza virus, COVID-19 and other infections. Protect your hands – see our skin health resources and guidance at rcn.org.uk/skin-health

Know what to do if you think you have flu:

Stay at home if you have respiratory infection symptoms. Likewise, diarrhoea and vomiting infections like norovirus also circulate during winter. Minimise contact with others if you are unwell.

With COVID-19 mixing alongside flu, protecting those at high risk is vitally important.

Find out more: rcn.org.uk/beat-the-flu