# Council Agenda

**Date:** 3 February 2020  
**Time:** 13:15 - 16:00  
**Venue:** Annie Altschul (101) - RCN HQ, 20 Cavendish Square, London W1G 0RN

<table>
<thead>
<tr>
<th>Time</th>
<th>No.</th>
<th>Item</th>
<th>Information</th>
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<tbody>
<tr>
<td>13:15</td>
<td>1.</td>
<td>Welcome and apologies</td>
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<td></td>
<td>2.</td>
<td>Declarations of interest</td>
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<tr>
<td>13:20</td>
<td>3.</td>
<td>Minutes and actions from the previous meeting</td>
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<tr>
<td></td>
<td>3.1</td>
<td>Minutes of the meeting on 27 November</td>
<td>(Pages 3 - 18)</td>
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<td>3.2</td>
<td>Action log</td>
<td>(Pages 19 - 28)</td>
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<tr>
<td>13:30</td>
<td>4.</td>
<td><strong>Presentation on BAME nurses in the NHS</strong></td>
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<td></td>
<td>Yvonne Coghill will present on satisfaction surveys of BAME nurses working in the NHS</td>
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<td>13:45</td>
<td>5.</td>
<td><strong>Executive Team report</strong></td>
<td>(Pages 29 - 34)</td>
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<tr>
<td></td>
<td></td>
<td>To include updates on the pay situation in Northern Ireland and Guernsey, the member engagement strategy, the organising model, and an update on communications and parliamentary activity.</td>
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<td>13:55</td>
<td>6.</td>
<td><strong>RCN Foundation report</strong></td>
<td>(Pages 35 - 36)</td>
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<td>14:00</td>
<td>7.</td>
<td><strong>Report from the Safe and Effective Care: Overview and Scrutiny Committee</strong></td>
<td>(Pages 37 - 40)</td>
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<td>14:15</td>
<td>8.</td>
<td><strong>Education strategy</strong></td>
<td>(Pages 41 - 46)</td>
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<td>14:30</td>
<td>9.</td>
<td><strong>Membership category review</strong></td>
<td>(Pages 47 - 60)</td>
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<td>Update on the member category review consultation</td>
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<td>14:45</td>
<td>10.</td>
<td><strong>International alliances and relationships</strong></td>
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<td></td>
<td>Paper to follow</td>
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15:00  11. Congress 2020 Update and report on 2019 Congress items

11.1. Update on Congress 2020 - Report from the Agenda Committee

(Pages 61 - 66)

11.2. Report on Congress 2019 resolutions

(Pages 67 - 174)

15:15  12. Report from the Trade Union Committee

(Pages 175 - 184)

15:25  13. Report from the Professional Nursing Committee

(Pages 185 - 190)

15:35  14. Report from the International Committee

Paper to follow (The Committee met on 27 January)

(Pages 191 - 194)

15:40  15. Report from the Wales Board

Request from the Wales Board to change a branch name

15:45  16. Arrangements for the April meeting with country and regional boards

To discuss the arrangements for the day and the feasibility of Council receiving reports from country and regional boards.

16:00  Close of meeting

Date of next meeting: Tuesday, 21 April 2020

Membership: Dee Sissons (Chair of Council - East Midlands), Professor Anne Marie Rafferty CBE FRCN (President), Yvonne Coghill CBE FRCN (Deputy President), Jeremy Benton (Council member - South East), Catherine Best (Council member - Yorkshire and the Humber), Dave Dawes (Honorary Treasurer - North West), Fiona Devlin (Council Member Northern Ireland), Geoff Earl (Council Member - Scotland), Amy Fancourt (Council Member - Student), Richard Jones MBE (Vice Chair of Council - Wales), Evan Keir (Council Member - Nursing Support Worker), Dr Joan Myers OBE (Council member - London), Professor Rod Thomson FRCN (Council Member West Midlands), Dr Annessa Rebar (Council member - Northern), Dr Janice Waters (Council Member - Eastern), Geoffrey Walker OBE (Council Member - South West) and B J Waltho (Chair of Congress)

Jane Clarke
Group Secretary
020 7647 3599
jane.clarke@rcn.org.uk
Council

Minutes of the meeting held on 27 November 2019,
at Annie Altschul (101) - RCN HQ, 20 Cavendish Square, London W1G 0RN

Present:

<table>
<thead>
<tr>
<th>Name</th>
<th>Role</th>
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<tr>
<td>Sue Warner</td>
<td>Chair - West Midlands</td>
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<tr>
<td>Richard Jones MBE</td>
<td>Vice Chair - Wales</td>
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<tr>
<td>Professor Anne Marie Rafferty CBE FRCN</td>
<td>President</td>
</tr>
<tr>
<td>Yvonne Coghill CBE FRCN</td>
<td>Deputy President</td>
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<td>Cynthia Davis</td>
<td>London</td>
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<tr>
<td>Dave Dawes</td>
<td>North West</td>
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<tr>
<td>Geoff Earl</td>
<td>Scotland</td>
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<tr>
<td>Amy Fancourt</td>
<td>Student</td>
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<tr>
<td>Evan Keir</td>
<td>Health Practitioner</td>
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<tr>
<td>Heather Mercer</td>
<td>South East</td>
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<tr>
<td>Ann Marie O'Neil</td>
<td>Northern Ireland</td>
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<tr>
<td>Trevor Peel</td>
<td>Northern</td>
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<tr>
<td>Carol Popplestone</td>
<td>Yorkshire &amp; The Humber</td>
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<tr>
<td>Dee Sissons</td>
<td>East Midlands</td>
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<td>Janice Waters</td>
<td>Eastern</td>
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<tr>
<td>Geoffrey Walker OBE</td>
<td>South West</td>
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<td>B J Waltho</td>
<td>Chair of Congress</td>
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Observers:

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<th>Name</th>
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<tr>
<td>Lors Allford</td>
<td>Chair, Trade Union Committee</td>
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In attendance:

Dame Donna Kinnair
Chief Executive & General Secretary

Jane Clarke
RCN Group Secretary

Pat Cullen
Director RCN Northern Ireland (for Northern Ireland pay item)

Theresa Fyffe
Director, RCN Scotland

Tim Golbourn
Director of Finance and Business Enablement

Patricia Marquis
Interim Director, England

Helen Whyley
Director, RCN Wales

Rachel Armitage
Managing Director RCNi

Philip Ball
Associate Director of Communications and Campaigns

Colin Poolman
Senior RCN Officer, Employment Relations, Scotland

Apologies

None

1. Minutes and actions from the previous meetings

1.1 The Chair welcomed everyone to the open part of the meeting.

1.2 Apologies had been received from Pat Cullen, Director RCN Northern Ireland. She would be phoning in for the Northern Ireland item on the agenda.

1.3 There were no declarations of interest.

1.4 Council agreed the summary report of the confidential part of the meeting which would be published on the website.

1.5 The minutes of the meeting on 19 September were agreed as a correct record subject to adding that the item on the Agenda Committee report had included a discussion Congress would celebrate the WHO Year of the Nurse and Midwife,
and correcting a typo in paragraph 5.12.

1.6 In relation to the WHO year of the Nurse and Midwife it was confirmed that the RCN was working with the Florence Nightingale Foundation and that a wide range of activities were being planned.

1.7 Further to Action 2 it was acknowledged that it would be important for the RCN to work with other international organisations as well as to continue to review its relationship with the International Council of Nurses (ICN).

1.8 In relation to Action 10 it was highlighted that a copy of the risk assessment of the impact of Brexit on the RCN’s suppliers and customers had been circulated with the papers.

1.9 It was confirmed that the minutes of the teleconference on 12 November had been approved in the confidential section of the meeting.

2. **Complaints and resolution policy**

2.1 Richard Jones introduced the final draft of the new suite of documents to replace the existing complaints and members’ disciplinary policies.

2.2 He explained that following feedback from the member consultation the Council Task and Finish Group had been reconvened and had been joined by the Chair of the Stewards Committee to review the documentation in light of the comments received. The final documentation had also been informed by legal advice.

2.4 It was confirmed that the Code of Conduct related to a member’s conduct in relation to their dealings with the RCN, and was not at conflict with the NMC Code.

2.5 Council agreed that it was important to have a social media policy although some concern was expressed about whether it may inhibit members using social media.

2.6 Richard Jones was thanked by Council for all his hard work leading this work.

2.7 **Council agreed:**

- To recommend to members at the AGM in 2020 a change of wording of Standing Order 5.5.
  
  **Vote:**
  
  For: 16
  Against: 0
  Abstain: 0

- **A new Regulation which set out standards of conduct**
(This was a special resolution of Council and required a 2/3 majority of Council voting in favour).

Vote:
For: 16
Against: 0
Abstain: 0

- To re-instate a revised Code of Conduct to apply to all members of the RCN

Vote:
For: 16
Against: 0
Abstain: 0

- The new Complaints Policy

Vote:
For: 16
Against: 0
Abstain: 0

- The new Resolution Policy

Vote:
For: 16
Against: 0
Abstain: 0

- The new Social Media Policy

Vote:
For: 16
Against: 0
Abstain: 0

3. Membership Category Review

3.1 Geoff Earl updated Council on the work of the Council Task and Finish Group to review membership categories and plans.

3.2 He emphasised that the work was necessary because the current membership
categories were no longer fit for purpose and did not address the different routes of entry into the profession and changes in nursing roles.

3.3 The Group’s vision was for a single RCN membership with a number of different payment plans.

3.4 The purpose of the paper was to seek Council agreement to the vision and to consulting members on that vision as the next stage.

3.5 Financial modelling would then be carried out and further detailed work undertaken on the specific payment plans that would be needed and plans developed to set out the current governance arrangements in our policies, processes and procedures in a way that was not linked to payment plans.

3.6 It was clarified that the principles behind all the options being presented was that there would be a single entry into membership and different payment plans. Options one and two were broadly the same but used different terminology. It was suggested that the term RCN Professionals for non-registrants, in option one in the paper, needed to be explained more clearly.

3.7 Council voted on the following resolution

**Decision:** Council agreed to consult on the vision for a single membership as set out in Options 1 and 2 in the paper.

**Vote:**
* For: 13
* Against: 0
* Abstain: 4

3.8 It was highlighted that joint membership with other trade unions had created some difficulty in relation to the recent industrial action activity and it was agreed to ask the Trade Union Committee to review the position of joint membership.

3.9 Life-time membership was also raised and it was agreed that this was not a matter for the review.

4. **Pay**

**Northern Ireland**

4.1 Colin Poolman, lead negotiator for pay in Northern Ireland, updated Council on
the latest position.

4.2 He reported that there had been two meetings in recent weeks with employers and the Department of Health and Social Care which had resulted in a pay offer. However, analysis of the offer had revealed that it would result in uneven pay increases across grades and bands, and that it would still not provide parity with nurses elsewhere in the UK.

4.3 Consequently, the offer was rejected and the planned industrial action would go ahead in December.

4.4 Due to poor phone connectivity and the sensitivity of the items being discussed Council went back into a confidential session later in the day for a further update from Pat Cullen, Country Director and Colin Poolman, lead negotiator for pay in Northern Ireland.

**Industrial action handbook**

4.5 Given the pay disputes in Northern Ireland and Guernsey, a new industrial action handbook had been developed to ensure that the RCN complied with trade union legislation and with its own policies and procedures during industrial action, and when taking industrial action including strike action.

4.6 Helen Whyley, ET Lead for Pay explained that the new handbook had been reviewed by the Trade Union Committee and had been tested with members. A number of amendments had been subsequently made to the draft.

4.7 It was emphasised that the legislation in Northern Ireland varied from the rest of the UK, and that the crown protectorates, including Guernsey, had their own industrial action legislation.

4.8 Council was walked through the flow-charts which set out the governance and management responsibilities of industrial and strike action processes were highlighted.

4.9 It was agreed that the wording of the Strike Benefit policy included in the handbook would be double-checked.

4.10 The importance of members understanding the laws on picketing was highlighted and it was noted that separate guidance was being prepared for members outside Northern Ireland.

4.11 It was emphasised that members were being encouraged not to visit Northern Ireland on the days of industrial action or strike action and to show their support in other ways.

4.12 **Decision: Council approved the RCN industrial action handbook.**

**Vote**

For: 16
Against: 0  
Abstain: 0

Guernsey

4.13 This item was taken after lunch in order that Lindsay Meeks, Interim South East Regional Director, Ged Swinton, South East Board Chair, and Steve Mundy, Guernsey Branch Chair, could join by teleconference.

4.14 Lindsay Meeks explained that the dispute in Guernsey was long-standing and was about the parity of nursing staff pay with comparable jobs in the public sector in Guernsey. The aim was to close that disparity.

4.15 It was emphasised that Guernsey was not subject to UK industrial law and nurses did not have the same protections as elsewhere in the UK.

4.16 An offer of 5% had been made in May 2019 but it was noted that the offer would need to be at least 10% to close the gap. The 5% offer had been rejected by more than 90% of Guernsey branch members.

4.17 The latest development was a request to enter a conciliation process which would have a duration of six weeks. If unsuccessful the next step would be arbitration by an industrial disputes tribunal.

4.18 However, given the duration of the dispute to date, it was felt that this process did not preclude RCN members taking industrial action in the meantime. Guernsey branch members were very frustrated by the lack of progress and did not see a resolution in the near future.

4.19 Consequently, a request to ballot members on industrial action had been approved by Guernsey Branch, the RCN South East Board, and the Trade Union Committee.

4.20 In respect of potential consequences for members, it was reported that the indications were that employers would not take individual action against members. However, legal advice was being sought on this matter.

4.21 It was confirmed that the Royal College of Midwives and Prospect were very much allied to the RCN’s position.

4.22 It was also confirmed that the next State elections would be in 2020 and there was concern that the dispute would be put on the back burner whilst the elections took place unless the unions increased the pressure now.

4.23 Council was reminded of the decision in relation to the threshold for the turnout of the ballot in respect of Northern Ireland.

4.24 Decision: Council agreed that the RCN moves to ballot members employed by the States of Guernsey and working for the Guernsey Office
of the Committee of Health and Social Care for industrial action, including action short of strike action and strike actions if no further substantially increase offer is secured during conciliation.

Vote
For: 16
Against: 0
Abstain: 0

4.25 Decision: Council agreed a 30% minimum threshold for the turn-out for the ballot.

Vote
For: 16
Against: 0
Abstain: 0

5. Independent Health and Social Care Strategy

5.1 Dolores McCormick was introduced as the project lead to develop the independent health and social care strategy.

5.2 Council was asked to review the draft project implementation plan.

5.3 Theresa Fyffe, Executive Team lead for the work, confirmed that the work would be overseen by a Council task and finish group made up of members from across the UK working the independent health and social care sector and that a member engagement model would be rolled-out as part of the programme.

5.4 Council was pleased to hear that there had been an excellent response from members interested in joining the group and the appointment process would be completed by the end of November.

5.5 Council also noted that Heather Mercer would continue to be involved with this work after she finished her term on Council.

5.6 A staff programme group would be accountable to the Executive team for the delivery of the work.

5.7 Decision: Council agreed the Project Implementation Plan to develop a UK-wide independent health and social care strategy.

Vote
For: 16
Against: 0
Abstain: 0
6. Update on RCN Bulletin plans

6.1 In introducing this paper Phillip Ball, Associate Director, Communications and Campaigns reminded Council that the first fully digital edition of Bulletin was introduced in 2017 and in the same year Council decided to automatically opt-out new joiners to the print version of RCN Bulletin in order to reduce expenditure and for environmental reasons.

6.2 The impact of that decision will be to reduce the print circulation to less than £100k by the end of 2022 and its print viability would then be questionable.

6.3 Online usage is increasing but is still at a relatively low level.

6.4 It was noted that print and postage costs were also continuing to rise, and in addition advertising revenue was falling as advertisers move increasingly to online platforms.

6.5 Council noted that a member survey undertaken earlier in the year had indicated that members would prefer a less frequent print version of RCN Bulletin. 40% of respondents indicated that they would prefer a quarterly print publication and only 25% wanted a more frequent publication. 23% thought Bulletin shouldn’t be printed at all.

6.6 Council considered the proposed options which included moving to an online publication only with either a phased or an immediate implementation or moving to a quarterly printed Bulletin with an enhanced digital offering. The advantages and disadvantages for each option were outlined. The move to a quarterly printed Bulletin would include halting the opt-out of new members in order to stabilise circulation.

6.7 Given the relatively low levels of engagement with the digital version, Council considered it too soon to move away from the print version completely. It also recognised the increasing costs and the significant numbers of members who would be satisfied with a less frequent print version. The value of the printed RCN Bulletin in promoting RCN services was particularly highlighted.

6.8 Decision: Council agreed to move to a quarterly printed RCN Bulletin with an enhanced online offer.

Vote
For: 16
Against: 0
Abstain: 0

7. Congress 2019 agenda items update

7.1 Council was updated on the process for taking forward the work arising from Congress 2019.
7.2 It was confirmed that Task and Finish Groups were in place along with member and staff leads. Work plans had been developed and update reports presented to the Trade Union and Professional Nursing Committees. Council would receive these reports at its February meeting.

7.3 Council also noted that the work was being overseen by the RCN Executive Team through the Future Nursing Future Workforce strategy board.

7.4 It was confirmed that key staff would, as usual, be attending the Agenda Committee meeting in January.

8. Education strategy update

8.1 It was explained that the development of the RCN education strategy would be taken forward jointly by the RCN and RCNi in order to ensure that the education offering from the RCN Group was fully aligned.

8.2 The timescale, as outlined in the project initiation document, was to complete the strategy within six months.

8.3 A programme lead would be appointed to take forward the work and the budget had been allocated to take the work forward.

8.4 Bronagh Scott, Interim Director for Policy and Practice confirmed that the detailed governance arrangements would be presented to Council at its next meeting for approval and Council would receive regular reports on progress.

8.5 She also confirmed that gaps in the external education market would be explored as part of the work. A competitor review would also take place.

8.6 In relation to paragraph 1.2 of the paper it was requested that the words “who are in positions that support the role of registered nurses” was removed from section iii) since the roles listed did not always support registered nurses.

8.7 Decisions:

Council approved the project initiation document for the development of the RCN education strategy.

Vote
For: 16
Against: 0
Abstain: 0

Council agreed to instruct the RCN Executive to establish the Programme
Board, associated work-stream.

Vote
For: 16
Against: 0
Abstain: 0

Council agreed to request that the governance structure for the project be brought to their next meeting.

Vote
For: 16
Against: 0
Abstain: 0

9. Governance Support Committee

Report of the Governance Support Committee

9.1 Cynthia Davis introduced the report of the Governance Support Committee which had met on 15 October 2019.

9.2 Several of the items discussed had been brought to Council as separate papers and would be discussed following the report.

9.3 Council’s attention was brought to the Council elections where, for the second year running, the ballot papers had been sent by direct mail rather than inserted with RCN Bulletin. It was noted that there had not been a significant increase in turn-out as a result. However, there had been improved turn-outs in seats which had been more hotly contested.

9.4 The Committee had also reviewed the viewing figures on the website of the Council meetings. Both the live stream and the “watch-again” figures were presented in the report. The costs were also presented in the report.

9.5 Council members felt, that although the figures were very low, it was too early to make a decision to stop the streaming, and suggested that increased efforts be made to promote it.

9.6 It was recognised that the costs were higher for filming the meeting that had been held in Wales, and so any decision to move a Council meeting outside of the RCN HQ would require these additional costs to be reflected in the budget.

9.7 The impact on Council’s own discussions of the filming was highlighted. Whilst it was recognised that, in the light of the EGM in 2018, there was a will to be more open and transparent it was also recognised that the sensitivity of some items, for example pay negotiations, meant that it was not always appropriate to
live-stream all the discussions and could inhibit members from speaking frankly.

9.8 Consequently, it was suggested that the Committee continue to review and monitor the viewing figures and provide another report in 12 months.

**Council and committee induction and development programme**

9.9 Council was asked to review the proposed programme for a new induction and development programme for Council, Professional Nursing Committee and Trade Union Committee members.

9.10 Council agreed that individual personal development should be the focus. The importance of evaluation and continued refinement of the programme was noted.

**2020 AGM – Council member election cycle**

9.11 It was explained that the Committee was proposing that an ordinary resolution be taken to the 2020 AGM to re-establish the usual cycle of Council elections from 1 January 2024.

9.12 Council was reminded that following the defeat of a special resolution at the 2019 AGM it had agreed that all the Council Members elected from 1 January 2020 would serve four-year terms.

9.13 This decision had meant Council was not compliant with Standing Order 7.3.

9.14 It was confirmed that the proposed resolution for the 2020 AGM would be supported by a comprehensive communications plan to ensure members understood what they were being asked to vote on and why.

9.15 It was also confirmed that the split between the two and four year term was the opposite to the Trade Union Committee cycle. It ensured continuity of experience to support decision-making related to trade union matters and had been a recommendation of the Council Review.

9.16 Decision: Council agreed to take an ordinary resolution to the 2020 AGM to seek agreement to a one-off transition plan to reinstate the usual cycle of two and four-year terms in the next Council elections in 2023.

**Vote**

For: 16  
Against: 0  
Abstain: 0

**AGM timing consultation**

9.17 Council was reminded that the AGM had been held during Congress week since 2014 and that the key driver had been to increase member participation in the event.

9.18 The change in timing had necessitated a three-year transition to move the
timing of the RCN’s financial year.

9.19 It was noted that approximately 8 times more members now attended the AGM. However, some felt that its timing interfered with the flow, and had changed the tone, of Congress.

9.20 It was therefore felt that it would be a good point to review the decision. It was not, however, proposed to review the timing of the financial year and the AGM would therefore need to be held before the end of May.

9.21 In terms of the consultation document it was suggested that more detail about previous attendance figures be included if they were available.

9.23 It was also requested that the timing of the Scottish school holidays be factored into the proposed AGM timing in the consultation paper. It was confirmed that this, and other factors such as the submission date for the AR21, would be incorporated into the consultation paper. It would also be important to emphasise the original rationale for changing the timing in the first place.

9.24 **Decision:** Council approved the consultation paper about the AGM timing.

**Vote**

For: 13
Against: 1
Abstain: 2

**Fit and proper persons**

9.25 The Chair of Council introduced the paper which proposed to extend the RCN’s Fit and Persons proper test to members of all RCN boards and committees.

9.26 After the introduction it was agreed to proceed straight to the vote.

9.27 **Decision:** Council agreed to amend the Regulation on fit and proper persons criteria to all members of RCN boards and committees. (This was a special resolution of Council and required a 2/3 majority of Council voting in favour).

**Vote**

For: 16
Against: 0
Abstain: 0

**Standing down from Council, board or committees on a temporary basis**

9.28 Council was asked to approve a new Regulation and Policy and Process to provide for members who need to stand down from Council, boards or
committees on a temporary basis.

9.29 It was acknowledged that it was important to have processes in place for members who were ill or who needed to take a leave of absence for some other reason.

9.30 However, there was concern that the proposed process may not be appropriate for all situations – for example, if an employer was satisfied that a member may be too ill to work but could continue to undertake RCN duties.

9.31 It was also felt that a 12 month leave of absence may be too long for terms of office that were only two years.

9.32 It was asked that the Trade Union Committee review the proposals from an employment perspective and legal advice be obtained.

Elections policy and process document

9.33 Council was asked to approve amendments to the Elections policy and process document.

9.34 The amendments had been made in light of the decision by Council to remove the objection period from elections, and to bring it up to date with changes such as the new composition of Council.

9.35 It was suggested that section 13, should reference the new complaints and resolution process. Council however recognised that there could be an issue with timings and the statutory responsibilities of the UK Returning Officer and agreed that legal advice should be taken on this point.

9.36 Decision: Subject to taking legal advice Council agreed the amendments to the Election policy and process document.

Vote*

For: 13
Against: 1
Abstain: 0

*Two members had left the meeting when this vote was taken

10. Report from the Executive team

10.1 Council noted the report from the Executive Team including the Communications and Parliamentary update.

11. Pilot for members to attend branch meetings
11.1 Council noted a report on a pilot project for members to be funded to attend branch meetings and that the findings from the pilot project would come back to Council in the New Year for consideration.

12. **Trade Union Committee report**
12.1 Council noted the report from the Trade Union Committee

13. **Professional Nursing Committee report**
13.1 Council noted the report from the Professional Nursing Committee.
13.2 The Committee had reviewed its terms of reference and those of the Fellows Co-ordinating Committee and asked Council to approve them.

13.3 **Decisions:**
Council approved the amended terms of reference of the Professional Nursing Committee

Vote*
For: 14
Against: 0
Abstain: 0
*Two members had left the meeting when this vote was taken

Council approved the amended terms of reference of the Fellows Co-ordinating Committee

Vote*
For: 14
Against: 0
Abstain: 0
*Two members had left the meeting when this vote was taken

14. **International Committee report**
14.1 The report from the International Committee was noted
15. **Students Committee report**

15.1 The report from the Students Committee was noted.

15.2 Amy Fancourt highlighted a number of the areas of activity undertaken by the Committee.

15.3 Candace Imison, Director of Strategy Development at the NMC, had met with the Committee to discuss a number of issues affecting nursing students.

15.4 Council was also updated on a successful public debate in Northern Ireland and the relaunch of the SIO role as Student Ambassadors at their Annual Conference which had taken place in Cardiff in November.

16. **Nursing Support Workers Committee report**

16.1 Evan Keir highlighted a number of points from the report from the Nursing Support Workers Committee.

16.2 It was noted that there were several casual vacancies on the Committee which were currently being recruited to.

16.3 The Committee had also been planning for Congress, and had discussed plans for a first ever Nursing Support Workers day.

17. **RCN Foundation report**

17.1 Council noted the report from the RCN Foundation.

**Date of next meeting: Thursday, 9 January 2020**

Jane Clarke

Group Secretary

020 7647 3599

jane.clarke@rcn.org.uk
<table>
<thead>
<tr>
<th>Meeting date</th>
<th>Agenda Item</th>
<th>Action</th>
<th>Deadline</th>
<th>Council or ET lead</th>
<th>Staff lead</th>
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<tbody>
<tr>
<td>19/09/2019</td>
<td>3.2 Minutes of meeting on 17 July</td>
<td>Amend to note that the President was in attendance for half the meeting</td>
<td>07/10/2019</td>
<td>Jane Clarke</td>
<td>Stephanie Wilson</td>
<td>Complete</td>
<td>07/10/2019</td>
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<tr>
<td>19/09/2019</td>
<td>3.2 Minutes of meeting on 17 July</td>
<td>Amend to note that the International Committee terms of reference had not been approved</td>
<td>07/10/2019</td>
<td>Jane Clarke</td>
<td>Stephanie Wilson</td>
<td>Complete</td>
<td>07/10/2019</td>
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<tr>
<td>19/09/2019</td>
<td>3.2 Minutes of meeting on 17 July</td>
<td>Add the work referred to in minute 10.12 (about gathering of evidence to re-join ICN) to action log</td>
<td>07/10/2019</td>
<td>Jane Clarke</td>
<td>Stephanie Wilson</td>
<td>Added to 17 July actions</td>
<td>Complete</td>
<td>07/10/2019</td>
</tr>
<tr>
<td>19/09/2019</td>
<td>Summary of meeting held on 18 Sept</td>
<td>Amend the attendance list in the summary report of the confidential business of the previous day</td>
<td>19/09/2019</td>
<td>Jane Clarke</td>
<td></td>
<td>Complete</td>
<td>19/09/2019</td>
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<tr>
<td>Meeting date</td>
<td>Agenda Item</td>
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<tr>
<td>5 19/09/2019</td>
<td>5 - Report from the Executive team</td>
<td>Re-look at the timescales for the Task and Finish Working Group on Expenses to see if some changes can be completed ready for Congress 2020</td>
<td>07/06/2020</td>
<td>Jane Clarke</td>
<td>Vanessa Woods</td>
<td>The timeline has been revisited and work will start as soon as possible in the New Year</td>
<td>Complete</td>
<td></td>
</tr>
<tr>
<td>6 19/09/2019</td>
<td>6 - Students Committee report</td>
<td>Consider inviting CNOs from all Uk countries to meet with the committee</td>
<td>01/01/2020</td>
<td>Jane Clarke</td>
<td></td>
<td>This is in progress</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 19/09/2019</td>
<td>8 - PNC report</td>
<td>Develop the PNC reports to provide a greater level of detail</td>
<td>27/11/2019</td>
<td>Jane Clarke</td>
<td></td>
<td>This feedback was passed on to the Governance team about the drafting</td>
<td>Complete</td>
<td>27/11/2019</td>
</tr>
<tr>
<td>8 19/09/2019</td>
<td>8 - PNC report</td>
<td>Ensure Council members have access to PNC and TU Committee papers on ModGov</td>
<td>15/10/2019</td>
<td>Jane Clarke</td>
<td></td>
<td>Council members were added to ModGov to these committees so they can view the</td>
<td>Complete</td>
<td>15/10/2019</td>
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<td>Meeting date</td>
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<tr>
<td>9</td>
<td>19/09/2019</td>
<td>9 - Trade Union Committee report</td>
<td>Consider asking TU Committee members to join the delegations to party conferences in future</td>
<td>01/01/2020</td>
<td>Helen Whyley</td>
<td></td>
<td>This will be looked at as part of a wider review of the RCN’s participation in</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>19/09/2019</td>
<td>10 - Brexit</td>
<td>Report to be drafted for next Council meeting on the work that has been undertaking on preparing for Brexit in respect of contracts/suppliers and to inform Council of whether a risk assessment had been undertaken</td>
<td>27/11/2019</td>
<td>Tim Golbourn</td>
<td>Vanessa Woods</td>
<td>The assessment is attached to this action list</td>
<td>Complete</td>
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<tr>
<td>Meeting date</td>
<td>Agenda Item</td>
<td>Action</td>
<td>Deadline</td>
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<tr>
<td>11 19/09/2019</td>
<td>12 - Safe and effective staffing - report of Overview and Scrutiny Committee</td>
<td>Consider whether there is more visible way for members to feed into the campaign.</td>
<td>31/10/2019</td>
<td>Theresa Fyffe</td>
<td></td>
<td>Each of the campaigns are underpinned by a member engagement strategy and a communications plan. Through the programme board we discussed how each of</td>
<td>Complete</td>
<td></td>
</tr>
<tr>
<td>12 19/09/2019</td>
<td>13 - International Committee report</td>
<td>Amend terms of reference as agreed and publish</td>
<td>30/10/2019</td>
<td>Jane Clarke</td>
<td>Stephanie Wilson</td>
<td></td>
<td>Complete 15/10/2019</td>
<td></td>
</tr>
<tr>
<td>13 19/09/2019</td>
<td>13 - International Committee report</td>
<td>International Committee to consider joining other global organisations - eg Global Nurses Network</td>
<td>31/12/2020</td>
<td>Anne Marie Rafferty</td>
<td>Bronagh Scott</td>
<td>This is part of the 2020 Work Programme</td>
<td></td>
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<td>Meeting date</td>
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<tr>
<td>14 19/09/2019</td>
<td>13 - International Committee report</td>
<td>Look at standard formats for terms of reference (at GSC Committee next meeting)</td>
<td>15/10/2019</td>
<td>Cynthia Davis</td>
<td>Jane Clarke</td>
<td>It was agreed by GSC to ask the governance team to draft a standard format and to bring</td>
<td>Complete</td>
<td>15/10/2019</td>
</tr>
<tr>
<td>15 19/09/2019</td>
<td>16 - Chair of Council's report</td>
<td>Bring back report on pilot on branch expenses to next Council meeting</td>
<td>27/11/2019</td>
<td>Dave Dawes</td>
<td>Added to Council forward planner</td>
<td>This is on the agenda for the November Council meeting</td>
<td>27/11/2019</td>
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<td>Meeting date</td>
<td>Agenda Item</td>
<td>Action</td>
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<td>16 19/09/2019</td>
<td>17 - Member engagement research</td>
<td>Present NHS findings re BAME satisfaction to Council at next meeting</td>
<td>01/02/2020</td>
<td>Yvonne Coghill</td>
<td>Added to Council forward planner</td>
<td>This will take place in the new year. The agenda for the one day meeting in November is too full to accommodate this item</td>
<td>18/12/2019</td>
<td></td>
</tr>
<tr>
<td>17 27/11/2019</td>
<td>1 Minutes (19 sept)</td>
<td>Amend section on Agenda Committee report to include discussion on WHO Year of the Nurse</td>
<td>31/12/2019</td>
<td>Jane Clarke</td>
<td>Complete</td>
<td>18/12/2019</td>
<td></td>
<td></td>
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<tr>
<td>18 27/11/2019</td>
<td>1 Minutes (19 sept)</td>
<td>Amend typo in paragraph 5.12</td>
<td>31/12/2019</td>
<td>Jane Clarke</td>
<td>Complete</td>
<td>18/12/2019</td>
<td></td>
<td></td>
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<tr>
<td>19 27/11/2019</td>
<td>4.2 Industrial action handbook</td>
<td>Circulate final version to Council</td>
<td>31/12/2019</td>
<td>Helen Whyley</td>
<td>Completed</td>
<td>29/11/2019</td>
<td></td>
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<td>Meeting date</td>
<td>Agenda Item</td>
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<tr>
<td>20 27/11/2019</td>
<td>8 Education strategy</td>
<td>Ensure the arrangements for the Council Task and Finish Group and the decision making framework is brought back to Council to approve</td>
<td>03/02/2019</td>
<td>Susan Masters/Jane Clarke</td>
<td>Project lead (being recruited)</td>
<td>On February Council agenda</td>
<td>Complete</td>
<td>03/02/2020</td>
</tr>
<tr>
<td>21 27/11/2019</td>
<td>9 Governance Support Committee report</td>
<td>Continue to review Council webstream viewing figures</td>
<td>31/12/2020</td>
<td>Jane Clarke</td>
<td>Stephanie Wilson</td>
<td>Ongoing</td>
<td>Figures will be compiled after each Council meeting in 2020</td>
<td></td>
</tr>
<tr>
<td>22 27/11/2019</td>
<td>9.3 GSC AGM consultation</td>
<td>Amend consultation paper to include more detail about previous attendance figures and dates within which the AGM would need to be held</td>
<td>31/12/2019</td>
<td>Jane Clarke</td>
<td>Stephanie Wilson</td>
<td>Figures not available for the AGM meetings pre it being held in Congress week.</td>
<td>Complete</td>
<td>01/12/2019</td>
</tr>
<tr>
<td>23 27/11/2019</td>
<td>9.5 Fit and proper persons criteria</td>
<td>Publish amended Regulation on website and ensure it is included in all election procedures in 2020</td>
<td>31/12/2019 and ongoing</td>
<td>Jane Clarke</td>
<td>Stephanie Wilson</td>
<td>Completed</td>
<td>13/01/2020</td>
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<td>Meeting date</td>
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<tr>
<td>24 27/11/2019</td>
<td>9.6 Standing down temporarily</td>
<td>Obtain more advice from an employment and legal perspective TU Committee to review proposals before they come back to Council for approval</td>
<td>31/03/2020</td>
<td>Jane Clarke</td>
<td>Stephanie Wilson</td>
<td>Ongoing - legal advice has been received; it will be considered by the Trade Union</td>
<td></td>
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<tr>
<td>25 27/11/2019</td>
<td>9.7 Election policy and process</td>
<td>Obtain more advice from a trade union perspective on the handling of complaints received about candidates standing in statutory elections before the policy and process comes back to Council for approval</td>
<td>31/12/2019</td>
<td>Jane Clarke</td>
<td>Stephanie Wilson</td>
<td>Ongoing - legal advice has been received and it will be discussed by GSC on 4th Feb</td>
<td>Completed</td>
<td>27/01/2020</td>
</tr>
<tr>
<td>26 27/11/2019</td>
<td>13 PNC report</td>
<td>Publish amended terms of reference for PNC and Fellows Co-ordinating Committee</td>
<td>31/12/2019</td>
<td>Jane Clarke</td>
<td>Stephanie Wilson</td>
<td>Delayed due to web content freeze</td>
<td>Complete</td>
<td>27/01/2020</td>
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<tr>
<td>Meeting date</td>
<td>Agenda Item</td>
<td>Action</td>
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<tr>
<td>27 27/11/2019</td>
<td>AOB</td>
<td>Ask the new Council to consider a proposal to fund Council members to attend branch meetings</td>
<td>03/02/2019</td>
<td>Geoff Earl</td>
<td>Jane Clarke</td>
<td>This will be put on the agenda for the April Council meeting</td>
<td>Complete</td>
<td>Date Completed</td>
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</tbody>
</table>
1. **Purpose of the Paper**

   1.1 To update the Council on the work of the Executive Team this year to date.

2. **Key Areas of Work**

   2.1 As you would expect the Northern Ireland Strike Action and preparations for the Guernsey pay ballot have dominated.

   2.2 It has been the priority for the whole organisation with staff from across the UK travelling to Belfast to support the team in Northern Ireland.

   2.3 During the past week we have turned our mind to the paperwork for the Member consultation ballot in Northern Ireland and Guernsey pay ballot and the new Industrial Action Handbook both of which are on your agenda today.

   2.4 Seeing members and staff working alongside each other and staff from across the organisation working together has been an important moment in time for the organisation.
2.5 Susan Masters is now leading a detailed gap analysis of the National Nurses United organising model to bring back a paper to you in April on how we take forward what we have learned from our Safe and Effective Care Campaign to date and the action in Northern Ireland and Guernsey.

2.6. As you will see Agenda Committee met for two days last week and you have the 2020 Congress Agenda before you today to sign off. Planning for Congress week is now well advanced and I am delighted that we will have Jim Campbell, Executive Director of the Health Workforce at the World Health Organisation as a key note speaker this year.

3. **The internal agenda**

3.1 Work has continued to move forward on our other business priorities for 2020. You have a paper on the Education Strategy. The first meeting of the Independent Health and Social Care Strategy Task and Finish Group took place on the 29th January. We have also launched the independent governance review and the second member consultation on the Member Category Review has been published.

3.2 Looking forward we are preparing information for a number of task and finish groups which you will be starting or continuing work on in the coming months.

3.2 It is also the time of year we are focusing on the Annual Report and Financial Statements and the external auditors will be starting their work in a couple of weeks.

3.3 Our next strategy day is focussing on developing our income strategy and our business intelligence and digital transformation agendas as we pin together the different strands of our strategy work to make sure they are integrated and will work together. We will also be looking at next steps on CRM ready to take an update report to the Finance & Investment and Audit Committees in February and March.

3.4 Nicole Valentinuzzi our new Director of Communications is here today on her first day with us.

3.5 Interviews are taking place in March for our new Director of People and Organisational Development and we have appointed a specialist agency to help us recruit to the new Director of Business Transformation role.

3.6 The regular communications and public affairs quarterly report is attached.
1.1. This paper sets out selected highlights of public affairs and communications across the UK. Council is asked to note this information.

2. Highlights – Communications

2.1. In this period, the HQ Communications Department’s work focused on two priorities: supporting Northern Ireland industrial action and England safe staffing campaign.

2.2. High profile planned media coverage on Northern Ireland included two interviews on the BBC R4 Today programme and a comment piece by the Chief Executive in the Guardian.

2.3. To support the NI action through digital campaigning and social media, we commissioned an external videographer to produce compelling video footage of the days of action – which were well viewed online and will be held in the RCN archives. We created a social media ‘twibbon’ used by close to 1,000 members to visibly show their support.

2.4. The England campaign on staffing for safe and effective care saw its online petition reach over 100,000 signatures in mid-January after significant paid digital marketing and ‘offline’ campaigning. It will be presented to Government in early February and the campaign group will agree the next campaign focus.

2.5. The College launches a report joint with Oxford Brookes University in late January on nursing, gender and pay. At the time of writing, there is a planned interview on BBC R4 Woman’s Hour, plus a comment piece in the print edition of the Guardian.
2.6. An all-member UK-wide survey was launch in mid-January to ask about the experience on people's last shift. This survey first ran in 2017 and will yield qualitative data on the lived experience of members. It will provide an evidence base and campaign tool for the next stage of campaigning in each country when the findings are launched at Congress 2020.

2.7. The department ran a number of successful Twitter chats: with the NMC on new education standards; with Age UK on older people’s mental health; and one on the role of nursing in preventing knife crime.

2.8. After Council approval in November, January saw the RCN Bulletin modernisation project kick off in force, with the first joint meeting of RCN and RCNi staff to discuss the magazine’s digital development and move to quarterly production. The project includes the creation of a reader’s panel to help shape content and more member research is likely to be commissioned. On the digital side, the primary focus will be to improve the functionality of the RCN magazines website, and expand its remit to include news, opinion, multimedia content and adverts. The print issue will move to quarterly after June.

2.9. The new quarterly issue of RCN Activate magazine was published in January. This saw a shift in editorial focus, with more stories about the work and successes of active members, as members said they wanted in research which led to the change in print frequency. Meanwhile, eActivate continues to be sent by email each month and engagement with online articles has significantly increased.

2.10. The new smartphone ‘app’ is still in development and a group of members are involved in the testing. An in-person ‘focus group’ session was also held with members in January to give feedback on the RCN website and improving its navigation. The team working on website modernisation is also working to meet industry standards and accessibility requirements for all users.

2.11. A number of clinical publications were launched in this period, including: RCN’s Brexit Priorities, Nursing Education in Termination of Pregnancy Services, Working with Dogs in Health Care Settings, Futureproofing Community Children’s nursing, Female Genital Mutilation 4th Ed, and Menopause and Mental Health pocket cards.

2.12. On the Year of the Nurse and Midwife, the team is working to ensure: an international dimension is given to Congress; we actively support the Florence Nightingale Foundation throughout the year; we promote interesting content to mark the celebration in Bulletin and on the website. In addition, the RCN logo has been updated to reflect the special year.

3. Key activity highlights – Public Affairs across the U.K.
3.1. November and December 2019 saw the UK General Election (GE), in which the RCN and members campaigned to secure commitments for nursing with activity across social media (#NursingCounts), direct engagement with PPCs and Party Leaders. The campaigning centred around the RCN manifesto which highlighted five key national policy priorities, with country-specific subsections.

3.2. The NHS and wider health system featured heavily in televised debates, General Election messaging and the manifestos of all the main parties, and nursing in particular was a prominent issue. Polling suggested that the Health and Care system was the second most important factor in voters minds after Brexit. This is down to the campaigning efforts of our members and staff speaking with one voice.

3.3. The RCN achieved 4,647 members across the UK taking action to support our campaign, 226 candidates pledging to become Nursing Champions, and 25,111 engagements on Facebook and 2,552 engagements on Twitter. There were almost 10,000 unique visits to our summary of the party manifesto pledges since we published it in Bulletin online.

3.4. Following the GE, the RCN wrote to all MPs with a ‘welcome pack’ which (re)introduced MPs to our policy priorities and encouraged them to become Nursing Champions. MPs committing to be Nursing Champions will be supported to (re)engage with our members and regions to better understand and solidify support for nursing issues locally and nationally.

3.5. Almost a quarter of the MPs elected in 2019 are new, constituting a large group of new potential supporters, but ones we do not know much about. In January, a re-run of 2017 MP polling went into the field in order to track changes to MP’s perceptions of the RCN and our policy priorities. Data and analysis are due in April and will be shared across the College.

3.6. Early 2020 across the UK has seen a see a focus on fermenting support amongst the new Parliament and Government and in particular strengthening our relationship with new (and returning) MPs and Ministers. In Westminster, key engagement has included the Secretary of State for Health and Social Care, the Labour Health team and RCN supporters in both Houses.

3.7. In England, early 2020 has seen a focus on delivering commitments on two key policy priorities. The team continue to work to secure legislation from the new Government on accountability. The forthcoming NHS Long Term Plan Bill has been identified a key legislative vehicle for this.

3.8. Following the announcement of higher education funding for students in England, the RCN continue to call for tuition fee support and to cover the true cost of living for students. Activity is currently being planned in conjunction with the RCN Student Committee ahead of the Westminster Government Budget.
3.9. In Northern Ireland, as a direct result of the industrial action, including strike action taken by our nursing profession in Northern Ireland during December 2019 and January 2020, the Northern Ireland Executive has now published a framework document outlining ministerial commitments on safe and effective care.

3.10. The Health Minister for Northern Ireland has committed to develop the case for safe nurse staffing at the earliest legislative opportunity. RCN NI are now preparing to inform, consult and ballot our nursing staff in Northern Ireland on this framework.

3.11. In Scotland, meetings have taken place researchers from the Lib Dems, Green and Labour to understand each parties plans for manifesto development ahead of the 2021 Scottish Parliament.

3.12. Written evidence was provided to the Scottish Parliament’s Health and Sport Committee in response to their enquiry into the supply and demand of medicines. Associate Director, Eileen McKenna will provide oral evidence to the committee on the non-medical prescribing on Tuesday 28 January.

3.13. At the end of January, RCN Scotland will submit written evidence to the Health and Sport Committee as part of their scrutiny of the Forensic Medical Services (Victims of Sexual Offences) (Scotland) Bill.

3.14. In Wales, following campaigning, the Welsh Government announced an extension of section 25B of the Nurse Staffing Levels (Wales) Act 2016 to children’s inpatient wards on the 4th December 2019. RCN Wales activity is now focused on seeking workforce planning amendments to the Quality and Engagement Bill, finalising the Safe and Effective Campaign Plans for 2020 and ensuring a high profile for the campaign at the Wales Spring Party conferences.
1. Neuro Rehabilitation Education Programme

1.1. Following a competitive tendering process, the Board of Trustees agreed to award the contract to develop and deliver an advanced practice education programme on neuro rehabilitation to the RCN/University of Nottingham. A grant agreement is currently being drawn up. An announcement will be made at the end of January.

2. International Year of the Nurse and Midwife

2.1. The Board has agreed a programme of activities to be undertaken by the Foundation to commemorate the International Year of the Nurse and Midwife. Our flagship activity will be a partnership with six Governmental Chief Nursing Officers (4 UK CNOs, Republic of Ireland CNO and Chief Nurse for Public Health England) on a joint project to raise the profile and status of nursing. The project will entail the development of a narrative around the meaning and value of nursing. These will be underpinned by a social media campaign. As the project develops, further information will be provided to Council.

2.2. Two specific education grant streams will be developed to mark the year. The Monica Baly History of Nursing Award will seek to fund two research projects at £5k each during the year – one to focus on the history of nursing and a second to focus on the history of midwifery. The Foundation will also be awarding a number Trevor Clay International Grants specifically for early career nurses/midwives wishing to study or undertake a relevant education-related activity overseas. Grants of up to £5,000 will be available.
3. **RCN Foundation Parliamentary Reception**

3.1. The Foundation will be holding an afternoon tea reception in the House of Lords in April. Baroness Watkins has kindly agreed to sponsor the reception. The reception will be used to mark the Foundation’s tenth anniversary whilst at the same time launching the findings of a research report on the mental health of nurses and midwives commissioned by the Foundation and produced by the Society of Occupational Medicine.

4. **Care Homes Nurses Network**

4.1. To mark the end of the Foundation’s care homes funding programme, the Foundation Board agreed to fund the establishment of a Care Homes Nurses Network. The Network will be developed and run by the Queen’s Nursing Institute and will provide support and free events for nurses working within a care home setting.

5. **Fundraising activity**

5.1. The Foundation has secured ten charity places for the Royal Parks Half Marathon which will be held in October 2020. We will recruit ten individuals to undertake the run in support of the RCN Foundation’s 10th Anniversary. Each individual will be asked to commit to raising a minimum of £350 for the Foundation.

5.2. A legacy mailing was distributed in November to a selection of the Foundation’s supporters and responses have started to be received. These have included a donation of £100 from an individual, as well as notification from some individuals that they are considering leaving a legacy to the Foundation.

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**Professor Jane Cummings CBE RN**

**Chair, RCN Foundation**
1. Purpose

1.1 The purpose of this paper is to report to Council the progress of the Staffing for Safe and Effective Care Overview and Scrutiny Committee. The Committee had a virtual meeting on 9th January 2020. The report is intended to provide Council with the assurance that the Committee is effectively scrutinising the UK Safe and Effective Staffing Programme.

This was the first meeting of the OSC in 2020 and the first time that it has met since September as the November meeting had to be cancelled due to scheduling issues.

1.2 Council is asked to discuss the report and consider any additional requirements.

2. UK Overview and Scrutiny Committee meeting (UK O&SC)

Member Decision Making

2.1 New committee members

A number of vacancies have arisen on the Committee.
At the next meeting in March the OSC will be welcoming new members from Northern Ireland, Trade Union Committee and the Professional Nursing Committees.

2.2. Review of purpose and role

The UK Overview and Scrutiny Committee is now six months into working as a new committee. It was agreed by the members that at the next meeting the OSC will take the opportunity to reflect on the work and effectiveness of the committee - if it is making a difference and whether it is functioning as it should be. Specifically if the Committee is addressing the recommendations of the ERS report.

The workshop is planned in March 2020 and Council will be kept informed of the outcome.

**Member Communication**

2.3. Communication activity

Ensuring that members are kept informed of progress and contributing to the direction of the campaigns is a key aim.

The Committee asked to receive a detailed report on the communication activity of all country and UK campaigns at their next meeting to confirm that this is being achieved.

2.4. RCN website

The Committee agreed the continued work on the development of the RCN website to enable all campaigning resources to be easily accessible to members in a central location and that consideration be made to including organisational learning outputs and archive material.

2.5. Professional guidance

The work around professional guidance has been delayed and is currently showing RED on the Programme status. Connections are being made with the Professional Nursing Committee (PNC) to identify how this situation can be rectified. It is planned to discuss this issue at the PNC meeting on January 21st 2020.

The Committee discussed the importance of nurses being able to speak up safely and professionally and how they use their professional judgement. It was acknowledge that this is key work for the campaign and the committee praised the Programme Board for progressing this work. Psychological safety and escalation of issues should be included in this. The committee will spend some time discussing what practically can be done at the workshop in March to progress this aim further.

2.6. UK Strategy

Lara Carmona (Associate Director of Policy and Public Affairs, UK and International) presented the work she is progressing with the UK Programme Board on the UK
programme strategy. The Committee acknowledged that this is an excellent start and look forward to seeing the strategy document develop and how this will be translated to staff and members across the UK campaign strategies. An update on development of the strategy will be shared with the UK OSC at its next meeting.

**Member Engagement**

2.7. Representative resources

Two new resource packs have been developed for representatives - including a campaigning tool kit and a resource for safety representatives to improve member involvement in the campaigns. Both have received excellent feedback and were developed with members following a request at the Oct 2019 Joint Representative Conference. The link to these resources have been provided to committee members to review.

There was also a focused discussion on the Northern Ireland situation. The committee commended Pat Cullen (Northern Ireland Director) for her voice in championing nurses and the professional approach during this time. The committee also extended their thanks to all those members and staff who, at short notice and at Christmas time, went to support their colleagues.

The Committee also agreed to consider at the next meeting the changing political landscape and what support they can give, as the RCN builds relationships with new MPs yet to engage with the College.

2.8. Organisational learning

Organisational Learning, Research, Policy and Evidence gathering for the Campaigns is progressing well, including the International Legislation Review and the Safe Staffing Survey.

**Scrutiny Detail and Consistency of Papers**

2.9. The papers scrutinised were:

- Country Campaign and UK Exception Reporting (November)
- Risk Register for the UK Programme Board
- Organisational Learning Workstream Update
- Draft UK Strategy

2.10. Exception reports

In addition to the Professional Guidance showing RED on the programme status, the UK Programme Board also reported delays to work around commercial opportunities. This action is currently at AMBER status and requires pace to complete. It was agreed the Programme Board will address these issues and report back to the OSC at its next meeting in March.
2.11. Financial

The Committee noted that the budget for 2019 is GREEN status and the year end is currently being finalised. The OSC were content to hear that all country bids that were made for 2020 activity were successful and review how these are phased through 2020 at the March meeting.

3. Overall Programme status – RAG AMBER

3.1. There are two areas where action is required to progress the programme. This includes professional guidance and commercial opportunities. The UK OSC were content that the programme Board is taking appropriate action and will specifically review the outcome to these areas in the March meeting.

<table>
<thead>
<tr>
<th>Status (RAG rating)</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Red</td>
<td>Significant issues with campaign. The campaign requires corrective action and the matter should be escalated to the UK Programme Board</td>
</tr>
<tr>
<td>Amber</td>
<td>One or more aspect of campaign viability — time, cost, scope — is at risk. However, the deviation from plan is being mitigated.</td>
</tr>
<tr>
<td>Green</td>
<td>All aspects of project viability are within tolerance.</td>
</tr>
</tbody>
</table>

4. Further Considerations

4.1. The Committee agreed to give further consideration to other board/committee meetings they might want to attend as observers to improve understanding of the breadth of campaigning work happening across the UK.

4.2. The chair of the UK OSC agreed to attend the Programme Board in January 2020

5. Conclusion

5.1. Council is asked to note the report and consider if:

Any additional information requirements are required by Council to be assured that the Committee is giving the required scrutiny to this significant programme of work

UK Overview and Scrutiny Committee Chair: Denise Llewellyn MBE FRCN
ET lead: Theresa Fyffe, Director, RCN Scotland
Project Lead: Terina Scheeres, Head of Customer Services Centre
1. **Purpose**

1.1 The purpose of this paper is to seek agreement from Council on the development of an organisational wide strategy and business plan, including scope, governance, decision making and reporting arrangements.

1.2 This paper is not confidential.

1.3 The Executive team recognised the imperative to develop an organisational wide strategy and business plan for education learning and development. It was agreed that this work will be for completion in December 2020 and undertaken through an extensive four country membership and stakeholder engagement process (see Appendix 1: High level milestones).

2. **Background and Detail**

2.1 The Royal College of Nursing has a long and respected reputation for leading the education, learning and development of the profession and its members, be they registered nurses, student nurses or members in other membership categories including healthcare support workers.

2.2 Since 2017, the college has been engaged in enhancing its education, learning and development programme and offer through what is known as the
Education, Learning and Development (ELD) programme (Professional Offer). This has seen the implementation and testing of the delivery and development of ELD by the RCN, which has included piloting new education delivery methodologies and education programmes.

2.3 Phase Three of the ELD programme marks the bringing together of the RCN Group, consisting of the RCN, RCNi and RCN Foundation. This joint venture will maximise the knowledge and expertise across RCN Group to develop and deliver on a five-year ELD Strategy for the UK addressing delivery of excellence in ELD. The strategy will also address income generation potential for the RCN Group, in addition to the non-commercial offer of the College.

3. Data collection

Between June to October 2019 a UK-wide survey of existing RCN ELD was completed (Appendix 1). Key findings were as follows:

- Access to a library of standardised teaching resources is required
- ELD is delivered by staff with different levels of training in ELD
- 40% of ELD delivered is income generating
- A UK wide charging structure needs to be developed
- There is no organisational wide strategic approach to ELD

These findings will be used to inform the group wide strategy.

3.1 Member & Non-Member Engagement

In order to develop and deliver an organisational wide strategy it is necessary to define the needs of the membership, the wider nursing profession and the institutional market. Development of the ELD strategy will be completed for a consultation draft in March 2020. Data and feedback will be collected from online consultation with stakeholders and senior leaders/groups; 8 four country wide member engagement events and multiple Congress events and information points will gather data from across all sectors of the membership. The consultation document with RCN members, RCN staff and other key stakeholders will inform future work and development of the final RCN Group UK.

3.2 Market Analysis & Sizing Exercise

A competitor market analysis will be carried out to review other ELD/TEL provision including content, quality and commercial offer, taking account of both UK and international markets. The learning from this exercise will be used to inform the RCN Group offer.
3.3 Income Generation Opportunity

Interviews will be conducted with potential purchasers to understand their needs and pain points, and triggers to buy.

3.4 Data Evaluation

Full evaluation of data and process will be undertaken and reported on.

3.5 Scope

Our mandate for developing this strategy will relate solely to the contribution of, and support for, registered nurses and nursing support workers and will support the development of the commercial strategy for the RCN Group.

4. Policy Drivers

4.1 There are several policy drivers at play in this development, and these are recognised as differing across the UK. For example:

- Continuing Professional Development support;
- Nursing Associates (England only) and Apprentice offers are different across the UK;
- Changing delivery models to differing approaches to education access from HEI delivered courses to Practice delivery;
- Changing and inconsistent funding and support across the countries.

4.2 This programme of work addresses the following elements of the Strategic Plan 2013-2018:

- Promoting excellence in practice (1-3)
- Nursing development and education (7-10)
- An effective value-for-money organisation (25)

4.3 It also contributes to the following organisational KPIs:

- The RCN Group is financially viable.
- We are making a positive difference to the profession/practice of nursing.
- We are improving our engagement with members and customers.
- The RCN Group is embracing change.
5. **Scope**

All the countries and regions of RCN UK will be addressed within the strategy with identification that existing RCN group ELD and TEL is delivered in the UK and internationally. The strategy will address provision for nurses and, nursing associates and healthcare support workers as well as their students and trainees, RCN members, non-members and staff of RCN Group. The provision of ELD currently delivered via the employment relations and professional arms of the college will be aligned.

6. **Governance**

At its meeting in November 2019 Council agreed to set up a Council task and finish group to be chaired by a member of the Professional Nursing Committee. The membership of the task and finish group will include a member from Council, Trade Union Committee, the Education and Research Forums and the Student and Nursing Support Worker Committees.

Full reporting will be provided through the governance structure seen in Appendix 2.

7. **Resources**

7.1 Resources & budget will be addressed at the Nursing Strategy Board meeting to be held on February 5th.

8. **Recommendation for Decision**

8.1 RCN Council is asked to approve the development of an organisational wide independent education, learning and development strategy as set out in the attached project initiation document on the timeline at Appendix I.

Paper prepared by:
Dr Nichola Ashby, Head of Professional Learning and Development
Contributions from:
Susan Masters, Director, Nursing, Policy & Practice
Rachel Armitage, Managing Director, RCNi
Jean Christensen, Professional Lead Education
Appendix 1: High level milestones

The RCN group have worked together to approve a project plan which supports the following high-level milestones:

<table>
<thead>
<tr>
<th>High-Level Milestones</th>
<th>Start date</th>
<th>End date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Audit of current education provision across RCN UK.</td>
<td>September 2019</td>
<td>November 2019</td>
</tr>
<tr>
<td>Development of initial programme documentation: PID, Programme Plan, Communication Strategy, RAID Log</td>
<td>September 2019</td>
<td>December 2019</td>
</tr>
<tr>
<td>Legacy document on the RCN’s history of education, learning and practice development to the present day.</td>
<td>September 2019</td>
<td>December 2019</td>
</tr>
<tr>
<td>Establishment of the Governance Infrastructure</td>
<td>November 2019</td>
<td>January 2020</td>
</tr>
<tr>
<td>Establish ToR, membership and meeting dates for RCN Council T&amp;F Board, Programme Board, and Operational Group.</td>
<td>January 2020</td>
<td>February 2020</td>
</tr>
<tr>
<td>Undertake role reviews and a knowledge and skills gap analysis to inform building an Education Team in readiness for future delivery requirements.</td>
<td>January 2020</td>
<td>February 2020</td>
</tr>
<tr>
<td>Conduct a market analysis and report on other providers of ELD/TEL.</td>
<td>February 2020</td>
<td>March 2020</td>
</tr>
<tr>
<td>Draft RCN Group UK ELD Strategy Consultation Document</td>
<td>February 2020</td>
<td>April 2020</td>
</tr>
<tr>
<td>Consultation period (to include circulation of consultation strategy to all members plus consultation workshops)</td>
<td>May 2020</td>
<td>June 2020</td>
</tr>
<tr>
<td>Analysis of all consultation responses</td>
<td>July 2020</td>
<td>August 2020</td>
</tr>
<tr>
<td>Re-draft of consultation document in preparation for presentation to RCN Council on 1 October 2020</td>
<td>September 2020</td>
<td>September 2020</td>
</tr>
<tr>
<td>Publication of final ELD Strategy</td>
<td>October 2020</td>
<td>December 2020</td>
</tr>
</tbody>
</table>
Appendix 2: Governance and Reporting Structure

**RCN Group UK - Education, Learning and Development Strategy Programme**

- **RCN Council**
  - **Professional Nursing Committee**
  - **RCN Council Task & Finish Board**
  - **RCNi**
  - **RCN Foundation**
  - **Nursing Strategy Board**
  - **Nursing Executive Team**
  - **Programme Board Chairs: Susan Masters and Rachel Armitage**
  - **External Advisory Group**
  - **Consultation Exercises**
  - **Operational Group Chair: Nicky Ashby**
  - **Sub-groups (when and if required)**

**RCN Council**

- **Sub-groups (when and if required)**
1. **Purpose**
   1.1. To provide an update on the member categories review.

2. **Detail**
   2.1. Following the latest phase of work, carried out by the member category task & finish group, an updated proposal document has been developed for the next phase of member consultation – see Appendix A

   2.2. This document outlines the concept of a single membership (to replace the current 3 separate member categories) as a gateway through to different payment plans.

   2.3. This next phase of member consultation will open in February and will close on 1 April.

   2.4. The following is the proposed 2020 timeline for the next steps (exact timelines to be confirmed)
<table>
<thead>
<tr>
<th>Month</th>
<th>Event Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feb-March</td>
<td>Consultation</td>
</tr>
<tr>
<td>April</td>
<td>Council sign-off on final proposal &amp; implementation plan</td>
</tr>
<tr>
<td>June</td>
<td>Proposal and timeline for implementation launched at Congress/AGM</td>
</tr>
<tr>
<td>July</td>
<td>Council sign-off payment plan proposals and amounts (including any proposed increase to subscriptions)</td>
</tr>
<tr>
<td>Sep-Oct</td>
<td>Consultation on payment plans/amounts</td>
</tr>
<tr>
<td>Nov</td>
<td>Council sign-off final payment plans</td>
</tr>
<tr>
<td>Jan 2021</td>
<td>Implementation of new single category and payment plans</td>
</tr>
</tbody>
</table>

3. **Evaluation and review**

3.1. Once the consultation closes, responses will be collated, evaluated and reviewed by the Task and Finish Group and presented at the April Council meeting.
We want to find out your views as part of a review of our membership categories and subscription plans.

The aim is to make our arrangements fit for the future and make sure they reflect the changing entry routes into nursing across the UK, support diversity and inclusion, and ensure long-term financial sustainability.

Council will use your views and ideas to build a vision of what the future membership of the RCN should be and propose changes to our current membership categories and subscription plans.

The consultation will open in February 2020 and close on 1 April 2020 and further information on taking part can be found on the RCN website.
1. Introduction and background

Why are we reviewing our membership categories?

The Royal College of Nursing prides itself on being the ‘voice of nursing’ – representing every role, every care setting and every part of the UK.

Historically, only registered nurses were eligible for RCN membership but that was changed in 2011. It’s now simple: if you’re part of the nursing workforce, you’re part of the RCN.

The RCN is consulting members on how we can update our structures and processes to be more inclusive of the whole nursing profession and to support members journeys through nursing.

Your professional development and employment rights are equally important to us, no matter which of the many nursing roles you perform. The RCN works in the interest of all its members and being part of our organisation should be valuable and attractive to every individual. To show that every member is equal, we want your support for a single membership.

Our current structures processes reflect a bygone era for the nursing profession and the RCN must adapt to show it is the voice of everyone working in health and social care. The RCN works in the interest of all its members and no matter where in your nursing career you are right now – being part of our organisation should be valuable to you.

In your workplace our members should be equally respected for the contribution they make to excellent patient care and not divided by job title. The same must apply in the RCN.

The nursing workforce for this new decade will have followed different routes into the profession and experienced different education and development to those at the end of their career. They will work in job roles that did not exist previously - some of which will be registered and others not.

The RCN must adapt to reflect these change and we want your support to move away from membership categories to a single membership.

Background

At RCN Congress 2019, a consultation on membership categories asked for views on the current arrangements and asked what could be improved.

The review work is being led by a dedicated ‘task-and-finish’ group with member representation from across the organisation and is supported by RCN staff.
After reflecting on the findings of the first consultation, the group would like to present RCN members with a new proposal which best fits these three guiding principles:

- demonstrating true equality and inclusivity for the whole nursing workforce;
- ensuring our arrangements are fit for the future and allowing all nursing professionals to benefit from RCN membership;
- ensuring the long-term financial sustainability of the College itself.

Your views on this consultation will inform a final proposal to Council.

2. Proposal – a single membership

Rationale

A new model must be based on diversity and inclusivity. While the RCN is already proudly committed to this principle, this fundamental change would make it more overt.

A single membership allows the RCN to reflect the workplace and the realities of the nursing profession across the UK.

Background

Last year, during the consultation, you told us that our membership structures must change to be inclusive of the whole nursing profession.

Currently, your membership category is dictated by the job you hold – ‘registered nurse’, ‘nursing support worker’, ‘student’ or ‘retired’.

But in 2020, it is increasingly difficult to use these titles to describe every member of the nursing workforce. It is now the case that the NMC registers more than the ‘registered nurse’ role; and an individual undertaking a nurse apprenticeship is both in education and the workplace. It is time to turn this on its head. In future, the RCN can make its membership offer open to every part of the nursing profession and not try to make new members fit into old boxes.

Payment plans

A single membership would not mean everybody will pay the same.

The 2019 consultation found that members support the concept of a link between your membership plan and your income, including concessionary rates for newly qualified members, those on career breaks, those receiving benefits, those working part time, and retired members.

The aim is to provide a seamless transition from our current structures and payment plans to a new single membership with a range of payment plans for members at different stages of their career linked to their income. Membership fees will not be increased during this period.
There will be payment plans for registered nurses, nursing associates, university students, and nursing support workers who are not on the register.

Additionally, we propose payment plans for:

- **Trainees** – such as those being paid to train and work, such as trainee nursing associates and nursing apprentices;
- **Retirees** – former registrants or nursing support workers wishing to retain their RCN membership;
- **Career break and parental leave**;
- **Joint membership** – those who are part of another union or relevant professional body.

**How does this fit with the way the RCN is governed?**

The RCN is proudly led by members, for members. By which we mean that members of the College are able to vote for the UK-wide governing Council and members of the RCN’s two committees – the Professional Nursing Committee and the Trade Union Committee – which set the strategic direction of the organisation, work with staff and are supported to take key decisions.

At present, membership categories and governance arrangements are intrinsically linked. RCN Council has one nurse member representative from each region and country on RCN Council, together with one nursing support worker member and one student member.

The current membership structure was designed at a time when the nursing workforce consisted essentially of three categories: those in full-time nurse education (students); the non-regulated nursing workforce (nursing support workers); and registered nurses. But in 2020, it is increasingly difficult to use these categories to describe every member of the nursing workforce. For example, the NMC now regulates both registered nurses and nursing associates; and individuals undertaking a nurse apprenticeship are both in education and the workplace.

Currently, RCN membership categories and the governance arrangements are intrinsically linked. UK-wide elections are held to elect our governing Council and the Professional Nursing and Trade Union Committees. Each of the groups includes one nurse member for each country and English region (voted for by nurse members), one nursing support worker member (voted for by NSW members) and one student member (voted for by student members).

We are proposing to allow our governance and membership arrangements to enable all members to stand for and vote for the members who serve on the RCN governing Council, Country and Regional boards and the Professional Nursing and Trade Union Committees from their Country or Region.
3. **Questions to consider**

1. Do you agree with the key principles on page 4?

2. Does a single membership deliver those key principles?

3. Do you agree that a range of payment plans linking the amount you pay each year to salary expectations is fair?

4. Do you agree that all members should be able to stand and vote for the members from your Country and Region on the RCN governing Council, your local board and the professional nursing and trade union committees?

5. Do you agree that the President and Deputy President and Chair of Council should continue to be required to be a registered nurse?
This is me

I'm on a register

I'm studying nursing at university

I work in nursing but I'm not on a register

I'm a nursing trainee, being paid to work and learn

I'm interested in joint membership of the RCN

I used to work in nursing, now I'm retired

I'm on a career break from nursing
There's a dedicated payment plan for all of us

- Registered nurse
- Nursing associate
- Studying nursing at university
- Studying midwifery at university
- Nursing support worker
- Health care assistant
- Trainee nursing associate
- Nurse apprenticeship
- Retired
- Member of UCU
- Member of the RCM
- On parental leave
- On a career break
1. Appendix

**RCN Standing Order**

5. **MEMBERSHIP**

5.1 Council

5.2 The Council may admit to membership of the College in its discretion any persons who are:

5.2.1 on a register of persons engaged in nursing

5.2.2 studying to acquire any of the qualifications necessary for them to have their name included on any register established by an Act of Parliament or by licence

5.2.3 admitted to membership on the grounds of distinction in nursing.

5.2.4 engaged in supporting nursing in health and social care as Council may from time to time determine

Provided that the Council may at its discretion decline to admit any person to membership of the College provided that it shall state its reasons in writing and return any subscription paid by any such person.

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**Categories of membership**

**We currently have three categories of membership:**

**Nurse members**

Those who are on the NMC register, including midwives and those whose registration is lapsed (for example retired members) unless they have been struck off.

**Health practitioner members**

Those who are not on a professional register (other than the Northern Ireland Social Care Council or the Scottish Social Services Council) but who work providing health or social care under the supervision of a registered nurse.

**Student members**

Those undertaking a pre-registration nursing or midwifery qualification leading to registration with the NMC; nurse cadets or on a return to practice course.

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There are different levels of subscriptions:

Health practitioner members pay half the rate of nurse members. The subscriptions paid by both health practitioner members and nurse members are discounted depending on whether:

- You are a newly qualified nurse member or in your first year of health practitioner membership
- You have a joint membership with another union (RCM, UCU or EIS)
- Are on a voluntary break
- Are an RCN staff member.

Retired members and students pay a flat rate subscription of £10 per year.

Retired members and those on some discounted plans, such as those on voluntary breaks and staff members, are not entitled to the full range of benefits, services and rights of membership.
## Current subscription plans

<table>
<thead>
<tr>
<th>Type</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Nurse</strong></td>
<td></td>
</tr>
<tr>
<td>First year discount</td>
<td>£98.43</td>
</tr>
<tr>
<td>Full</td>
<td>£196.65</td>
</tr>
<tr>
<td>Joint educational</td>
<td>£147.64</td>
</tr>
<tr>
<td>Joint RCM membership</td>
<td>£98.43</td>
</tr>
<tr>
<td>Retired</td>
<td>£10</td>
</tr>
<tr>
<td>Voluntary break</td>
<td>£98.43</td>
</tr>
<tr>
<td><strong>Health practitioner</strong></td>
<td></td>
</tr>
<tr>
<td>First year discount</td>
<td>£49.21</td>
</tr>
<tr>
<td>Full</td>
<td>£98.43</td>
</tr>
<tr>
<td>Retired</td>
<td>£10</td>
</tr>
<tr>
<td>Voluntary break</td>
<td>£49.21</td>
</tr>
<tr>
<td><strong>Student</strong></td>
<td></td>
</tr>
<tr>
<td>Full</td>
<td>£10</td>
</tr>
</tbody>
</table>
# Current Member Offer

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Indemnity Scheme</strong></td>
<td>Cover against the financial consequences of a claim against a member’s clinical negligence.</td>
</tr>
<tr>
<td><strong>Legal Services</strong></td>
<td>Access to RCN’s in-house specialist legal team for advice/representation on workplace issues. Assistance from an expert lawyer for advice/representation on injuries sustained at work or elsewhere for compensation, such as personal injury claim. Access to 30 minutes free legal advice on non-work matters, including family law. Advice with writing a will, probate, trusts or lasting power of attorneys. Available free of charge to members only.</td>
</tr>
<tr>
<td><strong>Immigration Services</strong></td>
<td>Access to confidential support and assistance on immigration issues, such as preparing/representation on immigration appeals and visa applications. Available free of charge to members only.</td>
</tr>
<tr>
<td><strong>Support Services</strong></td>
<td>Confidential advice and support with personal or work-related issues (such as counselling, peer groups, financial assistance etc.). Available free of charge to members only.</td>
</tr>
<tr>
<td><strong>RCN Direct</strong></td>
<td>General support and advice service available over the telephone and online. Available free of charge to members only.</td>
</tr>
<tr>
<td><strong>Careers Service</strong></td>
<td>One-to-one career advice, help with writing CVs/interview skills and placement support. Available free of charge to members only.</td>
</tr>
<tr>
<td><strong>Learning resources</strong></td>
<td>Access to books in the RCN libraries, eJournals, eBooks and local learning events. Available free of charge to members only.</td>
</tr>
<tr>
<td><strong>Nursing Forums</strong></td>
<td>Specialist networking forum for nurses. Available free of charge to members only.</td>
</tr>
<tr>
<td><strong>Bulletin Magazine</strong></td>
<td>Hard copies of the magazine are available free of charge to members only (via post). From 1 November 2017, an electronic copy of the magazine is available to members and non-members free of charge.</td>
</tr>
<tr>
<td><strong>RCN Xtra</strong></td>
<td>Access to exclusive offers and discounts on shopping, cinema trips, mobile phone bills etc. Available to members only.</td>
</tr>
</tbody>
</table>
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Published by the Royal College of Nursing
20 Cavendish Square
London
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020 7409 3333

January 2020
Publication code: 007 669
1. The Agenda Committee met on 22 and 23 January to discuss and propose the Congress agenda 2020. This is to be approved in the confidential part of the Council agenda.

2. We also received an update on progress on the arrangements for Congress which is being held in Liverpool on 7 to 11 June.

**The Congress agenda and overall programme**

3. Agenda item submissions closed at midnight on 6 January. There were 164 submissions. This compares to 153 in 2019 and 104 in 2018.

4. There were submissions from 35 branches, and 9 forums. All the UK reps committees submitted items. Every country and region had items submitted.

5. Items were submitted on a wide range of topics and we are confident that we have an exciting and interesting agenda for members to debate.

6. We are still in the process of finalising all our keynote speakers but are pleased to announce that Jim Campbell, Executive Director, Global Health Workforce Alliance, has accepted our invitation to speak.
Voting members and registration

7. Applications for voting members closed on 29 November. We received a record 1926 applications to be voting members. The figure in 2019 was 879 – a 54% increase. The increase is largely attributable to a difference in the way applications were promoted. The table below shows a more detailed breakdown of the number of applications received.

<table>
<thead>
<tr>
<th>Region</th>
<th>Applications</th>
</tr>
</thead>
<tbody>
<tr>
<td>Forums</td>
<td>429</td>
</tr>
<tr>
<td>East Midlands</td>
<td>114</td>
</tr>
<tr>
<td>Eastern</td>
<td>158</td>
</tr>
<tr>
<td>London</td>
<td>216</td>
</tr>
<tr>
<td>North West</td>
<td>140</td>
</tr>
<tr>
<td>Northern</td>
<td>60</td>
</tr>
<tr>
<td>Northern Ireland</td>
<td>70</td>
</tr>
<tr>
<td>Scotland</td>
<td>103</td>
</tr>
<tr>
<td>South East</td>
<td>210</td>
</tr>
<tr>
<td>South West</td>
<td>120</td>
</tr>
<tr>
<td>Wales</td>
<td>76</td>
</tr>
<tr>
<td>West Midlands</td>
<td>125</td>
</tr>
<tr>
<td>Yorkshire &amp; the Humber</td>
<td>105</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>1926</strong></td>
</tr>
</tbody>
</table>

8. Forums and branches are now in the process of selecting their voting members and were aiming to achieve it by the end of January. We hope there will be a good mix of experienced and first-time voting members.

9. Online booking for members opened at the start of December and this is being promoted. There has been a good number of early registrations. It will close on 26 May.

10. The team is looking into the voting member application process as we heard some members are still not filling in the correct form. Some members have reported that the process is overly complex and it is not clear how it differs from general online Congress registration.

Congress production and auditorium

11. A new production company, who will work with us in the main auditorium, was appointed following a tendering process. R& B Events have worked with the RCN on many of our other previous events though this will be their first time working on Congress. There was a successful site visit with them to Liverpool in December and we had the opportunity to meet their director, Richard Goodaire, at our meeting.
Work has been undertaken with R & B to revise the seating lay-out to help address some of the issues raised in 2019 by integrating to the accessible seating into the main seating area. The new lay-out will be tested with the members who sat in that area last year to see if they think this will be a better solution.

**Fringe**

13. The deadline for submitting ideas for Fringe events was 22 January. 80 submissions were received.

14. This year there is a slightly different approval process to enable the Forums Governance Group in particular to play a more active role in filtering the events that are submitted by its entities. They will be meeting on 6 February.

15. The Students Committee and the Nursing Support Workers Committee are well ahead in their planning. The Student Programme will take place on the Monday, and the Nursing Support Workers Programme will take place on the Tuesday.

**Social**

16. Arrangements are being made with the venues for the social events. The country and regional events will be broadly similar to 2019 although there are a couple of venue changes and our plans have taken into account the feedback we received from members last year.

17. The “Dine around the Dock” event for the end of Congress is also in hand and detailed arrangements are being made with the three restaurants which are taking part.

18. The student social event will take place at the Bierkellar again but will be on the Sunday evening before the main student programme begins on the Monday morning.

**Marketing and Communications**

19. The key focus of marketing and communications at this time is to promote online booking as well as keeping the website updated, and starting to prepare the Congress Guide and delegate packs.

20. Targeted emails will be sent to delegates who have booked online to keep them updated with the latest Congress 2020 news and information. They will be reminded that they can manage their booking via MyRCN and let us know if they wish to cancel. We are hoping that this will continue to improve the accuracy of the attendance figures and help to avoid wastage.
Hotels

21. Hotels have been contracted with in order to secure accommodation. As last year we will try to ensure Council and the committees are all together in the Pullman hotel. The UK Reps Committees will be in the Jurys hotel, as previously.

Diversity and inclusion

22. We had a discussion about inclusivity at Congress and talked about how we can establish a more inclusive culture which values difference and make everyone feel welcome, respected and accepted.

23. Equality is an embedded work-stream in the Congress planning process and there is an action plan for each Congress.

24. We recognised that there were a number of specific issues last year and we will be working to address those. In particular, we supported plans to develop diversity and inclusion standards for Congress which will be monitored and reported on.

25. We also discussed a proposal for an inclusion café. The aim of the inclusion café concept is to facilitate conversations and discussion about equality and civility issues and on work arising from a number of Congress items which had diversity and inclusion at their core.

Budget

26. The approved budget for Congress 2020 is as follows:
Expenditure: £1,489,500
Projected income (exhibition sales and sponsorship): -£492,500

27. Liverpool Victoria have just confirmed their sponsorship contribution of £85k. They review this annually now and is subject to the sponsorship continuing to achieve Liverpool Victoria’s business objectives.

Impact of AGM

28. As the AGM will start at 2.00pm on Sunday 7 June and take place in the Hall 1, rather than the main auditorium, we are anticipating it will impact less on Congress than in previous years.
Recommendations

29. Council is asked to:

- Note this report
- Support our arrangements to date for 2020 Congress
This page is intentionally left blank
1. **Purpose**

1.1 This paper provides a summary to Council of all the Congress Resolutions.

1.2 Council asked to consider the summary report and approve the progress that have been made on the individual resolutions.

2. **Background**

2.0 Following feedback and discussions at the December Professional Nursing Committee, the decision was made to present Congress Resolutions differently to enable easier access to the information.

2.1 All resolutions have been individually updated using the detailed reporting proforma, a RAG rated form and have been summarised in this single document.

3. **Summary**

<table>
<thead>
<tr>
<th>Resolutions</th>
<th>Member Lead</th>
<th>Update</th>
</tr>
</thead>
</table>
| 1. loneliness | Mary Wells - PNC | • The activities are on track to meet workplan timelines.  
• The budget spend is on track. |
| 2. | Child Poverty | Rachel Hollis - PNC | - The activities are on track to meet the workplan timelines.  
- The RCN is now a member of the End Child Poverty Coalition (EPC).  
- Further stakeholder events are planned.  
- An ‘issues’ briefing is being drafted for parliamentarians and the media that identifies our existing position on this agenda. |
| 3. | Homelessness | Tim Grace – PNC  
TBC - Council | - There has been a number of stakeholder events.  
- An ‘issues’ briefing is being prepared to support members.  
- The RCN will write to the Secretary of State for Housing, Communities and Local Government to reiterate our call for urgent government action. |
| 4. | Period Poverty | Sally Young – PNC  
Yvonne Coghill - Council | - The activities are on track to meet workplan timelines.  
- The suspended taskforce work will recommence, now that purdah has been lifted.  
- Media approaches are being explored to improve communication. |
| 5. | Decriminalisation of Prostitution | Simon Bowes - PNC  
Dave Dawes - Council | - Parliamentary work was suspended due to purdah and will not be |
reopened. New committee members will be announced in February when opportunities for analysis will be sought by the RCN.
- The RCN plans to write to government to call for decriminalising across the UK.

| 6. | Sepsis | Alison Leary & Tracy Culpitt - PNC | • The activities are on track to meet workplan timelines. |
| 7. | Rural Health | TBC - PNC | • The activities are on track to meet workplan timelines.  
• A four-country approach is being agreed.  
• Issues briefing to be completed by April 2020 |
| 8. | Personal care | Julie Green - PNC | • This has been incorporated into the work to develop an organisation wide independent health and social care strategy. |
| 9. | Sustainability | Council | • The original plan has been revised to consider a consultation in 2020. Resolution work will be completed and lead to further developments  
• A paper is being presented at ET in February for a steer on the way forward.  
• The plans will build on existing work on Small Changes. |
<table>
<thead>
<tr>
<th>10.</th>
<th>Learning Disability &amp; Autism</th>
<th>Theresa Connor - PNC</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• The budget has therefore not been utilised.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• The activities are on track to meet planned timelines.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Engagement approaches are being reviewed to reduce costs.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Lobbying is starting to see impact as LD was specifically mentioned in parliamentary discussions in early January.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• CNOs are being engaged</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>11.</th>
<th>Knife Crime</th>
<th>Denise Llewellyn – PNC</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• The activities are on track to meet planned timelines.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• An ‘issues’ briefing along with case studies will be prepared for members ahead of Congress.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>12</th>
<th>DNAR</th>
<th>Council</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Activities now updated following this item being referred to Council for a steer on the way forward; as this had not been debated at Congress 2019.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Council approved the item being referred back to the proposer and supportive activity eg signposting to RCN resources, working with forums and the submission of a 2020 fringe item.</td>
<td></td>
</tr>
</tbody>
</table>
|   | Bullying                     | Neil Thompson - TUC                                                                 | - Activities are on track to meet planned timelines.  
|   |                              |                                                                                   | - Instead of a separate fringe event at congress 2020 the group have agreed that their aim of empowering and informing ordinary members to prevent bullying will fit well with a planned inclusion café throughout congress.  
| 13| Third party sexual harassment | Neil Thompson - TUC                                                                 | - Activities are on track to meet planned timelines.  
|   |                              |                                                                                   | - The group are receiving expert updates on external developments including a high profile legal case and the recent general election to ensure they can adapt their work to take respond in the most effective way.  

4. **Recommendation**

Council is asked to note this summary document and the update that has been provided.

**Head of Department/SMT/ET:** Susan Masters, Director of Nursing, Policy and Practice  
**Summary Prepared by:** Ying Butt  
**Email:** Yinglen.Butts@rcn.org.uk
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**Projet title: Loneliness**

<table>
<thead>
<tr>
<th>Programme start date</th>
<th>Congress May 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programme close down date</td>
<td>Congress June 2020</td>
</tr>
<tr>
<td>Programme Lead</td>
<td>Dawne Garrett/Beth Knight-Yamamoto</td>
</tr>
<tr>
<td>Programme sponsor</td>
<td>Susan Masters</td>
</tr>
<tr>
<td>Approval route for changes</td>
<td>Nursing Strategic Board /Professional Nursing Committee</td>
</tr>
</tbody>
</table>

**Status (RAG rating)**

- **Green**: All aspects of project viability are within tolerance. However, the project may be late or forecast to overspend. No action needed.
- **Red**: Significant issues with the project. It requires corrective action and the matter should be escalated.
- **Amber**: One or more aspect of project viability — time, cost, scope — is at risk. However, the deviation from plan is being mitigated.

**Update for recent activities**

- Stakeholder Event Completed.
- Webpages being built to help nursing staff and midwives identify loneliness and to encourage social connectedness.
- Content being created to populate health and wellbeing resources to assist nurses to selfcare when experiencing loneliness.
### Up and coming activities

Creation of policy briefing for members.

### Challenges

- Some capacity issues in light of recent election.

### Exception/escalation reporting

*Not Applicable*
Date of Report: 17th December 2019

Title of Paper: Action Plan to support congress resolution 21; “That this meeting of Congress asks RCN Council to engage with governments across the UK on the National Strategy on Loneliness in order to improve the ability of nursing staff to recognise loneliness and its effects.”

Appendices: 1- Feedback stakeholder event

Presented by: Dawne Garrett and Ofrah Muflahi

Is a decision required? No

1. Purpose
   1.1- This paper provides a progress update on the actions taken to support Congress Item 21: Loneliness

2. Outline of work programme

<table>
<thead>
<tr>
<th>Item and Title</th>
<th>21- Loneliness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Submitting entity</td>
<td>Outer North West London Branch</td>
</tr>
<tr>
<td>Proposer &amp; Seconder</td>
<td>Proposer Zeba Arif / Seconder Annique Simpson</td>
</tr>
<tr>
<td>Allocated Committee</td>
<td>Professional Nursing Committee</td>
</tr>
<tr>
<td>Committee Member</td>
<td>Mary Wells</td>
</tr>
<tr>
<td>Council Representative</td>
<td>Richard Jones</td>
</tr>
<tr>
<td>Executive Team Lead</td>
<td>DNPP</td>
</tr>
<tr>
<td>Staff Lead(s)</td>
<td>Dawne Garrett- Professional Lead- Older People and Dementia Care Beth Knight – Yamamoto</td>
</tr>
</tbody>
</table>
Background

Approximately 6% of adults report that they often or always feel lonely with little variation by gender or geography. Data does suggest that younger people are more likely to report feeling frequently lonely. Certain groups are also associated with an increased risk of loneliness, such as those with a long-term disability, widowed homeowners, unmarried middle-agers, and young renters. Studies have also found links between loneliness (or social isolation) and poorer health outcomes, such as early death, higher rates of depression and cognitive decline. (Parliament UK 2019)

11.3% of children said that they were “often” lonely with 27.5% of children who received free school meals said they were “often” lonely, compared with 5.5% of those who did not. Children who reported “low” satisfaction with their health said they “often” felt lonely (28.3%), compared with those who had “medium, high or very high” satisfaction (about 10%). In young people (aged 16-24) 9.8% said that they were “often” lonely. Those reporting no long-term illness or disability were much more likely to say they “hardly ever or never” felt lonely (44.8%) than those with a long-term illness or disability (19.3%). (Office of National Statistics 2018)

Actions

Following discussion with key stakeholders from the four countries. The action plan has been drawn up to reflect 3 areas outlined in the resolution and subsequent congress debate, these being,

- The engagement with UK governments on respective national strategies;
- The recognition of loneliness by nursing/midwifery staff and subsequent signposting/referral to meet patients/residents/clients' needs;
- Guidance for nursing staff/midwives and employers to prevent, recognise and manage loneliness experienced by nursing staff.
### 3. Resources, costs and implications- Update

<table>
<thead>
<tr>
<th>No</th>
<th>Actions</th>
<th>Time line</th>
<th>Progress update including any costings</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1.</td>
<td>Produce short policy briefing on loneliness including RCN position, current national/government picture for loneliness.</td>
<td>Oct 2019</td>
<td>Due to the Prorogation of Parliament then the General Election, this activity has been delayed. A draft will be circulated to staff and proposers for comment before the New Year and we expect to have a briefing ready for Members to use with their new Parliamentarians and Government in the New Year.</td>
</tr>
<tr>
<td></td>
<td>Work with the Loneliness Action Group and other coalitions to raise awareness and push forward policy solutions to decisions makers to tackle Loneliness.</td>
<td>Nov 2019</td>
<td>Group will meet again early 2020</td>
</tr>
<tr>
<td></td>
<td>Communicate to members on our activities through media and social media channels.</td>
<td>March 2020</td>
<td>Stakeholder event held on 27th November 2019 using social media / Twitter platform: #RCNTalking loneliness</td>
</tr>
<tr>
<td></td>
<td>Engage Government and Parliamentarians through correspondence and groups such as APPGs to raise awareness of our work and Nursing’s unique role in tackling loneliness.</td>
<td>March 2020</td>
<td>As part of the RCN’s introductory communications with the new Government and Parliamentarians, letters to the appropriate Ministers will contain the RCN’s commitment to tackling</td>
</tr>
</tbody>
</table>
Appendix B(i)

<table>
<thead>
<tr>
<th>2.2</th>
<th>Literature search and review of best practice recognition/interventions.</th>
<th>Sept 2020</th>
<th>Ongoing</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Stakeholder consultation to identify resources for nurses.</td>
<td>Oct 2020</td>
<td>Total costings/ spend = 2,999.00 Stakeholder consultation completed on the 27th November 2019</td>
</tr>
<tr>
<td></td>
<td>Development of web based resources to assist nursing/midwifery staff in the recognition of loneliness and appropriate interventions</td>
<td>Feb 2020</td>
<td>Dawne Garrett meeting with Nursing Dept Digital team Loneliness resources related to patients and residents will go on health inclusion webpages The loneliness resource for nurses experiencing loneliness will go on the self-care web pages</td>
</tr>
<tr>
<td></td>
<td>Dissemination of resource through communications, social media and member networks.</td>
<td>From Feb 2020</td>
<td>When finalised, member briefing will be promoted through social media channels including the RCN corporate account and Facebook Workplace</td>
</tr>
<tr>
<td>2.3</td>
<td>Development of web based guidance and tools for nursing staff/midwives and employers to prevent,</td>
<td>March 2020</td>
<td>The MSS Web Development Group have started work on the Wellbeing modules of the Website. A toolkit that addresses</td>
</tr>
<tr>
<td>recognise and manage loneliness experienced by nursing staff.</td>
<td>some of the main aspects of loneliness experienced by RCN members is a core module. Work on this will be rolled out as part of the re-launch of the MSS website in Spring 2020. The ‘Big White Wall’ Counselling resource is already being piloted, with good take-up from members. (1/12/2019)This provision can provide 24 hour online-support and strategies for those members who are experiencing isolation as a result of a range of issues; caring responsibilities, being overseas away from family members, shift patterns, geographical isolation. The pilot is running for 6 months, when the scheme will be assessed.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
4. Impact and/or risk assessments

i. Nurses/midwives have a significant opportunity to identify people who are lonely and to access interventions to help people resolve loneliness. Nurses and midwives are frequently the first point of professional contact for individuals. In order to maximise this opportunity, they need to have the knowledge and skills to address the needs of people who are lonely.

ii. There is potential for increasing nursing capacity by ensuring people experiencing loneliness have improved quality of life and are less reliant on health and social care services.

iii. It is well recognised 50% of the determinants of health are social and those people experiencing loneliness are likely to have poorer health outcomes. Failure to support nurses to address loneliness in patients/residents/clients would be a disservice to members and nursing; leaving the RCN’s reputation vulnerable.

5. Stakeholder involvement and member consultation (See Appendix 1)

<table>
<thead>
<tr>
<th>RCN Stakeholders</th>
<th>External Stakeholders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Members including Nursing Support Worker Committee member</td>
<td>Loneliness Action Groups</td>
</tr>
<tr>
<td>Professional Leads</td>
<td>Smarter Housing</td>
</tr>
<tr>
<td>Assistant Director Professional Practice 4 Countries</td>
<td>Essex Community Nursing</td>
</tr>
<tr>
<td>L&amp;D Professional leads</td>
<td>*Age UK</td>
</tr>
<tr>
<td>ERD</td>
<td>Children’s &amp; Young Representative</td>
</tr>
<tr>
<td>Media</td>
<td>Representative of LTC Alliance</td>
</tr>
<tr>
<td>Forum Members</td>
<td>Burnt Ash Surgery</td>
</tr>
<tr>
<td>Forum Steering Group Members</td>
<td>Tunbridge Wells Hospital</td>
</tr>
<tr>
<td>Welsh Nurse of the Year</td>
<td>Health Education England</td>
</tr>
<tr>
<td>Policy</td>
<td>*Hospice UK</td>
</tr>
<tr>
<td>Membership Services</td>
<td>*Macmillan Cancer Support</td>
</tr>
<tr>
<td></td>
<td>*British Red Cross</td>
</tr>
<tr>
<td></td>
<td>BAPEN</td>
</tr>
<tr>
<td></td>
<td>*Dementia UK</td>
</tr>
<tr>
<td></td>
<td>*Royal Voluntary Service</td>
</tr>
<tr>
<td></td>
<td>St Georges University Hospital</td>
</tr>
<tr>
<td></td>
<td>*Alzheimer’s Society</td>
</tr>
<tr>
<td></td>
<td>Barts Health NHS Trust</td>
</tr>
<tr>
<td></td>
<td>Imperial College Health Care NHS</td>
</tr>
</tbody>
</table>

*Denotes UK wide representation
6. Evaluation and review

Regular reports will be submitted in line with the internal Congress reporting timescales.

7. Recommendations

For the committee to note progress to date.

Author(s): Ofrah Muflahi – Professional Lead- Nursing Support Workers, Dawne Garrett- Professional Lead Older People, Beth Knight –Yamamoto (Policy), Claire Canning (Member Services)

Head of Department/SMT/ET: Susan Masters, Director of Nursing Policy & Practice.
Email: Dawne.Garrett@rcn.org.uk

References

https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/articles/childrensandyoungpeoplesexperiencesofloneliness/2018

https://researchbriefings.parliament.uk/ResearchBriefing/Summary/CBP-8632
END OF REPORT
**Project title: Child Poverty**

<table>
<thead>
<tr>
<th>Category</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programme start date</td>
<td>July 2019</td>
</tr>
<tr>
<td>Programme close down date</td>
<td>April 2020</td>
</tr>
<tr>
<td>Programme Lead</td>
<td>Rachael Truswell</td>
</tr>
<tr>
<td>Programme sponsor</td>
<td>Lara Carmona as AD of Policy and Public Affairs (UK and International)</td>
</tr>
<tr>
<td>Approval route for changes</td>
<td>PNC</td>
</tr>
</tbody>
</table>

**Status (RAG rating)**
- **Red**: Significant issues with the project. It requires corrective action and the matter should be escalated.
- **Amber**: One or more aspect of project viability — time, cost, scope — is at risk. However, the deviation from plan is being mitigated.
- **Green**: All aspects of project viability are within tolerance. However, the project may be late or forecast to overspend. No action needed.

**Update for recent activities**
- In December 2019, a formal application was submitted to join the End Child Poverty Coalition (EPC). The cost for the RCN to join this is £200 per annum. The ECP is Chaired by Anna Feuchtwang, CEO of National Children’s Bureau. The Steering Group includes: Action for Children, Buttle UK, Child Poverty Action Group, Church of England, Gingerbread, Greater Manchester Poverty Action, National Education Union, Oxfam, Save the Children, TUC. Our membership of this coalition has been approved.
### Up and coming activities
- Further stakeholder meetings to understand how we can support work already underway in the children's sector can be supported by us.
- Draft and develop an issue briefing which sets out our existing positions on issues contributing to child poverty and health outcomes so that we can share this with and inform parliamentarians and the media.

### Challenges
- The sponsoring member, and seconder have been unable to join all teleconferences held by the staff lead and staff support. They have been kept informed via email but haven't contributed to activity underway to date.

### Exception/escalation reporting
- Not applicable
Appendix B(i)

Council

Date of Report: 18 December 2019

Title of Paper: Item 9, Congress 2019: That this meeting of Congress calls on RCN Council to lobby governments across the UK to provide adequate resources to deal with the rising levels of child poverty.

Appendices: None attached

Presented by: Rachael Truswell

Is a decision required? No

1. Purpose

1.1 This paper provides a work plan update to council in relation to the progress of Congress 2019 Item 9:

That this meeting of Congress calls on RCN Council to lobby governments across the UK to provide adequate resources to deal with the rising levels of child poverty.

1.2 Council are asked to note progress against the activity plan for this resolution, most notably our application to join the End Child Poverty coalition.

2. Outline of work programme

<table>
<thead>
<tr>
<th>Item 9 and Title</th>
<th>RCN Council to lobby governments across the UK to provide adequate resources to deal with the rising levels of child poverty.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Submitting entity</td>
<td>Cardiff Branch</td>
</tr>
<tr>
<td>Proposer &amp; Seconder</td>
<td>Rhian Wright and Prof David Clark</td>
</tr>
<tr>
<td>Allocated Committee</td>
<td>Professional Nursing Committee</td>
</tr>
<tr>
<td>Committee Member</td>
<td>Rachel Hollis</td>
</tr>
<tr>
<td>Council Representative</td>
<td>DNPP</td>
</tr>
<tr>
<td>Executive Team Lead</td>
<td>Rachael Truswell, support Helen Donovan</td>
</tr>
</tbody>
</table>

2.1. Summary of issue:

2.1.1 Child poverty in the UK is growing and estimated to affect more than 4 million children¹ (30 per cent) or 9 in a classroom of 30.² Children across the UK may be more likely to be in low-income households compared to the wider adult population.³

¹ https://www.childrenssociety.org.uk/what-we-do/our-work/ending-child-poverty/what-is-child-poverty
They may experience poor physical and mental health and may not reach their full potential in school. Research indicates links to family unemployment, poor housing, debt, homelessness and poor life chances in adulthood. Poverty is identified as an Adverse Child Experience (ACE) with associated detrimental effect on children’s long term outcomes.

2.1.2. Each country in the UK has introduced a Children’s (and Young People’s) Commissioner, responsible for promoting the rights and protections of children, and to advocate for their interests in policies and decisions that will affect their lives. There are varying levels of progress made, and strategies in place across each of the four countries.

2.2. The RCN challenges barriers to the health and care of children, and young people (CYP). We are a member of the Child Poverty Action Group, a UK wide organisation that evidences and highlights the prevalence of child poverty and campaigns for change.

2.3. The objectives of this work is to:

- Raise awareness amongst Governments across the UK that a targeted, adequately resourced and cross-department approach will need to be taken to continue the fight against child poverty.
- To produce an issue based briefing which clearly sets out our position and context across the countries of the UK.
- NEW: To join the End Child Poverty Coalition so that we can effectively include the nursing contribution to tackling child poverty with other charity sector campaigning organisations already established and achieving change in this space.

2.4. Activity Plan

2.4.1. Agree scope and activity plan:

- Email discussion and an initial teleconference with the proposer, seconder and staff lead and supporting staff lead 12th August 2019 to discuss and agree the scope and parameters for activity. Agreement to conduct a literature review, which is now complete. This has helped inform how the RCN can contribute to the existing debate and inform the next steps.
- A teleconference with the proposer; seconder and PNC lead was held on 23rd October. The proposer Rhian Wright, and the seconder Dave Clark have been unable to participate in the teleconference calls to date. A further call is scheduled for early February 2020 due to General Election 2019.
- In December 2019, a formal application was submitted to join the End Child Poverty Coalition (EPC). The cost for the RCN to join this is £200 per annum. The ECP is Chaired by Anna Feuchtwang, CEO of National Children’s Bureau. The Steering Group includes: Action for Children, Buttle UK, Child Poverty Action Group, Church of England, Gingerbread, Greater Manchester Poverty Action, National Education Union, Oxfam, Save the Children, TUC.
  - The EPC are an active charity with a focus on campaigning, they publish constituency level data on prevalence of poverty annually and help their

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supporters to directly lobby MPs. [http://www.endchildpoverty.org.uk/what-we-stand-for/](http://www.endchildpoverty.org.uk/what-we-stand-for/)

- As a member the RCN will be able to support their work by providing content around the contribution nursing staff make in supporting children and families in their care to tackle the barriers that poverty may pose for them accessing treatments, attending GP appointments or preventing ill health. Meetings will be initially attended by Helen Donovan, Professional Lead for Public Health and Rachael Truswell, Public Affairs Adviser with RCN member support. Meetings are quarterly and the RCN will be feeding into strategy development and content production more regularly via email.
- Our request has been approved.

### 2.4.2. Gather intelligence and evidence relating to child poverty:

- **Stakeholder mapping of Governments across the UK, sector coalition activity, and parliamentary business** - including APPGs in Westminster, CPGs in Scotland and equivalent in Wales - work on the child poverty agenda to understand activity already underway and where we can support. This will take place following the UK Government General Election on 12th December for opportunities in Westminster.
- **Liaison with:**
  - Child Poverty Action Group – Lizzie Flew – scheduled for January 2020
  - Action for Children – Policy team, November 2019 – discussed work taking place and have supported our application to End Child Poverty Coalition.
  - End Child Poverty Coalition – meeting in October 2019 completed and application for RCN to join submitted December 2019.
- **Collate a message bank/hub of all our previous policy positions on child poverty, to inform an overarching position statement on child poverty** – we have struggled to collect nursing led case studies so far despite publicising on the relevant Forum Facebook Groups. The proposer and seconder have not as yet been able to provide case studies. We will continue to promote this activity, and seek opportunities to include calls outs in Bulletin, on social media, and through member engagement opportunities about wider policy work.
- **We are exploring the possibility of a Twitter chat in 2020 to better understand the nursing role in supporting families facing hardship and how poverty creates barriers for them accessing health and care services, and opportunities available to them to prevent ill-health.** This information will support our content collection for an external issue briefing (plan below) which will be a useful tool for highlighting the nursing contribution to supporting child living in poverty to parliamentarians. This has been rephased due to the UK Government General Election in December.

### 2.4.3. Develop an RCN issue briefing on child poverty: planned for February 2020 once the above activity has been completed.

- **Engage with CYP forum, proposer and seconder of this resolution and UK policy leads to co-produce an issue briefing, which pulls together our organisational position on child poverty, and the resources a Government should make available to support tackling child poverty, which can be applicable across the UK.**
  - This briefing will draw on the staffing for safe and effective care principles across the UK – using evidence and data about the shortfalls in children’s nursing, health visiting and mental health nursing.
It will be used in media responses and communications, in lobbying materials, parliamentary inquiries when appropriate and will be the framing and messaging communicated to members in magazines and on the website.

2.4.4. Lobbying and communications:

- Letter written to Department for Education (England) last July to alert them to our mandate from Congress and ask for a meeting with their team. We have not received a formal response.
- Following the UK Government General Election, we will be writing to the new or returned Minister in the Department for Education responsible for Child Poverty.
- Co-sign letters sent on behalf of the End Child Poverty Coalition to relevant Ministers in Government departments responsible for supporting measures to end poverty.
- Send letters to relevant administration leads in Scotland and Wales as appropriate to do so, Northern Ireland does not have a Government.
- The RCN has begun a project about the nursing contribution to the WHO Sustainable Development Goals (SDG). One of the SDGs is about poverty as a whole, the experiences of children in poverty and our members supporting those in poverty, will feed into our response to this work led by the UN – there is a member survey out at the moment to understand any nurses who are working to eradicate nursing. Findings from this survey will be published in a report in January 2020. We will disseminate this report to relevant external stakeholders and share with the End Child Poverty Coalition.
- This resolution has been included in our organisational response to the Prevention Green Paper in England. This is being undertaken by Policy and Public Affairs (UK and International) for submission in October 2019.
- The Child Poverty Congress resolution was raised during meetings we held with Parliamentarians and Stakeholders at the Labour and Conservative Party Conferences, including the Royal College of Paediatrics and Child Health. We are now following up to see if there are opportunities for joint work.

2.5. This resolution links to wider RCN strategic work streams. This resolution will link into the health visiting/school nursing work stream focused on building a case for greater investment in these services across UK.

3. Resources, costs and implications

3.1. The resources and cost implications will be staff time, and an annual contribution to the End Child Poverty Coalition of £200 per year – the first payment to be made in January 2020. This will come from the policy infrastructure budget and has been identified in Policy and Public Affairs team.

3.2. Staff contributions from:
- Rachael Truswell – lead
- Helen Donovan – supporting lead
- Communications HQ
- Member engagement, digital and campaigns team HQ
- Fiona Smith, professional lead for CYP
- Rosie Stainton, policy adviser – public health and school nurses/health visitors England project
- Policy colleagues in Scotland, Wales and Northern Ireland – unidentified.
4 Impact and/or risk assessments

4.1 Impact: ensuring that the resolution feeds into related work ongoing within the RCN so that it has longevity. Coalition working with the End Child Poverty Coalition to ensure that the next UK Government takes the voices of children living in poverty seriously and takes action to implement policies which support this vulnerable group.

4.2 Risk: Brexit and other political distractions will continue to dominate.

4.3 Risk: Dependent on the progress of the health visiting and school nursing work stream so that our RCN work on children and young people is aligned and all encompassing.

4.4 Risk: The proposer and seconder of the resolution have been unable to participate in teleconferences so far. Emails of the minutes of the calls have been shared with them for information and input. They have indicated that they are happy with the direction of travel.

5 RCN policies, procedures, Key Performance Indicators and strategic plan

5.1 This resolution will be included in broad framing around existing work programmes on staffing for safe and effective care, community nursing and specifically in work on public health and prevention where appropriate. Other activity, including media responses, will be reactive. This is a UK wide project.

5.2 This project will link to other congress resolutions where appropriate such as rural healthcare, loneliness.

6 Stakeholder involvement and member consultation

<table>
<thead>
<tr>
<th>RCN Stakeholders</th>
<th>External Stakeholders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Affairs team</td>
<td>End Child Poverty Coalition</td>
</tr>
<tr>
<td>Nursing professional leads</td>
<td>Child Poverty Action Group (CPAG)</td>
</tr>
<tr>
<td>Policy team</td>
<td>PHE</td>
</tr>
<tr>
<td>Country colleagues</td>
<td>MPs</td>
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<tr>
<td>Media and communications</td>
<td>APPG Fit and Healthy Childhood</td>
</tr>
</tbody>
</table>

7 Evaluation and review

7.1 Each meeting of the Task and Finish Group will review the work against agreed outcomes. Progress reports are being submitted to Council every quarter.

8 Recommendations

8.1 Council to note the direction and scope of this project.

Author(s): Rachael Truswell
Input from: Helen Donovan
Head of Department: Antonia Borneo
Email: Rachael.Truswell@rcn.org.uk
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### Project title: Homelessness

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<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Programme start date</td>
<td>July 2019</td>
</tr>
<tr>
<td>Programme close down date</td>
<td>tbd</td>
</tr>
<tr>
<td>Programme Lead</td>
<td>John Considine, Public Affairs Adviser</td>
</tr>
<tr>
<td>Programme sponsor</td>
<td>Lara Carmona, Associate Director, Policy &amp; Public Affairs UK &amp; International</td>
</tr>
<tr>
<td>Approval route for changes</td>
<td>Professional Nursing Committee</td>
</tr>
</tbody>
</table>

### Status (RAG rating)

**Amber:** there has been limited engagement with the resolution proposer and PNC lead in determining the scale and scope of work plan and the key areas they want to focus. This has been migrated by the staff lead proposing key areas of focus based on stakeholder intelligence and guidance by the professional nursing colleagues.

### Update for recent activities

- A series of stakeholder meetings took place in autumn 2019 to help inform the scale and scope of the resolutions work, and to identify where the RCN’s added value can be best harnessed in relation to debate on homelessness health.
- A literature review was completed to provide an overview of the key issues in homelessness health.
- As part of the Expert Consortium on Refugee and Migrant Health, the RCN will be writing to the Secretary of State for Health and Social Care to reiterate our concerns on NHS charging and data-sharing policies that apply to migrants living in the UK

**Up and coming activities**
- A member facing issue briefing is being developed to help inform the RCN’s call to action to Government.
- In follow-up to discussions with the Shelter and Crisis, the RCN will explore the possibility of hosting a session with the APPG on ending homelessness to promote the role and contribution of nursing practice in addressing the health needs of people who are homeless.
- The RCN will be writing to the Secretary of State for Housing, Communities and Local Government to reiterate our call for urgent government action to address the growing crisis in the health needs of people who are homeless.

**Challenges**
- There have been capacity constrains as the staff lead for the resolution is currently acting up into another role within the RCN. Discussion about capacity to support the resolutions work is currently being addressed.
- Reduced capacity and workload pressures on colleagues in Northern Ireland due to the political context and Wales due to staffing issues has limited their ability to input and shape the project. In Scotland, the staff lead has now left to the portfolio is being reassigned.

**Exception/escalation reporting**
- N/A
**Date of report:** 15 October 2019

**Title of Paper:** Progress report for congress resolution 8: That this meeting of Congress calls on Council to hold the UK government to account for their inaction over the health crisis of homelessness.

**Appendices:** N/A

**Presented by:** John Considine

**Is a decision required?** No

### 1. Purpose

<table>
<thead>
<tr>
<th>Item 8 and Title</th>
<th>That this meeting of Congress calls on Council to hold the UK government to account for their inaction over the health crisis of homelessness.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Submitting entity</td>
<td>North Yorkshire Branch</td>
</tr>
<tr>
<td>Proposer &amp; Seconder</td>
<td>Gwen Vardigans</td>
</tr>
<tr>
<td>Allocated Committee</td>
<td>Professional Nursing Committee</td>
</tr>
<tr>
<td>Committee Member</td>
<td>Time Grace</td>
</tr>
<tr>
<td>Council Representative</td>
<td>Unknown at present</td>
</tr>
<tr>
<td>Executive Team Lead</td>
<td>DNPP</td>
</tr>
<tr>
<td>Staff Lead(s)</td>
<td>John Considine support Helen Donovan</td>
</tr>
</tbody>
</table>

1.1 This paper provides an update to Council in relation to Congress Item 8: *That this meeting of Congress calls on Council to hold the UK government to account for their inaction over the health crisis of homelessness.*

1.2 Council is asked to review the update.
2. Summary of progress

2.1 The following work has been undertaken:

**Coordination of the Task and Finish Group**

2.2 Updates have been shared with members of the task and finish group for input and feedback as the work on the resolution progresses.

**Evidence gathering**

2.3 A literature review was undertaken to identify the key issues affecting the health needs of homeless people. The purpose of the review was to help define the focus areas for the work of the resolution. This review will be used to inform the member facing issue briefing.

**Stakeholder engagement**

2.4 A number of exploratory meetings have taken place with key stakeholders. In particular, we are exploring opportunities to work with the Queen’s Nursing Institute (QNI) who have developed a comprehensive body of work in relation to nursing practice and the health needs of homeless people. One key aspect brought to our attention following our discussion with QNI was the significant proportion of “hidden homeless” – people currently with no fixed abode, often living with family members or friends. This will be reflected in the member issue briefing.

2.5 We met with Shelter to discuss opportunities for joint work as they have identified health as a key campaigning issue in 2020. We agreed to work with Shelter and Crisis to see how we can support a session on the health needs of people who are homeless as part of their work with the all-party parliamentary group (APPG) on ending homelessness. This will depend on the APPG being reconstituted following the general election.

**Political influencing**

2.6 As part of the Expert Consortium on Refugee and Migrant Health, we have agreed to the write to the Secretary of State for Health and Social Care to reiterate our concerns on NHS charging and data-sharing policies that apply to migrants living in the UK. These policies could have a detrimental impact on the health of homeless migrants in terms of access to healthcare services.

Work is underway on the following:

2.7 Following the general election in December 2019, we will be writing to the Secretary of State for Housing, Communities and Local Government to reiterate our call for urgent government action to address the growing crisis in the health needs of people who are homeless.

2.8 The development of a member facing issue briefing. The briefing will be informed by the literature review, the environmental context gleaned from stakeholder meetings and it will be shared with relevant RCN forums for input. This briefing will be external facing and set out the RCN’s key concerns and calls to action for the UK Government. It will be used in media responses and communications, including member facing communications. The briefing will also be used to inform political influencing activities,
particularly for parliamentary inquiries and debates to inform political audiences of the RCN’s position.

2.9 In follow-up to discussions with the Shelter and Crisis, we will explore the possibility of hosting a session with the APPG on ending homelessness to promote the role and contribution of nursing practice in addressing the health needs of people who are homeless.

2.10 RCN London will be publishing a report in February showing that the rising cost of living in London, particularly access to good quality affordable housing for nursing staff, is forcing many nursing staff to leave London. The report is based on a survey of RCN London members carried out in 2019.

3 Impact and/or risk assessments

3.1 Reduced capacity and workload pressures on colleagues in Northern Ireland due to the political context and Wales due to staffing issues has limited their ability to input and shape the project. In Scotland, the staff lead has now left and the portfolio is being reassigned. In addition, the staff lead for the resolution is currently acting up into another position within the RCN.

4 Recommendations

4.1 Council is asked to note this report.

5 Stakeholder involvement and member consultation

<table>
<thead>
<tr>
<th>RCN Stakeholders</th>
<th>External Stakeholders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing professional leads</td>
<td>UK Government</td>
</tr>
<tr>
<td>Policy and Public Affairs (UK and Int)</td>
<td>Parliamentarians</td>
</tr>
<tr>
<td>Country colleagues</td>
<td>Queen’s Nursing Institute</td>
</tr>
<tr>
<td>Media and communications</td>
<td>Networks of Nurses and Midwives</td>
</tr>
<tr>
<td>Elected members</td>
<td>Pathway</td>
</tr>
<tr>
<td>Expert members working in the area of Homelessness</td>
<td>Shelter</td>
</tr>
<tr>
<td>Royal Medical Colleges</td>
<td></td>
</tr>
</tbody>
</table>

6. Evaluation and review

6.1 Each meeting of the Task and Finish Group will review the work against agreed outcomes. Progress reports will be submitted to Council every quarter.

7 Recommendations

7.1 Council is asked to note the direction and scope of this project.

Author(s): John Considine
Input from: Helen Donovan (Support lead)
Head of Department/SMT/ET: Lara Carmona, Associate Director of Policy & Public Affairs (UK & International)
Email: John.Considine@rcn.org.uk
**Project title:** Period Poverty

<table>
<thead>
<tr>
<th><strong>Programme start date</strong></th>
<th>June 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Campaign close down date</strong></td>
<td>May 2020</td>
</tr>
<tr>
<td><strong>Programme Lead</strong></td>
<td>Carmel Bagness, RCN Professional Lead Midwifery and Women’s Health</td>
</tr>
<tr>
<td><strong>Programme sponsor</strong></td>
<td>Ying Butt, Associate Director of Nursing (Clinical Standards &amp; Supporting Practice)</td>
</tr>
<tr>
<td><strong>Approval route for changes</strong></td>
<td>Nursing Strategy Board and PNC</td>
</tr>
</tbody>
</table>

**Status (RAG rating)**
- **Red:** Significant issues with the project. It requires corrective action and the matter should be escalated.
- **Amber:** One or more aspect of project viability — time, cost, scope — is at risk. However, the deviation from plan is being mitigated.
- **Green:** All aspects of project viability are within tolerance. However, the project may be late or forecast to overspend. No action needed.

**Update for recent activities**

<table>
<thead>
<tr>
<th><strong>Proposed actions</strong></th>
<th><strong>Update as of December 2019</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. A mapping exercise to understand the work that is already taking place, to gain understanding of the parameters of the various government’s pledges to offer free products in schools and hospitals.</td>
<td>This is being carried out by the project team, and will be more a sense check than a complete mapping exercise. This is in part due to the complexity of implementation and the ambitious objective of a complete mapping exercise in a short time frame, as well as current issues with access to government departments due to purdah. Feedback on the intelligence gathering will take place at the project team meeting in January 2020.</td>
</tr>
<tr>
<td>2.</td>
<td>Contact made with the Period Poverty Taskforce (led by Department for Education) and RCN engagement with the stakeholder group agreed (by December 2019);</td>
</tr>
<tr>
<td>3.</td>
<td>Ongoing engagement with RCOG (Royal College of Obstetrics and Gynaecology) to inform Women’s Health taskforce &amp; strategy being developed (by December 2019);</td>
</tr>
<tr>
<td>4.</td>
<td>Provide an opportunity for RCN staff and members to contribute practically. This includes collection boxes at HQ and across the RCN Estate (by November 2019);</td>
</tr>
<tr>
<td>5.</td>
<td>Period poverty is represented in the new RCN Menstrual Wellbeing guidance</td>
</tr>
<tr>
<td>6.</td>
<td>Features in RCN Bulletin on resolution activity.</td>
</tr>
<tr>
<td>7.</td>
<td>Twitter chat to discuss the issues being planned for November 2019.</td>
</tr>
<tr>
<td>8.</td>
<td>Leaflets for members to give to women they provide care for about menstrual health and period poverty support.</td>
</tr>
<tr>
<td>9.</td>
<td>Equalities - Scope with RCN Equality and Diversity Lead if there is a specific equalities</td>
</tr>
</tbody>
</table>
and diversity element to the resolution (by September 2019).

### Up and coming activities

- Project team meeting planned for 08/01/20; agenda to include:
  1. Intelligence gathering from project team meets to sense check government implementation plans
  2. Consider how best to raise awareness at Congress, as leaflet idea no longer viable.
  3. Agree coanct of ‘poster’ with a view to having it available online
  4. Discuss e-mail to all RCN Regions to consider sanitary product collection event for International Woman’s Day in March 2020

### Challenges

- Challenge of leaflet distribution, as no longer possible to do this (in paper form) at Congress
- Interpretation of intelligence gathering and what actions may come from the findings.
- Commitment by RCN offices to carry out sanitary product collection.

### Exception/escalation reporting

- None at present

Report prepared by Carmel Bagness, RCN Professional Lead Midwifery and Women’s Health

7th January 2020
1.1 Purpose

This paper provides an update report Council in relation to the progress of Congress Item 11: Period Poverty

2. Outline of work programme

<table>
<thead>
<tr>
<th>Item ## and Title</th>
<th>11. Period Poverty</th>
</tr>
</thead>
<tbody>
<tr>
<td>Submitting entity</td>
<td>Women’s Health Forum</td>
</tr>
<tr>
<td>Proposer &amp; Seconder</td>
<td>Ruth Bailey &amp; Jess Sainsbury</td>
</tr>
<tr>
<td>Allocated Committee</td>
<td>Professional Nursing Committee</td>
</tr>
<tr>
<td>Committee Member</td>
<td>Sally Young</td>
</tr>
<tr>
<td>Council Representative</td>
<td>Yvonne Coghill</td>
</tr>
<tr>
<td>Executive Team Lead</td>
<td>Susan Masters</td>
</tr>
<tr>
<td>Staff Lead(s)</td>
<td>Carmel Bagness</td>
</tr>
</tbody>
</table>

2.1 Background

Periods are a normal part of life. It is increasingly recognised that good menstrual health is an essential component to wellbeing. Period poverty is the lack of access to sanitary products due to financial constraints.

In 2019, RCN Congress accepted this item as a resolution. Subsequent meetings with the proposer and seconder, agreed that it was necessary to clarify the government’s position with promises to implement access to sanitary products in schools and hospitals.

The project team agreed three key outputs for the work, the workplan for activity was agreed by FNFW and PNC and sets out the key objectives:

- To raise awareness around period poverty;
- To establish how the government promises are being achieved across the UK, and consider how to lobby for further improvements towards ending period poverty;
- To engage in national discussions on the issue of period poverty.
2.3 The following table provides an overview of work to date:-

<table>
<thead>
<tr>
<th>Proposed actions</th>
<th>Update as of December 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>10. A mapping exercise to understand the work that is already taking place, to</td>
<td>This is being carried out by the project team, and will be</td>
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<tr>
<td>gain understanding of the parameters of the various government’s pledges to offer free</td>
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<td>products in schools and hospitals.</td>
<td>of implementation and the ambitious objective of a complete mapping exercise in a short</td>
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<td>time frame, as well as current issues with access to government departments due to purdah.</td>
</tr>
<tr>
<td></td>
<td>Feedback on the intelligence gathering will take place at the project team meeting in</td>
</tr>
<tr>
<td></td>
<td>January 2020.</td>
</tr>
<tr>
<td>11. Contact made with the Period Poverty Taskforce (led by Department for Education)</td>
<td>This contact was followed up, and RCN are now on the stakeholder list, receiving newsheets</td>
</tr>
<tr>
<td>and RCN engagement with the stakeholder group agreed (by December 2019);</td>
<td>and updates of progress. However, due to purdah, this has currently ceased, and is</td>
</tr>
<tr>
<td></td>
<td>expected to resume in the spring time.</td>
</tr>
<tr>
<td>12. Ongoing engagement with RCOG (Royal College of Obstetrics and Gynaecology)</td>
<td>CB attended the launch of the RCOG Report/WH Strategy December 2019, and will continue</td>
</tr>
<tr>
<td>to inform Women’s Health taskforce &amp; strategy being developed (by December 2019);</td>
<td>to engage with RCOG in 2020 to progress the work.</td>
</tr>
<tr>
<td>13. Provide an opportunity for RCN staff and members to contribute practically.</td>
<td>A collection box was implemented for the RCN Woman’s Health Conference in November 2019,</td>
</tr>
<tr>
<td>This includes collection boxes at HQ and across the RCN Estate (by November 2019);</td>
<td>with great success. The RCN HQ staff and attendees to the conference were offered the</td>
</tr>
<tr>
<td></td>
<td>opportunity to donate packets of sanitary products, which has since been distributed</td>
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<td></td>
<td>to two organisations - Bloodygoodperiods, who collect and distribute products to</td>
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<tr>
<td></td>
<td>refugees and asylum seekers, and a further large box was sent to a Foodbank in Camden.</td>
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<td></td>
<td>The future ambition is to roll this out across RCN offices for International Woman’s Day</td>
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<tr>
<td></td>
<td>in March 2020.</td>
</tr>
<tr>
<td>14. Period poverty is represented in the new RCN Menstrual Wellbeing guidance</td>
<td>RCN Menstrual Wellbeing guidance was launched at RCN’s Woman’s Health Conference in</td>
</tr>
<tr>
<td></td>
<td>November 2019, and is now available online.</td>
</tr>
<tr>
<td>15. Features in RCN Bulletin on resolution activity.</td>
<td>This is planned for Feb/March 2020, and will include a four country perspective.</td>
</tr>
<tr>
<td>16. Twitter chat to discuss the issues being planned for November 2019.</td>
<td>This took place in November and was led by the Proposer and RCN Communications team; it</td>
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<tr>
<td></td>
<td>proved to be popular with some rich conversations being recorded.</td>
</tr>
<tr>
<td>17. Leaflets for members to give to women they provide care for about menstrual</td>
<td>It was planned to create and distribute a leaflet at RCN Congress 2020 as part of the</td>
</tr>
<tr>
<td>health and period poverty support.</td>
<td>commitment to raise awareness about Period Poverty. However, RCN Congress 2020 will</td>
</tr>
<tr>
<td></td>
<td>not have Congress packs or an opportunity to distribute leaflets. Alternative approaches</td>
</tr>
<tr>
<td></td>
<td>will be discussed at the next project team meeting in January 2020.</td>
</tr>
<tr>
<td>18. Equalities - Scope with RCN Equality and Diversity Lead if there is a specific</td>
<td>Discussion with RCN Equality and Diversity Lead clarified that there were no exceptional</td>
</tr>
<tr>
<td>equalities and diversity</td>
<td>issues to</td>
</tr>
</tbody>
</table>
3. Resources, costs and implications
This project is on budget, as outlined in the original submission.
The allocated budget was £1064.00 and is planned -
1. Project team meeting (January 2020) (£518.00 for catering/travel etc.)
2. Allocated for design and edit of leaflet (by May 2020) (£546.00).

4. Impact and/or risk assessments
A four country approach has been taken and supported by NI, Wales and Scotland RCN Offices as all areas of the UK are affected by period poverty. For example, a recent Bill to Scotland Parliament (Period Products (Free Provision) RCN submission as part of the call for evidence was discussed and comments considered. Due to the recent election this has not progressed.

5. RCN policies, procedures, Key Performance Indicators and strategic plan
Strategic Plan 2013-2018 alignment:
- Promoting excellence in practice (Item 3)
- Shaping health policies (item 14)

6. Stakeholder involvement and member consultation

<table>
<thead>
<tr>
<th>Role</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>PL Midwifery and Woman’s Health, Public Affairs Advisor, Project coordinator</td>
<td></td>
</tr>
<tr>
<td>Member proposer &amp; Member seconder</td>
<td></td>
</tr>
<tr>
<td>Estates team, Equality and Diversity Lead, Publications &amp; Communications teams</td>
<td></td>
</tr>
<tr>
<td>Committee and Council leads as outlined above</td>
<td></td>
</tr>
<tr>
<td>RCN Forum : Women’s Health, Midwifery, Public Health, CYP and RCN Student Committee,</td>
<td></td>
</tr>
<tr>
<td>Professional Lead and /or policy lead for NI, Wales and Scotland.</td>
<td></td>
</tr>
</tbody>
</table>

7. Evaluation and review
- Council will receive progress reports as set out in the congress reporting timelines.
- Evaluation process to be agreed at next committee meeting.

8. Recommendations
Council is invited to review the contents of this report.

Author: Carmel Bagness, Professional Lead Midwifery & Women’s Health
SMT : Susan Masters, Director of Nursing Policy and Practice
Head of Department/SMT/ET: Ying Butt, Associate Director of Nursing
Email: carmel.bagness@rcn.org.uk
**Project title: Decriminalisation of Prostitution**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>Programme start date</td>
<td>July 2019</td>
</tr>
<tr>
<td>Programme close down date</td>
<td>May 2020</td>
</tr>
<tr>
<td>Programme Lead</td>
<td>Beth Knight-Yamamoto, Public Affairs Manager</td>
</tr>
<tr>
<td>Programme sponsor</td>
<td>Lara Carmona, Associate Director of Policy &amp; Public Affairs UK &amp; International</td>
</tr>
<tr>
<td>Approval route for changes</td>
<td>Professional Nursing Committee</td>
</tr>
</tbody>
</table>

**Status (RAG rating)**

- **Red**: Significant issues with the project. It requires corrective action and the matter should be escalated.
- **Amber**: One or more aspect of project viability — time, cost, scope — is at risk. However, the deviation from plan is being mitigated.
- **Green**: All aspects of project viability are within tolerance. However, the project may be late or forecast to overspend. No action needed.

**Update for recent activities**

- In the Autumn of 2019, the Parliamentary Women and Equalities Select Committee announced an Inquiry into Prostitution, to which the RCN made a formal submission. However due to the General Election, the inquiry was closed and discussions with the Committee Clerks have indicated that it will not be re-opened. We will be analysing the opportunities with the new members of the Select Committee, upon their selection in February 2020.
### Up and coming activities

- A member facing issue briefing is being developed to detail the RCN policy position on decriminalisation of prostitution as well as background information on the issue.
- In discussions with stakeholder colleagues, namely at Amnesty International, opportunities within the new Parliament as well as with stakeholders in bringing together a wider stakeholder group is being explored in order to build a coalition of support for decriminalisation.
- Following the formation of the new Government, where applicable, the RCN is writing to relevant Ministers and the Home Secretary will be receiving a letter within which we will reiterate our call for prostitution to be fully decriminalised across the United Kingdom.

### Challenges

- Due to the General Election, proactive activity for this resolution was paused due to capacity issues. In addition, there was reduced capacity and workload pressures on colleagues in Northern Ireland due to the political context and Wales due to staffing issues has limited their ability to input and shape the project.

### Exception/escalation reporting

- None
## Purpose

1.1 This paper provides an update to Council in relation to Congress Resolution 1: That this meeting of Congress calls on Council to lobby the UK government to decriminalise prostitution.

1.2 Council is asked to review the update.

### Outline of work programme

<table>
<thead>
<tr>
<th>Item ## and Title</th>
<th>1 – Decriminalisation of Prostitution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Submitting entity</td>
<td>Greater Bristol Branch</td>
</tr>
<tr>
<td>Proposer &amp; Seconder</td>
<td>Proposer: Louise Cahill</td>
</tr>
<tr>
<td></td>
<td>Seconder: Jason Warriner</td>
</tr>
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<td>Professional Nursing Committee</td>
</tr>
<tr>
<td>Committee Member</td>
<td>Simon Browes</td>
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<tr>
<td>Council Representative</td>
<td>David Dawes</td>
</tr>
<tr>
<td>Executive Team Lead</td>
<td>Bronagh Scott</td>
</tr>
<tr>
<td>Staff Lead(s)</td>
<td>Beth Knight-Yamamoto; Helen Donovan supporting</td>
</tr>
</tbody>
</table>

### Summary of Progress and forthcoming work

3.1 Operational Work
Earlier this year, a task and finish group was established to determine the scale and scope of the resolution’s work. Based on discussions and feedback from the resolution’s proposer, PNC lead and professional nursing leads, an activity plan was developed and signed off.

The objectives of the project were agreed as:
- Establish the RCN’s policy position around decriminalisation of sex work/prostitution
- Raise awareness amongst Government and policymakers across the UK on the negative health outcomes associated with criminalising sex work and lobby them to decriminalise.

Following October 2019’s update, it was identified that the second objective was potentially too wide ranging and in particular, it was suggested that a more targeted objective would be achievable.

Due to personal changes within staff teams, planned activity including finalising policy briefings was delayed. However, this is set to be finalised in early 2020. In addition, the New Year brings a number of opportunities to continue to fulfil the mandate for this resolution.

Staff teams continue to ensure that other relevant congress resolution and wider policy/parliamentary and communications work reference/link and ensure that messages around the decriminalisations are included. RCN country teams continue to identify relevant lobbying opportunities, including potential coalitions/alliances we can support.

3.2 Influencing Activity

In early January 2020, a number of activities will take place in order to better understand the new political landscape. This includes stakeholder mapping of the new Parliament as well as identifying parliamentary business - including APPGs in Westminster, CPGs in Scotland and equivalent in Wales, as well as coalitions or alliances where the RCN can support.

Following the UK General Election, the RCN will be writing to Ministers regarding our policy positions and all relevant Government Ministers and Select Committee Chairs will include a section which highlights the RCN’s mandate on the decriminalisation resolution and call for this issue to be considered.

The Women and Equalities Committee announced an Inquiry into Prostitution in the Autumn of 2019. The RCN submitted an official response using testimony from members working with the sex work community. Unfortunately, due to the General Election, the inquiry was closed down, and confirmation has been received from the Committee Clerk that the inquiry may not be taken up by the new Committee. We are in discussion with stakeholders whether to pursue calling for this inquiry to be brought back.
The RCN have continued to proactively seek-out lobbying and influencing opportunities as well as working with coalition partners and stakeholders. As part of this work, links were made with Amnesty International in December 2019 in order to identify opportunities for working together and to better understand the landscape for lobbying in this area.

A number of potential activities were identified which will be discussed with the task and finish group in January 2020.

3.3 Policy development

The RCN is working to map relevant organisations, coalitions and stakeholders to work with in the work on lobbying the government to decriminalise prostitution.

The RCN has conducted a literature search on existing evidence and is working to produce two pieces of policy work.

The first, a position statement on the RCN’s policy position on the decriminalisation of prostitution. Second, a series of briefings for members, including a background briefing on the resolution and the RCN’s policy position as well as an externally focussed briefing to be used for lobbying meetings to inform external audiences of the RCN’s policy position and related evidence for decriminalisation.

This activity was delayed due to a change in staffing within the teams involved but will be completed in early 2020.

4 Resources, costs and implications

Staff time

Resources and cost implications will largely relate to staff time. Staff contributions from:

- Beth Knight-Yamamoto – lead
- Helen Donovan – supporting lead
- Policy/Public Affairs colleagues in Scotland (Niki Stark), England (Rosie Stanton), Wales (Lisa Turnbull) and Northern Ireland (John Knape)

Costs for the update period – none.

5 Impact and/or risk assessments

Revisited and iterated at the next resolution group meeting.

Impact
Appendix B(i)

- Opens the RCN to a new issues area which could help to foster relationships with new alliances, coalitions and stakeholders, giving us a new arena in which to influence and engage on policy issues.
- Helps to bring the nurse-voice and evidenced based policy making around health outcomes into the decriminalisation debate.

Risks
- RCN’s position for decriminalisation represents a reputational risk with stakeholders on the other side of the debate / deters senior stakeholders including Parliamentarians in working with us
  - Mitigation – A clear, well evidenced policy position by the RCN. Briefings for staff and members involved with clear lines to take as well as rebuttals for questions and/or criticism.

6 RCN policies, procedures, Key Performance Indicators and strategic plan

Work to enable this resolution aligns with our ‘Influencing and shaping policy’ with a specific nod to increasing member involvement in national and local policy making.

The work on this resolution will be UK wide and there are no other existing strategic or operational work which delivers outputs that meet the resolution

7 Stakeholder involvement and member consultation

<table>
<thead>
<tr>
<th>RCN Stakeholders</th>
<th>External Stakeholders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Members</td>
<td>Sex workers rights groups</td>
</tr>
<tr>
<td>Professional Leads</td>
<td>Relevant coalitions and interest groups including Amnesty International</td>
</tr>
<tr>
<td>Assistant Director Policy and Public Affairs</td>
<td>Department of Health and Social Care</td>
</tr>
<tr>
<td>Public Affairs teams across the four RCN country offices</td>
<td>Home Office</td>
</tr>
<tr>
<td>Communications Dept</td>
<td>Women and Equalities Committee</td>
</tr>
<tr>
<td></td>
<td>Media</td>
</tr>
</tbody>
</table>

8 Recommendations

Council is asked to note this update.

Author(s): Beth Knight-Yamamoto
Input from: Helen Donovan (Support lead)
Head of Department/SMT/ET: Lara Carmona, Associate Director of Policy & Public Affairs (UK & International)
Email: Beth.knight-yamamoto@rcn.org.uk
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Project title: RCN Congress 2019 Resolution Item 13: Sepsis

That this meeting of Congress asks RCN Council to lobby health care regulators across the UK to ensure education on the recognition, treatment and care of patients with sepsis is mandatory for all health care workers.

<table>
<thead>
<tr>
<th>Programme start date</th>
<th>21st September 2019</th>
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<tr>
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<td>30th April 2020</td>
</tr>
<tr>
<td>Programme Lead</td>
<td>Suman Shrestha</td>
</tr>
<tr>
<td>Programme sponsor</td>
<td>Susan Masters</td>
</tr>
<tr>
<td>Approval route for changes</td>
<td></td>
</tr>
</tbody>
</table>

Status (RAG rating)

Red: Significant issues with the project. It requires corrective action and the matter should be escalated
Amber: One or more aspect of project viability — time, cost, scope — is at risk. However, the deviation from plan is being mitigated.
Green: All aspects of project viability are within tolerance. However, the project may be late or forecast to overspend. No action needed.

Update for recent activities

- The Committee met on the 4th November 2019 and 5th December 2019.
Email has been sent to all the health care regulators in the UK at the end of November 2019 asking what processes they have in order to inspect the care around sepsis and whether they enquire about training and education on sepsis:

- Care Quality Commission (England)
- Healthcare Improvement Scotland
- Care Inspectorate Wales
- The Regulation and Quality Improvement Authority (N. Ireland)

None of the above organisations have yet responded.

NHS England Acute Deteriorating Group had the first meeting on 28th October 2019. There is a change in focus from concentrating just on ‘Sepsis’ to wider reasons of patient deterioration – hence the change in the name of the board.

Paediatric National Early Warning Score work is progressing well is expected to be released in Summer 2020.

Up and coming activities

- Next meeting is planned for the 29th January 2020.
- It was agreed that we will await response from all the health care regulators and make decision depending upon the response. To be discussed at the committee meeting on the 29th January 2020.
- We are considering sending Freedom of Information request to all health care providers within the NHS and independent sector across the UK in order to understand the current situation regarding training and education on sepsis. The information obtained through an FOI request may help us shape the next stage of the project. If most healthcare providers inform the RCN that they have already incorporated sepsis into their education and training programme, then we may not have to consider further activity for this resolution.

Challenges
• With regards to sepsis, opinion is still divided on how best it is recognised and treated. The focus this year (2020) will be to try and agree a single system for recognition and management of sepsis utilising NEWS2 system. The NHS England plans to engage with Academy of Medical Royal Colleges on the best way forward.

• Due to NHS England Sepsis CQUIN and various sepsis awareness campaigns in recent years; recognition, awareness and management of sepsis is considered to be improved. The NHS England (2018) data suggests that since 2015, across England in the samples submitted, the assessment for sepsis has increased from 52 per cent to 89 per cent in Emergency Department (ED), and from 62 per cent to 75 per cent for in-patients. Prompt antibiotic treatment – within an hour of recognition of sepsis – has increased from 49 per cent to 70 per cent in ED and from 60 per cent to 80 per cent for in-patients. Survival from sepsis has also improved from 70% in 2009 to 80% in 2019 according to the UK Sepsis Trust. The incidence of sepsis is on the rise but this has been attributed to better awareness and recognition rather than actual cases of sepsis.

• Difficulties obtaining FOI data particularly from the private sectors, such as nursing homes.

• The process of mandatory training in health care:
  - There is currently no national mandate/process on which topics are chosen to be included as part of the mandatory training for health care workers. Mandatory training is locally agreed taking into consideration national campaigns and guidance.
  - Most NHS Trusts have a Mandatory Annual Statutory Training (MAST) Governance Group who reports to the Quality Board. They make recommendations to the Executive Board for final decision on what topics are chosen for mandatory training within the organisation.
  - Due to cuts in CPD funding from HEE and nursing staff shortages, hospitals are struggling to meet requirements of basic mandatory training such as BLS and blood transfusion competencies and there may be reluctance to consider adding other topics of training.

Update from Professional Nursing Committee:
• The Professional Nursing Committee considered whether there was any value in pursuing Freedom of Information requests to providers and advised against it.
• It was acknowledged that there is a general move towards focusing on the deteriorating patient rather than specific medical conditions. Data suggests that the care of patients with sepsis has improved in recent years and it therefore may be challenging to campaign for mandatory training for sepsis.

Exception/escalation reporting
Date of Report: 18th December 2019

Title of Paper: Congress 2019: Item 13
That this meeting of Congress asks RCN Council to lobby health care regulators across the UK to ensure education on the recognition, treatment and care of patients with sepsis is mandatory for all health care workers.

Appendices:
- 

Presented by: Suman Shrestha

Is a decision required? Yes

1. Purpose

1.1. This paper provides an update to Council in relation to the Congress item stated above.

2. Outline of work programme

<table>
<thead>
<tr>
<th>Item ## and Title</th>
<th>Congress 2019: Item 13: Sepsis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Submitting entity</td>
<td>RCN CYP Specialist Care Forum</td>
</tr>
<tr>
<td>Proposer &amp; Seconder</td>
<td>Gillian Priday</td>
</tr>
<tr>
<td>Allocated Committee</td>
<td>Professional Nursing Committee</td>
</tr>
<tr>
<td>Committee Member</td>
<td>Alison Leary and Tracey Culpitt</td>
</tr>
<tr>
<td>Council Representative</td>
<td>Susan Masters</td>
</tr>
<tr>
<td>Executive Team Lead</td>
<td>Suman Shrestha (Nichola Ashby)</td>
</tr>
<tr>
<td>Staff Lead(s)</td>
<td></td>
</tr>
</tbody>
</table>
2.1 Identified Key stakeholder

- Children and Young People: Specialist Care Forum;
- Children and Young People’s Acute Care Forum;
- Children and Young People’s Continuing and Community Care Forum;
- Emergency Care Association;
- Critical Care and Flight Nursing Forum;
- General Practice Nursing Forum;
- Education Lead (Nichola Ashby);
- Management and Leadership Forum;
- Policy (Jonathan Barron);
- Media Team;
- Professional Leads: Fiona Smith and Rose Gallagher;
- Directors from each country.

2.2 Actions:

- Identify and agree health care regulators across the UK (Action: All):
  - The Committee met on the 4th November 2019 and 5th December 2019. The next meeting is planned for the 15th January 2020.
  - An email has been sent to all the health care regulators in the UK (at the end of November 2019) asking what processes they have in order to inspect the care around sepsis and whether they enquire about training and education on sepsis:
    - Care Quality Commission (England)
    - Healthcare Improvement Scotland
    - Care Inspectorate Wales
    - The Regulation and Quality Improvement Authority (N. Ireland)
  
  None of the above organisations have yet responded.

- Send Freedom of Information request to all health care providers within the NHS and independent sector across the UK in order to understand the current situation regarding training and education on sepsis. This was previously conducted by Health Education England in 2015. However, since then, due to NHS England Sepsis CQUIN and various sepsis awareness campaigns, recognition, awareness and management is considered to be improved. The NHS England data suggests that since 2015, across England in the samples submitted, the assessment for sepsis has increased from 52 per cent to 89 per cent in Emergency Department (ED), and from 62 per cent to 75 per cent for in-patients. Prompt antibiotic treatment – within an hour of recognition of sepsis – has increased from 49 per cent to 70 per cent in
ED and from 60 per cent to 80 per cent for in-patients. Survival from sepsis has also improved from 70% in 2009 to 80% in 2019 according to the UK Sepsis Trust. The incidence of sepsis is on the rise and this has been attributed to better awareness and recognition rather than actual cases of sepsis. The information obtained through an FOI request will help us shape the next stage of the project. If most healthcare providers inform the RCN that they have already incorporated sepsis into their education and training programme, then we may not have to consider further activity for this resolution.

- It was agreed that we will await response from all the health care regulators and make decision on this depending upon the response. This is to be discussed at the committee meeting in January.

- Continue engagement with external organisations through newly formed NHS England Deteriorating Patient Group which was previously the NHS England Cross System Sepsis Board. This Board is hosted by NHS England and members include all the Royal Medical Colleges, NICE, Public Health England and Health Education England. In addition, continue as a key partner in the development of a National Paediatric Early Warning System alongside the Royal College of Paediatrics and Child Health and NHSE; as well as the NHSE Children and Young People’s Transformation Board.

- NHS England Acute Deteriorating Group had the first meeting on 28th October 2019. There is a change in focus from concentrating just on ‘Sepsis’ to wider reasons of patient deterioration – hence the change in the name of the board.

- With regards to sepsis, opinion is still divided on how best it is recognised and treated. The focus next year will be to try and agree a single system for recognition and management of sepsis utilising the NEWS2 system. The board will engage with the Academy of Medical Royal Colleges on the best way forward.

- Work on Paediatric Early Warning System is going well and it is expected to be rolled out in summer 2020. It is anticipated that this will provide standardised way of recognising deteriorating paediatric patients across the country.
3 Resources, costs and implications

- Freedom of Information process cost
  [cost covered under business as usual cost]

- 2 x meeting costs for up to 20 people (Scoping and Final) including travel and accommodation which has been agreed:

<table>
<thead>
<tr>
<th>Project Title</th>
<th>Item 13 Congress Resolution 2019: Sepsis</th>
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<tbody>
<tr>
<td>Project Code</td>
<td>Description</td>
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<td>Account Code</td>
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<tr>
<td></td>
<td>£1,600.00</td>
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- Zoom teleconferencing (annual licence included in departmental costs).

4 Impact and/or risk assessments

Anticipated Challenges:

- Difficulties obtaining data particularly from the private sectors, such as nursing homes.
- The process of mandatory training in health care:
  - There is currently no national mandate/process on which topics are chosen to be included as part of the mandatory training for health care workers. Mandatory training is locally agreed taking into consideration national campaigns and guidance.
  - Most NHS Trusts have a Mandatory Annual Statutory Training (MAST) Governance Group who reports to the Quality Board. They make recommendations to the Executive Board for final decision on what topics are chosen for mandatory training within the organisation.
  - Due to cuts in CPD funding from HEE and nursing staff shortages, hospitals are struggling to meet requirements of basic mandatory training such as BLS and blood transfusion competencies and there may be reluctance to consider adding other topics of training.
5  RCN policies, procedures, Key Performance Indicators and strategic plan
   • This project will be in alignment with CPD education strategy.

6  Stakeholder involvement and member consultation
   • List of stakeholders as identified above
   • Consider external consultation through NHS England Deteriorating Patient Board in particular Health Education England and UK Sepsis Trust.
   • Member consultation is not planned.

7  Evaluation and review
   • Monthly teleconference (Dates to be agreed)
   • Final meeting in April 2020

8  Recommendation
   • Council is asked to note this update report.

Author(s): Suman Shrestha
Input from: Fiona Smith, Nichola Ashby
Head of Department/SMT/ET: Susan Masters, Director of Nursing, Policy and Practice.
Email: suman.shrestha@rcn.org.uk
Appendix B (i)


### Project title: Rural Health

<table>
<thead>
<tr>
<th>Programme start date</th>
<th></th>
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<tbody>
<tr>
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<tr>
<td>Programme Lead</td>
<td>Rosalind Stainton</td>
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<tr>
<td>Programme sponsor</td>
<td>Susan Masters</td>
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### Status (RAG rating)

- **Red**: Significant issues with the project. It requires corrective action and the matter should be escalated.
- **Amber**: One or more aspect of project viability — time, cost, scope — is at risk. However, the deviation from plan is being mitigated.
- **Green**: All aspects of project viability are within tolerance. However, the project may be late or forecast to overspend. No action needed.

### Update for recent activities

- Planned next steps with Task Group and shared intelligence from attendees
- A literature review has been produced which will feed in to the development of the issue briefing
- Early draft shared with LM for direction

### Up and coming activities

Ongoing work:
- RCN country teams identifying relevant lobbying opportunities
- Drafting an issue briefing for members
- Working with evidence team to get credible and insightful data
- Planning member engagement to get their experiences, innovations and solutions (bulletin article, social media questions and twitter chat)

Next steps:
- Finalise and publish issue briefing by end of March/early April 2020
- Collate case studies of nursing practice in rural settings to understand nurse-led innovations/solutions
- Agree a four-country approach to lobbying UK governments to urge investment in rural health
- Twitter chat and ongoing member engagement

Challenges
- Reduced capacity from 4 country colleagues (Northern Ireland and Wales) has limited their ability to input and shape the project, and continued capacity and staffing issues (Northern Ireland, Wales and Scotland) could limit the contributions and support going forward, potentially impacting overall report quality and impact.

Exception/escalation reporting
- N/A
### Date of report: 19 December 2019

<table>
<thead>
<tr>
<th>Title of Paper:</th>
<th>Progress report for congress resolution 12: “That this meeting of Congress asks RCN Council to lobby governments across the UK for better rural healthcare provision.”</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appendices:</td>
<td>None attached</td>
</tr>
<tr>
<td>Presented by:</td>
<td>Drafted by Rosalind Stainton</td>
</tr>
</tbody>
</table>

**Is a decision required? No**

1. **Purpose**
   1.1. This paper provides an update to Council in relation to Congress Item 12: “That this meeting of Congress asks RCN Council to lobby governments across the UK for better rural healthcare provision”.
   1.2. Council is asked to review this update.

2. **Summary of progress**
   2.1. Held further meetings of Task and Finish Group and planned next steps for workplan and shared intelligence from attendees.
   2.2. We are working with the evidence team to identify credible sources and data to further inform our research and findings.
   2.3. We are in the midst of planning member engagement to explore the issues and challenges facing nursing and healthcare in rural contexts. We will also seek to engage members working in rural areas to understand more about their experiences and stories, as well as to understand the solutions and who is best placed to implement them.
   2.4. We are producing a Bulletin article to invite members to share their experiences, innovations and solutions (early January), social media questions throughout December to invite responses and case studies, and there will be a Twitter chat in late January 2020. We have also asked regional officers in England if they are able to identify any members working in rural settings who would be willing to share their stories and insights, particularly focused on solutions to key challenges.
2.5. We are drafting an issue briefing which will focus on rural health in the UK with overview of the key issues and context in each part of the UK. This will serve as a resource to members.

2.6. A literature review has been produced which will feed in to the development of the issue briefing.

2.7. Ongoing work:
- RCN country teams will identify relevant lobbying opportunities, including potential coalitions/alliances we can support, to highlight rural health
- Working to ensure that other relevant congress resolution work reference/link to rural healthcare calls where appropriate, and to ensure that messages around rural challenges are included.

2.8. Next steps:
- Finalise and publish issue briefing by end of March/early April 2020
- Collate case studies of nursing practice in rural settings to understand nurse-led innovations/solutions
- Agreeing a four country approach to lobbying UK governments to urge investment in rural health
- Twitter chat and ongoing member engagement

3. Impact and/or risk assessments

3.1 Reduced capacity and workload pressures on wider colleagues (in Northern Ireland due to the recent political changes and current industrial/strike action, and Wales due to staffing issues) has limited their ability to input and shape the project. This could also limit the contributions and support they are able to offer going forward (which is now the same for Scotland due to staffing issues), potentially impacting the overall quality of the report.

4. Recommendations

Council is asked to note this report.

Author(s): Rosalind Stainton
Input from: Dawne Garrett (Support lead)
Head of Department/SMT/ET: Lara Carmona, Associate Director of Policy & Public Affairs (UK & International)
Email: Rosalind.stainton@rcn.org.uk
**Project title:** Delivery of congress resolution 20 ‘That this meeting of Congress calls on RCN Council to lobby the governments across the UK and all social care providers to recognise that personal care is nursing’

<table>
<thead>
<tr>
<th>Programme start date</th>
<th>August 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programme close down date</td>
<td>May 2020</td>
</tr>
<tr>
<td>Programme Lead</td>
<td>Clare Jacobs, National Officer, ERD</td>
</tr>
<tr>
<td>Programme sponsor</td>
<td>Susan Masters, Director NPPD</td>
</tr>
<tr>
<td>Approval route for changes</td>
<td>PNC/Nursing Strategy Board</td>
</tr>
</tbody>
</table>

**Status (RAG rating)**

- **Red:** Significant issues with the project. It requires corrective action and the matter should be escalated.
- **Amber:** One or more aspect of project viability — time, cost, scope — is at risk. However, the deviation from plan is being mitigated.
- **Green:** All aspects of project viability are within tolerance. However, the project may be late or forecast to overspend. No action needed.

**Update for recent activities**

- Activity on this resolution has been paused so that it can be integrated into the RCN organisation-wide strategy for independent health and social care.

**Up and coming activities**
- The IHSCS process has been delayed slightly due to the industrial action in Northern Ireland but has now started progressing again, once it is clearer how existing work such as this resolution will be integrated into the strategy activity can resume.

### Challenges

- The key challenge is the aforementioned pause in this work due to the independent health and social care strategy and the delay of this project, however in the longer term this piece of work will benefit from the clarity and strategic direction brought by the new strategy for the independent sector and work on this resolution will resume once the strategy has progressed sufficiently.

### Exception/escalation reporting

- No exceptions to report other than the overall pause in this project.
Appendix B(i)

Council

Date of Report: 9 December 2019

Title of Paper: Progress report in delivery of congress resolution 20 ‘That this meeting of Congress calls on RCN Council to lobby the governments across the UK and all social care providers to recognise that personal care is nursing’

Appendices: None

Presented by: Susan Masters, Director Nursing, Policy and Practice

Is a decision required? No

1. Purpose

1.1 The purpose of this paper is to provide FNFW and Professional Nursing Committee (PNC) with confirmation of continued pause regarding the previously proposed work plan in relation to Congress item 20: ‘That this meeting of Congress calls on RCN Council to lobby the governments across the UK and all social care providers to recognise that personal care is nursing’.

1.2 The Committee is asked to note this update

2. Outline of work programme

<table>
<thead>
<tr>
<th>Item ## and Title</th>
<th>(20) Personal Care: ‘That this meeting of Congress calls on RCN Council to lobby the governments across the UK and all social care providers to recognise that personal care is nursing’</th>
</tr>
</thead>
<tbody>
<tr>
<td>Submitting entity</td>
<td>Suffolk Branch</td>
</tr>
<tr>
<td>Proposer &amp; Seconder</td>
<td>Sarah Seeley  Gail Goddard DN forum</td>
</tr>
<tr>
<td>Allocated Committee</td>
<td>PNC</td>
</tr>
<tr>
<td>Committee Member</td>
<td>Julie Green</td>
</tr>
<tr>
<td>Council Representative</td>
<td>not advised</td>
</tr>
<tr>
<td>Executive Team Lead</td>
<td>Susan Masters</td>
</tr>
<tr>
<td>Staff Lead(s)</td>
<td>Clare Jacobs</td>
</tr>
</tbody>
</table>

2.1 Current pause in work plan
2.2 RCN Council has agreed to support Theresa Fyffe’s proposal to develop an RCN organisational wide strategy for independent health and social care (RCN Council meeting July 2019). This will include consideration of the scope, governance, decision making and reporting arrangements.

2.3 As previously advised this resolution, will now be integrated into the wider strategic approach. It is understood the IS&C review is at the scoping stage, and members of a task and finish group are currently being recruited.

2.4 Along with the 2018 resolution requiring the RCN to lobby for fair and sustainable funding for social care, this work remains paused pending future advice from the independent health and care (IS&C) review, led by the executive team.

3. **Resources, costs and implications**

   Nothing further to report.

4. **Impact and/or risk assessments**

   All UK countries are facing a crisis over the funding and provision of social care. Workforce issues are critical with a shortage of over 120,000 mainly nursing staff. Delay in clarity of an RCN position statement in recognising personal care is nursing, may compromise timely RCN responses to current and anticipated government and employer consultations and opportunities for lobbying over funding and staffing for safe and effective care.

5. **RCN policies, procedures, Key Performance Indicators and strategic plan**

   In light of this, the plans for a task & finish group for the work around lobbying for recognition that personal care is nursing, is paused for now, awaiting further definition in future, as part of the organisation wide independent health and care strategy.

6. **Stakeholder involvement and member consultation**

<table>
<thead>
<tr>
<th><strong>RCN Stakeholders</strong></th>
<th><strong>External Stakeholders</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Dawne Garrett</td>
<td>Professional Nurse organisations</td>
</tr>
<tr>
<td>Charli Hadden</td>
<td>British Association of Social Workers</td>
</tr>
<tr>
<td>Registered RCN speakers in Congress debate</td>
<td>Social Care Employer Representatives</td>
</tr>
<tr>
<td>Expert RCN nurse advisers</td>
<td>Independent Age</td>
</tr>
</tbody>
</table>
John Considine
Nominated staff leads from each country
RCN members with a professional interest in this area of work. Eg. expert forum members and 4 country coverage.

7. Evaluation and review

Further update will be provided once work on the RCN’s strategy for independent health and care has started and it is clear how this resolution fits in.

8. Recommendations

FNFW and PNC is asked to note this report.

Author(s): Clare Jacobs
Input from: Charli Hadden and Dawne Garrett
Head of Department/SMT/ET: Susan Masters, Director NPPD
Email: clare.jacobs@rcn.org.uk
This page is intentionally left blank
**Project title:**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Programme start date</td>
<td>August 2019</td>
</tr>
<tr>
<td>Programme close down date</td>
<td>March 2020</td>
</tr>
<tr>
<td>Programme Lead</td>
<td>Rose Gallagher/Kim Sunley</td>
</tr>
<tr>
<td>Programme sponsor</td>
<td>Susan Masters</td>
</tr>
<tr>
<td>Approval route for changes</td>
<td>Nursing Strategy Board</td>
</tr>
</tbody>
</table>

**Status (RAG rating)**

Red: Significant issues with the project. It requires corrective action and the matter should be escalated

Amber: One or more aspect of project viability — time, cost, scope — is **at risk**. However, the deviation from plan is being mitigated.

Green: All aspects of project viability are within tolerance. However, the project may be late or forecast to overspend. No action needed.

**Update for recent activities**

- ET discussion 10th December to inform content development of ET paper 02/19 and process to develop.
- Decision to develop ‘process’ paper to meet the requirements of resolution focusing on embedding of sustainability in all RCN activity and engage regions to contribute

**Up and coming activities**
- ET paper to be submitted for discussion and approval 19/2/20
- Outcome of ET meeting and approved paper to April Council meeting
- Review RCN position post Congress 2020
- Continued involvement in UN Climate Change meeting from health professional perspective

**Challenges**

- Need to consider if actions/ET decision meet members expectations and approval by Council April 2020

**Exception/escalation reporting**

- None
Council

Date of Report: 17th December 2019

Title of Paper:
Congress 2019 Resolution Item 25
That this meeting of RCN Congress calls on RCN Council to acknowledge the climate emergency declared by the UK Government and lobby health care providers to develop policies and strategies that are environmentally sustainable.

Appendices:
RCN Climate change statement

Presented by:
Susan Masters, DNPP

Is a decision required? Yes

1. Purpose

1.1 This paper provides a report on progress to the committee in relation to Congress Item 25 ‘That this meeting of RCN Congress calls on RCN Council to acknowledge the climate emergency declared by the UK Government and lobby health care providers to develop policies and strategies that are environmentally sustainable’.

1.2 The committee are asked to consider the report and approve amendments to the original plan.

2. Outline of work programme

<table>
<thead>
<tr>
<th>Congress 2019 Item 25</th>
<th>That this meeting of RCN Congress calls on RCN Council to acknowledge the climate emergency declared by the UK Government and lobby health care providers to develop policies and strategies that are environmentally sustainable.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Submitting entity</td>
<td>North Yorkshire Branch</td>
</tr>
<tr>
<td>Proposer &amp; Seconder</td>
<td>Gwen Vardigans, Roy Tomlinson</td>
</tr>
<tr>
<td>Allocated Committee</td>
<td>RCN Council</td>
</tr>
</tbody>
</table>
2.0 The first report and proposed work plan was approved by FNFW on 16th September 2018.

2.1. Progress to date is described in Section 7.

2.2. The proposed work plan is designed in two phases, acknowledging the long term need for and impact of this work. It reflects the growing concern of members of the impact of climate change and progressive campaigning undertaken at Congress 2019 to influence the passing of this resolution. Phase 1 has been achieved and phase 2 has been amended to reflect the need for strategic RCN consideration of activity up to and beyond Congress 2020.

2.3. This work continues to align with some existing NPPD activity such as Small Changes Big Differences and Glove Awareness Week.

3. Resources, costs and implications

An update on delivery of the RCN Congress resolution amended actions are listed below. The development of an RCN strategy on climate change, inclusive of organisational internal and external elements, will require significant engagement. Taking into account current organisational priorities and available resources it is proposed to amend the original proposal to focus on planning for consultation in 2020 rather than delivery and risk negative feedback.

<table>
<thead>
<tr>
<th>Action</th>
<th>Approximate resource</th>
</tr>
</thead>
</table>
| 1      | Develop RCN Council position to acknowledge UK government climate emergency declaration | Formatting of position and creation of digital position statement. *Estimated - £350*  
*Achieved September 2019*
| 3      | Assess current situation of NHS Trusts undertaking a sustainability assessment and creating an organisational action plan | Work with RCN Regional Directors and teams to included sustainability in local meeting agenda’s with Trusts/Boards and monitor impact of these.  
Liaise with SDU (England) to assess impact of sustainability assessments and implementation of action plans by NHS Trusts,  
*Estimated resource requirement - Nil*
| 4 | Work with members and internal stakeholders to embed sustainability into all RCN activity | Engage stakeholder groups to shape planning phase (October – December 2019). *complete*

Discuss and clarify with ET the strategic view on sustainability activity and resources to deliver in advance of ET paper preparation. *Complete*

Submit paper for approval to ET February 2020 to describe process of embedding sustainability in RCN activity and assessment of impact

Review RCN Small Changes Big Differences position and key messages on sustainability to strengthen RCN external presence

Review current RCN sustainability resources including RCN Small Changes Big Differences to align member/stakeholder engagement portfolio of work

Review RCN positions on sustainability ahead of November 2020 to coincide with UN COP2020 (Glasgow). |

---

Total estimated cost of amended actions above for 2019/20 are not expected to utilise the current allocated budget.

4 **Impact and/or risk assessments**

This resolution and subsequent work is relevant to all 4 RCN Regions as climate change and its impact on health and healthcare workers is a global phenomenon. To date all RCN sustainability associated activity has focused on current challenges within the NHS in England. Whilst this has achieved high impact, the following risks have been identified:

i) Reputational risk to limited RCN wide activity – Expanding current and future RCN activity on sustainability is a key consideration in preparation for member engagement in 2020. To date the focus of RCN bespoke
activity has centred on current challenges and priorities in England with 4 country support and engagement on an informal project to project basis. RCN membership of the UK Health Alliance for Climate Change supports our policy and strategic influencing through a UK focus on priority action areas. The decision to structure engagement and sharing of experiences from a 4 country perspective will strengthen the nursing and RCN voice and align with our membership expectations.

ii) Increased risk of challenge as a result of growing visibility and support for ‘Nurses for extinction rebellion (XR)’ – this growing body of nurses includes RCN members and is coalescing with Doctors for XR to form regional groups to deliver the XR objectives and creation of ‘the voice of healthcare professionals’. Lack of a comprehensive and UK wide strategic plan with clear objectives risks the RCN voice being weakened with media and members aligning with XR policy and activity.

iii) Missed opportunity to position the RCN as the voice of nursing on climate change – a unique opportunity exists to position the RCN at the heart of nursing policy on climate change and its impact. The RCN’s experience and delivery of formative and inspirational work such as Small Changes Big Differences and Glove Awareness Week and its growing international adoption positions nursing and the RCN as a solution motivated profession gaining public and political support to address this and other current challenges to the delivery of safe and effective nursing practice.

iv) NPPD capacity and competing priorities – additional work to deliver this resolution may result in other priorities being delivered late or partially.

5 RCN policies, procedures, Key Performance Indicators and strategic plan

Work to enable this resolution aligns with the RCN Strategic priorities of:

- Representing nurses and nursing
- Shaping health policy
- Promoting excellence in practice

6 Stakeholder involvement and member consultation

Stakeholders consulted to develop this plan include those listed below. Wider internal and external consultation will be required to deliver the resolution action plan.

| RCN Stakeholders (updated October 2019) | External Stakeholders |
### Evaluation and review

Regular reports will be submitted in line with the internal Congress reporting timescales. Current progress includes:

- Development and publication of RCN Climate change statement – September 2019 and delivery of keynote address on Small Changes 3rd October (NHS Sustainability event).
- Ongoing identification of further RCN internal stakeholders
- Meeting with members organised to begin planning of phase 2
- Approval by FNFW of Glove Awareness Week 2020
- Gaining support from UKHACC for RCN activity (supportive communications and strategic intelligence) and opportunities to collaborate in 2019/20
- Planning of RCN Small Changes Big Differences event Plymouth April 2020
- Small Changes Big Difference communication plan development for 2020
• Discussion at ET to clarify how RCN sustainability work can best be supported and enabled acknowledging risks associated with different levels of engagement on this issue
• Preparation for ET paper submission February 2020

8 Recommendations

8.1 The committee is invited to note the progress report in section 7 and request to amend original work plan in Section 2.

Author(s): Rose Gallagher, Professional Lead
Head of Department/SMT/ET: Susan Masters, Director of Nursing Policy and Practice
Email: rose.gallagher@rcn.org.uk
This page is intentionally left blank
Project title: Learning Disability and Autism

<table>
<thead>
<tr>
<th>Programme start date</th>
<th>Following RCN Congress 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>campaign close down date</td>
<td>Ready for reporting in June 2020 (Congress)</td>
</tr>
<tr>
<td>Programme Lead</td>
<td>Ann Norman</td>
</tr>
<tr>
<td>Programme sponsor</td>
<td>Susan Masters (exec team lead)</td>
</tr>
<tr>
<td>Approval route for changes</td>
<td>PNC</td>
</tr>
</tbody>
</table>

Status (RAG rating)

- **Red**: Significant issues with the project. It requires corrective action and the matter should be escalated.
- **Amber**: One or more aspect of project viability — time, cost, scope — is at risk. However, the deviation from plan is being mitigated.
- **Green**: All aspects of project viability are within tolerance. However, the project may be late or forecast to overspend. No action needed.

Update for recent activities

- RCN LD forum committee met at RCN HQ on 9th December 2019 for the first extraordinary planning meeting to scope detail of planned work
- Agreed actions to deliver a senior stakeholder summit at RCN HQ on March 13th 2020
- Planning teleconference calls booked to maintain traction and build stakeholder list
- Drafting letters to CNOs and invites to stakeholders
## Up and coming activities

- Work towards stakeholder summit on March 13th (room booked)

## Challenges

- Reliance on forum committee to deliver in a timely fashion.
- Ensure invitations are sent soon.
- Confirming programme and speakers (in hand).

## Exception/escalation reporting

- Nil to report.
Appendix B(i)

**Council**

<table>
<thead>
<tr>
<th>Date of Report:</th>
<th>18th December 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Title of Paper:</strong></td>
<td>Action plan to support congress resolution E29:</td>
</tr>
<tr>
<td></td>
<td>‘That Congress calls upon the RCN Council to lobby government organisations across the UK to take urgent action that safeguards the human rights of people with learning disabilities and autism.’</td>
</tr>
<tr>
<td><strong>Appendices:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Presented by:</strong></td>
<td>Professional lead Ann Norman</td>
</tr>
</tbody>
</table>

Is a decision required? Yes X

---

1. **Purpose**

This paper provides an update for Council in relation to the progress of Congress item E29, Learning disability (Human Rights).

2. **Outline of work programme**

Following discussion with the RCN learning disability nursing forum committee, the U.K RCN representatives an agreed approach for further action has been discussed. This includes the update below.

<table>
<thead>
<tr>
<th>Work plan</th>
<th>Update</th>
</tr>
</thead>
</table>
| Emergency resolution Human rights and Learning Disability | 1. The RCN learning disability nursing forum committee met at RCN HQ on 9th December 2019 for their extraordinary meeting to scope the detail of the proposed work.  
2. An output is a planned stakeholder summit for March 13th 2020 at RCN HQ.  
3. The team have agreed the title of the summit; ‘Respect, Protect and Fulfil’ with around 30 key stakeholders who can help and support the RCN work in raising the importance of Human rights for this population. |
4. The forum will now begin the drafting of CNO letters which will be designed to seek their support and attendance.

5. At the time of this update, the forum will review the draft action notes and plan for an early teleconference in January 2020, working closely with the professional lead.

<table>
<thead>
<tr>
<th>Item ## and Title</th>
<th>E29. Learning Disability Nursing Resolution ‘Human Rights’</th>
</tr>
</thead>
<tbody>
<tr>
<td>Submitting entity</td>
<td>RCN learning disability nursing forum committee</td>
</tr>
<tr>
<td>Proposer &amp; Seconder</td>
<td>Jonathan Beebee (proposer) Anne Campbell (seconder)</td>
</tr>
<tr>
<td>Allocated Committee</td>
<td>Professional Nursing Committee</td>
</tr>
<tr>
<td>Committee Member</td>
<td>Theresa Connor</td>
</tr>
<tr>
<td>Council Representative</td>
<td>Trevor Peel</td>
</tr>
<tr>
<td>Executive Team Lead</td>
<td>Susan Masters, Director of Nursing Policy &amp; Practice</td>
</tr>
<tr>
<td>Staff Lead(s)</td>
<td>Ann Norman (supported by Antonio Borneo)</td>
</tr>
</tbody>
</table>

3. **Resources, costs and implications**

   Input for RCN professional lead (internal) within 2019/2020 (TBC)

   Administration / co-ordinator support (half a day for 1 day per week (each)

   A) Travel costs (proposer) and forum committee contribution (for 8) including seconder to attend from N Ireland for the initial extraordinary forum meeting at HQ within next 3 months

   £1,400 (includes refreshments)

   B) Travel costs for strategic stakeholder day for proposer, forum committee members and seconder and additional travel costs for experts by experience with carer support to attend. (other invited stakeholders to fund travel to attend via their own organisations)

   £1,400 (committee).

   £500 catering / refreshments

   £1,000 to cover experts by experience and carers travel in order to fully contribute (each ‘expert by experience’ will require 1 carer supporter) x 3 or 4
(renumeration for experts by experience @£10 per hour (£240.00 Four x 6 hours.
Sub-total anticipated:
£3,140

Total for 1 meetings and 1 stakeholder event:
£4,540

4 Impact and/or risk assessments

It will be critical to have experts by experience and acknowledge their specialist
contribution which will incur necessary additional costs for travel
RCN can have a positive impact by utilising its membership and their leadership on
this area of disadvantage that affects ALL areas of health and social care.

5 RCN policies, procedures, Key Performance Indicators and strategic plan

Utilise RCN policies and procedure which demonstrate inclusivity & diversity
RCN as a leading voice through its forum members to highlight disadvantaged
groups needs
Build in the RCN strategic aims of promoting safe staffing principles

6 Stakeholder involvement and member consultation

<table>
<thead>
<tr>
<th>RCN Stakeholders</th>
<th>External Stakeholders</th>
</tr>
</thead>
<tbody>
<tr>
<td>RCN learning disability nursing forum committee and members</td>
<td>Royal Mencap Society</td>
</tr>
<tr>
<td>RCN 4 country policy leads</td>
<td>UK Learning disability nursing consultants</td>
</tr>
<tr>
<td>Media / communications team</td>
<td>NHS England</td>
</tr>
<tr>
<td>Parliamentary and policy team leads</td>
<td>Health Education England</td>
</tr>
<tr>
<td>Liaison with all PLs and PLDFs to capture specific areas of expertise</td>
<td>NHSi</td>
</tr>
<tr>
<td>RCN Council lead (Trevor Peel)</td>
<td>LD nurse consultants</td>
</tr>
<tr>
<td>PNC committee lead (Theresa Connor)</td>
<td>Foundation of Nursing Studies</td>
</tr>
<tr>
<td></td>
<td>4 U.K CNO’s</td>
</tr>
<tr>
<td></td>
<td>Directors of MH group / LIDNAN (LD academic network)</td>
</tr>
<tr>
<td></td>
<td>CQC and equivalent in NI, wales, Scotland</td>
</tr>
<tr>
<td></td>
<td>All forum chairs / committees</td>
</tr>
</tbody>
</table>
7 Evaluation and review
Ongoing evaluation regarding effective communication with PL and forums/council representative/proposer, agreeing and ‘sign off’ by forum committee and PNC
Assess media attention on this topic area (with media/comms team)
Examine feedback/responses from external stakeholders

8 Recommendations

Council is asked to note the updates to progress on this resolution.

Author(s): Ann Norman
Input from: RCN LD nursing forum committee
Head of Department/SMT/ET: Susan Masters / DNPP
Email: ann.norman@rcn.org.uk
**Project title:** Knife Crime

<table>
<thead>
<tr>
<th><strong>Programme start date</strong></th>
<th>June 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Programme close down date</strong></td>
<td>tbd</td>
</tr>
<tr>
<td><strong>Programme Lead</strong></td>
<td>Wendy Irwin, Equalities Lead</td>
</tr>
<tr>
<td><strong>Programme sponsor</strong></td>
<td>Lara Carmona, Associate Director of Policy &amp; Public Affairs</td>
</tr>
</tbody>
</table>

**Approval route for changes**

**Status (RAG rating)**

- **Red:** Significant issues with the project. It requires corrective action and the matter should be escalated.
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**Update for recent activities**
- Task and Finish group membership has broadened to include new members who are practitioners working to support a violence reduction and prevention approach across health.

- Articles have been written and planned for RCN publications urging member involvement and a twitter chat was held on the 17th December.

<table>
<thead>
<tr>
<th>Up and coming activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>• An issue briefing on violence prevention and reduction will be prepared ahead of Congress 2020 which will include case studies from across the UK.</td>
</tr>
<tr>
<td>• The Task and Finish group will be submitting a congress fringe event which will bring together lived experience and agencies working in the prevention space to highlight the nursing contribution.</td>
</tr>
<tr>
<td>• Finally, the task and finish group will be reviewing the opportunities to influence and lobbying across the UK following the recent election.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Challenges</th>
</tr>
</thead>
<tbody>
<tr>
<td>• UK governments hold control over public health funding.</td>
</tr>
<tr>
<td>• As a result of capacity issues and time pressures, not all of the internal stakeholders across the UK have been involved in shaping the activity-plan. However, the sequencing of outputs and the communications plan provides ample opportunity for commentary, engagement and influence.</td>
</tr>
</tbody>
</table>
Exception/escalation reporting

- none
Appendix B(ii)

Council

Date of meeting: 4th February 2020

Title of Paper: Congress 2019: Item E05 ‘That this meeting of RCN Congress pledges to support the UK Government’s public health strategies on violence prevention and reduction following the increase in violent knife crime across the UK.’

Appendices: To be completed by Governance Administrator, e.g.
Appendix A Insert title of appendix
Appendix B Insert title of appendix

Presented by: Equalities Lead, Wendy Irwin

Is a decision required? Yes □ No x□

1. Purpose

1.1. This paper provides a progress report to Council in relation to the Congress 2019 Item E05, that this meeting of RCN Congress pledges to support the UK Government’s public health strategies on violence prevention and reduction following the increase in violent knife crime across the UK.

1.2. Council is asked to review and note this update.

2. Summary of progress

2.1. During the presentation of this emergency resolution, both the proposer and seconder reminded Congress of the scale and growing complexity of violence; from intimate partner abuse and violence; to organised crime and structural violence. However, it was a focus on violent knife-crime and the impact on young people...
that emerged during the congress debate. The proposer underlined the need for ‘visible, credible and purposeful nursing leadership’ in this space. Further contributions to the debate highlighted the largely preventable nature of violence and the importance of coherent, multi-disciplinary and agency working. Some contributors to the resolution discussion identified concerns related to the impact of government spending decisions which meant a reduction of funding available for key partners in delivering a public-health based approach to violence reduction. Other participants raised concerns about an approach to tackling violence that framed the nursing contribution within a punitive reporting regime.

2.2. There have been meetings of the Task and Finish group and our membership has broadened to include new members who are practitioners working to support a violence reduction and prevention approach across health.

2.3. The group are clear that understanding the scope of this issue is important and feel it is necessary to engage meaningfully with members and the wider sector more generally. In respect of this, articles have been written and planned for RCN publications urging member involvement and a twitter chat was held on the 17th December. It generated some compelling and new insights into the role of nursing in the violence prevention space.

2.4. An issue briefing on violence prevention and reduction will be prepared ahead of Congress 2020 which will also include case studies from across the UK with a focus on using podcasts to share information and build literacy around the public health approach to tackling violence and reducing knife crime amongst young people.

2.5. The Task and Finish group will be submitting a congress fringe event which will bring together lived experience and agencies working in the prevention space to highlight the nursing contribution.

2.6. Finally, the task and finish group will be reviewing the opportunities to influence and lobbying across the UK following the recent election.
3. **Impact and/or risk assessments**

3.1. It remains the prerogative of UK governments to make provision for the funding of this work.

3.2. There is a risk that the current capacity and governmental issues facing our colleagues in Northern Ireland may mean that comprehensive four-country engagement is not possible.

3.3. The task and finish group has met twice and a series of teleconferences are scheduled to the end of April 2020 to take us up to phase one of the work-plan. A summary of the discussion along with key points are shared across the internal four-country stakeholders. As a result of capacity issues and time pressures, not all of the internal stakeholders across the UK have been involved in shaping the activity-plan. However, the sequencing of outputs and the communications plan provides ample opportunity for commentary, engagement and influence.

4. **Recommendations**

4.1. Council is asked to note the progress made to date.

**Author(s): Wendy Irwin, Equalities Lead**

**Input from:** Fiona Smith, Professional Lead for Children and Young People

**Head of Department/SMT/ET:** Lara Carmona, Associate Director of Policy & Public Affairs (UK & International)

**Email:** wendy.irwin@rcn.org.uk
## Project title:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>Programme start date</td>
<td>July 2019</td>
</tr>
<tr>
<td>Programme close down date</td>
<td>May 2020</td>
</tr>
<tr>
<td>Programme Lead</td>
<td>Josephine Brady, Associate Director ERD</td>
</tr>
<tr>
<td>Programme sponsor</td>
<td>Helen Whyley, Director RCN Wales</td>
</tr>
<tr>
<td>Approval route for changes</td>
<td>TUC/Nursing Strategy Board</td>
</tr>
</tbody>
</table>

### Status (RAG rating)

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- **Amber**: One or more aspect of project viability — time, cost, scope — is at risk. However, the deviation from plan is being mitigated.
- **Green**: All aspects of project viability are within tolerance. However, the project may be late or forecast to overspend. No action needed.

### Update for recent activities

- The Congress resolution task and finish group met for the third time on 12 December to further progress the actions within the agreed work programme.
- The group agreed with a proposal from Wendy Irwin, Equalities Lead, on how to proceed with the action plan item on Congress 2020 by using an Inclusion Café model to provide a safe space to gather for facilitated discussions about how to prevent bullying in workplaces.
- Further to a discussion about the role of the Health and Safety Executive in preventing bullying at the previous meeting, Kim Sunley presented a draft of a letter to be sent from the Chief Executive/General Secretary to the HSE.
<table>
<thead>
<tr>
<th>Up and coming activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>- At the next meeting Emily Davies from the Learning and Development team will demonstrate the new e-learning resource for reps on tackling bullying in the workplace and gather feedback from the group.</td>
</tr>
<tr>
<td>- Wendy identified the EHRC as another potential route for external influencing to hold employers to account, and it was agreed that she would draft a letter to the EHRC for review at the next meeting.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Challenges</th>
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</thead>
<tbody>
<tr>
<td>- The group has addressed the lack of representation from students and HCSWs, but unfortunately have not yet been able to secure representation from Northern Ireland in the task and finish group which we will continue to seek. It is important to ensure that any outputs of the group are applicable in all four nations.</td>
</tr>
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<table>
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<tr>
<th>Exception/escalation reporting</th>
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<tr>
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</tbody>
</table>
Date of Report: 12 December 2019

Title of Paper: UPDATE REPORT 2
Congress 2019 Resolution Item 10
That this meeting of Congress condemns the failure by governments across the UK to introduce legislation to prevent bullying in the workplace and urges RCN Council to insist that this is addressed urgently.

Appendices: Appendix 1: Work programme

Presented by: Helen Whyley, Director RCN Wales

Is a decision required? No

1. Purpose

1.1. This paper provides an update report on work to progress the work programme on Congress resolution 10, agreed by the Trade Union Committee on 27 September.

1.2. The Trade Union Committee is asked to note progress against the objectives within the work programme.

2. Status (RAG rating)

Red: Significant issues with project. The project requires corrective action and the matter should be escalated.
Amber: One or more aspect of project viability - time, cost, scope - is at risk. However, the deviation from plan is being mitigated.
Green: All aspects of project viability are within tolerance. However, the project may be late or forecast to overspend. No action needed.

3. Outline of work programme

| Item ## and Title | Item 10: That this meeting of Congress condemns the failure by governments across the |
UK to introduce legislation to prevent bullying in the workplace and urges RCN Council to insist that this is addressed urgently.

<table>
<thead>
<tr>
<th>Submitting entity</th>
<th>Lancashire West Branch</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proposer &amp; Seconder</td>
<td>Maggy Heaton and Graham Revie</td>
</tr>
<tr>
<td>Allocated Committee</td>
<td>Trade Union Committee</td>
</tr>
<tr>
<td>Committee Member</td>
<td>Neil Thompson</td>
</tr>
<tr>
<td>Council Representative</td>
<td>To be advised</td>
</tr>
<tr>
<td>Executive Team Lead</td>
<td>Helen Whitley</td>
</tr>
<tr>
<td>Staff Lead(s)</td>
<td>Josephine Brady</td>
</tr>
</tbody>
</table>

3.1. The Congress resolution task and finish group met for the third time on 12 December to further progress the actions within the agreed work programme, following approval of the action taken so far at the Trade Union Committee meeting on 31 October.

3.2. The task and finish group were pleased to have two new members in the form of representatives from the RCN Student’s Committee and also from the Healthcare Support Worker community. Unfortunately progress had not been made in securing a representation from the RCN Northern Ireland due to the current focus on delivering industrial action there currently, but the group agreed to continue seeking a representative and ensuring that Northern Ireland are provided with regular updates on the group’s work.

3.3. The group were presented with a proposal from Wendy Irwin, Equalities Lead, on how to proceed with the action plan item on Congress 2020. She outlined her idea to use an Inclusion Café model to provide a safe space for all types of member attending congress to gather for facilitated discussions about how to prevent bullying in their workplaces, ask questions and be provided with the necessary tools to do this. Wendy outlined ways in which these events had been successfully used previously and suggested that the group advocate for a café feature throughout congress rather than one individual fringe event so that different tailored sessions could be run throughout. The group were happy with this proposal and gave approval for Wendy to take forward this discussion with governance to make this request formally and put the logistical arrangements in place.

3.4. Further to a discussion about the role of the Health and Safety Executive in preventing bullying at the previous meeting, Kim Sunley presented a draft of a letter to be sent from the Chief Executive/General Secretary to the HSE, making a strong case for them stepping up to play a more active role in holding employers to account for their duty to reduce sources of stress in the
workplace through inspections, making use of compelling evidence from the RCN’s recent employment survey. The group signed off the draft of the letter and asked Kim to liaise with public affairs and communications in order to ensure the letter can be publicised for maximum impact.

3.5. Emily Davies delivered a presentation on progress so far with the development of an e-learning resource for reps on tackling bullying in the workplace. It had been hoped to share a demo for the group to trial ahead of this meeting but Emily explained this had unfortunately not been possible to deliver in time. However she provided an update on how the resource was taking shape, which will include actors filmed portraying anonymised real life case studies about bullying, plus a session on bullying and the law presented by the head of RCN employment law Jo Galbraith-Marten. She also noted that newly available technology allows for the e-learning resource to link directly to the RCN library’s digital resources that are relevant for the training. The group was pleased with the progress of this work and noted that a demo would be ready to share in the New Year, so that feedback could be provided and discussed at the next task and finish group meeting.

3.6. Colleagues from across the UK provided an update on recent nation-specific work around bullying prevention. Unfortunately in England the Social Partnership Forum had not met since the last meeting due to the pre-election period, however it was agreed to update on this at the next task and finish group meeting in January. In Scotland, Ros Shaw provided an update on the second meeting of the Sturrock Review ministerial group, which had asked all stakeholder organisations to provide a statement detailing how they will contribute to implementing the outcome of this review, which Ros shared with the group. Also in Scotland legislation is progressing to introduce an independent national whistleblowing officer which is hoped to improve workplace culture in all health workplaces, both NHS and independent sector. Finally Jane Carroll provided a written update on RCN Wales’ respect and resolution work stream which is progressing. Workshops have been held with reps of all unions and staff to begin looking at the issues and develop an improved dignity at work policy across NHS boards and trusts.

3.7. Wendy Irwin provided an update on the role of the Equalities and Human Rights Commission in preventing bullying, and its counterpart in Northern Ireland the Equalities Commission. She explained that following a recent House of Comms inquiry into bullying and harassment, the EHRC have made a commitment to better using their legal enforcement powers to drive improvements in workplaces rather than taking a more facilitative approach as in the past. Wendy identified this as another potential route for external influencing to hold employers to account, and it was agreed that she would
draft a letter to the EHRC in a similar vein to Kim’s letter to the HSE. Wendy also noted the need to explore the role of the Equalities Commission and the best way to make a similar approach to them on this matter.

3.8. Finally the group received a brief update from Kim and Wendy under AOB as to the progress of the agenda development for the March 2020 joint reps conference. The action in the task and finish group’s workplan to deliver a session for reps aimed at preventing workplace bullying at the March 2020 joint reps conference has been taken forward, and the group noted that a draft agenda would be ready to review at their next meeting.

4. Resources, costs and implications

4.1. FNFW has allocated a budget of £3,000 to each congress resolution which the task and finish group would like to use to contribute towards the setting up of an inclusion café at Congress 2020 should this request be approved, rather than a single fringe event. Wendy Irwin will be taking forward discussions with governance to seek clarity on the exact costs involved in this and the degree to which a contribution from this task and finish group’s budget allocation is required.

4 Impact and/or risk assessments

4.1. The group has addressed the lack of representation from students and HCSWs, but unfortunately have not yet been able to secure representation from Northern Ireland in the task and finish group which we will continue to seek. It is important to ensure that any outputs of the group are applicable in all four nations.

5 RCN policies, procedures, Key Performance Indicators and strategic plan

5.1. Work to enable the resolution aligns with the RCN’s Group Strategy of providing active personal and workplace support through influencing workplace policies to ensure they provide a workplace that is safe and respects and supports the physical and mental wellbeing of our members.

5.2. The work contributes to the key performance indicator of ensuring our members and customers are satisfied with their RCN Group experience.
6 Stakeholder involvement and member consultation

<table>
<thead>
<tr>
<th>RCN Stakeholders</th>
<th>External Stakeholders</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Present at Task and Finish Group on 12 December:</strong></td>
<td>Health and Safety Executive</td>
</tr>
<tr>
<td><strong>Members</strong></td>
<td>Equality and Human Rights Commission/Equality Commission NI</td>
</tr>
<tr>
<td>Maggy Heaton (proposer)</td>
<td>Parliamentsarians</td>
</tr>
<tr>
<td>Neil Thompson (Trade Union Committee representative)</td>
<td>Media</td>
</tr>
<tr>
<td><strong>Staff</strong></td>
<td></td>
</tr>
<tr>
<td>Josephine Brady, Associate Director ERD and staff lead</td>
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<tr>
<td>Wendy Irwin, Equalities Lead</td>
<td></td>
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<tr>
<td>Kim Sunley, National Officer and staff support</td>
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<tr>
<td>Emily Davies, Learning and development facilitator</td>
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<tr>
<td>Ros Shaw, Senior RCN Officer Scotland</td>
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</tbody>
</table>

7 Evaluation and review

7.1 The congress resolution task and finish group will meet again in January and early March to monitor the progress of the work.

7.2 Regular reports will be provided to the Trade Union Committee in line with the agreed timeframe.

7.3 Specific timescales and indicators of success are included in the work programme and have not changed.

8 Recommendations

8.1 The Trade Union Committee is asked to note progress made by the task and finish group to meet the objectives and outputs within the work programme.

Author(s): Josephine Brady, Associate Director, Employment Relations
Input from: Kim Sunley, National Officer, Employment Relations
Head of Department/SMT/ET: Susan Masters, Director Nursing, Employment Relations and Policy
Email: josephine.brady@rcn.org.uk
## Appendix 1

### Work Programme

<table>
<thead>
<tr>
<th>Objective</th>
<th>Description of work</th>
<th>Indicators of success</th>
<th>Timeframe</th>
<th>Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>Empower RCN reps to confidently support members who are dealing with bullying through delivery of online tools, training and resources</td>
<td>Development and delivery of an online resource to help reps support those dealing with bullying in the workplace</td>
<td>Reps feel able to confidently support members experiencing bullying</td>
<td>End of 2019</td>
<td>Existing budget (within L&amp;D budget for developing learner management system)</td>
</tr>
<tr>
<td>Inform and engage with RCN reps on how to promote a culture that prevents bullying in their workplaces</td>
<td>Dedicated workshop session on bullying at March 2020 joint reps conference with expert facilitation, follow up with fringe event at Congress 2020 reporting back to members on work undertaken. New chapter on bullying added to the NQN Handbook</td>
<td>Attendees are aware of best practice and legal considerations around bullying in the workplace. Informed about existing RCN work in this area. Connected to resources and support to help reps help members.</td>
<td>March 2020</td>
<td>Workshop at joint reps conference within existing ERD budget for conference (travel and accommodation for speaker). Fringe event within existing Congress budget.</td>
</tr>
<tr>
<td>Objective</td>
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<tr>
<td>Influence national health and safety bodies to hold employing organisations accountable for addressing work related stress including bullying</td>
<td>Lobbying the Health And Safety Executive (England, Scotland and Wales) and Health and Safety Executive Northern Ireland to press for inspection activity on how organisations are addressing work related stress including bullying at work</td>
<td>Evidence of HSE inspection activity on work related stress (including bullying) Employers who are inspected demonstrating positive action in response</td>
<td>March 2020</td>
<td>National Officers’ business as usual. No budget needed.</td>
</tr>
<tr>
<td>Work within national staff side and employer partnership forums to advocate in a joined up way for employers to be held accountable for preventing bullying at work</td>
<td>Advocacy within the Social Partnership Forum to promote joint message from unions and employers to promote the ‘Collective call to action’ on workplace bullying Advocacy within Welsh Partnership Forum to refresh bullying prevention policy</td>
<td>Reps in England aware of the collective call to action Reps involved in local initiatives to implement and review the collective call to action Refreshed workplace bullying policy in use in Wales</td>
<td>March 2020</td>
<td>Staff within ERD/RCN Wales business as usual. No budget needed.</td>
</tr>
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<td>Budget</td>
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<tr>
<td>Scotland</td>
<td>Advocacy within Ministerial Steering Group for the Sturrock Review in Scotland</td>
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### Project title: Third Party Sexual Harassment

<table>
<thead>
<tr>
<th>Programme start date</th>
<th>July 2019</th>
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</thead>
<tbody>
<tr>
<td>Programme close down date</td>
<td>May 2020</td>
</tr>
<tr>
<td>Programme Lead</td>
<td>Kim Sunley, National Officer, ERD</td>
</tr>
<tr>
<td>Programme sponsor</td>
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### Update for recent activities

- The Congress resolution task and finish group met on 16.12.19 to progress the actions within the agreed work programme.
- The group received an update from Jo Galbraith Marten, Head of RCN Legal, on the Bussong v NHS Pennine case and the potential implications for other cases of third-party harassment, planning further media promotion of this including a feature in RCN Activate.
- The group reviewed the draft content of a members' leaflet on third party sexual harassment which is being prepared for launch at Congress 2020.
### Up and coming activities
- The group discussed plans for Congress 2020 and the launch of the guidance. It was agreed that the issue of third-party sexual harassment, raising awareness amongst members and supporting them to have conversations would sit well in an inclusion café style forum rather than a formal congress fringe. The group will work with the RCN's Equality and Diversity lead to progress this idea.

### Challenges
- The technical consultation on sexual harassment at work, which included the proposal to return employer liability for third party sexual harassment to the Equality Act 2010, was under the previous Government. At this time, it is unclear whether the new Government will progress with this proposal.

### Exception/escalation reporting
-
<table>
<thead>
<tr>
<th>Date of Report:</th>
<th>20th January 2020</th>
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</table>
| Title of Paper: | UPDATE REPORT 2  
Congress 2019 Resolution Item 19  
That this meeting of RCN Congress calls on RCN Council to lobby employers to set up systems to protect health care professionals from sexual harassment by patients or their families or friends |
| Appendices: | Appendix 1: Work programme |
| Presented by: | Helen Wholey, Director RCN Wales |
| **Is a decision required?** | No |

1. **Purpose**

   1.1. This paper provides an update report on work to progress the work programme on Congress resolution 19, agreed by the Trade Union Committee on 27th September.

   1.2. Council is asked to note progress against the objectives within the work programme.

2. **Status (RAG rating)**

   - **Red**: Significant issues with project. The project requires corrective action and the matter should be escalated.
   - **Amber**: One or more aspect of project viability - time, cost, scope - is at risk. However, the deviation from plan is being mitigated.
   - **Green**: All aspects of project viability are within tolerance. However, the project may be late or forecast to overspend. No action needed.

3. **Outline of work programme**
2.1 The Congress resolution task and finish group met on 16.12.19 to progress the actions within the agreed work programme and act on any feedback received from the Trade Union Committee.

2.2 It was noted that the task and finish group had acted on the feedback of the Trade Union Committee and have secured nominations from both the Students’ Committee and the Nursing Support Workers’ Committee. Unfortunately, neither representative was able to attend the meeting. The group had been unable to progress with representation from Northern Ireland, but it was agreed that the new representative on the UK safety representatives committee should be approached via the committee chair.

2.3. The group received an update from Jo Galbriath Marten, Head of RCN Legal, on the Bussong v NHS Pennine case and the potential implications for other cases of third-party harassment. The group welcomed the work to progress this case and the far-reaching implications should it be successful. The group felt it important that the RCN continued to seek media coverage of this case to show RCN members what we are doing on their behalf. It was noted that the case had featured in the Guardian and that a feature in RCN’s Activate was planned.

2.4 The group reviewed the draft content of a members’ leaflet on third party sexual harassment which is being prepared for launch at Congress 2020. The group made a number of suggestions to enhance the leaflet which will be included in the revision. Work on the framework and reps’ resource will progress in January and a draft will be shared at the next meeting and tested at the joint reps’ conference in March 2020.

2.5 The group discussed plans for Congress 2020 and the launch of the guidance. It was agreed that the issue of third-party sexual harassment, raising awareness amongst members and supporting them to have...
conversations would sit well in an inclusion café style forum rather than a formal congress fringe. The group will work with the RCN’s Equality and Diversity lead to progress this idea.

2.6 It was noted that the RCN had included action on good employment practices and addressing violence, bullying and harassment within its manifestos. The group reviewed the Conservative party’s manifesto for specific action on third party sexual harassment and taking forward the proposals of the Women and Equalities committee on sexual harassment and subsequent consultation earlier in the year. There is no specific commitment within the manifesto to bring back employer liability for third party harassment, so the Bussong v NHS Pennine case is even more significant.

4. Resources, costs and implications

3.1 No additional costs or resources have been identified

4 Impact and/or risk assessments

4.1 It should be noted that the technical consultation on sexual harassment at work, which included the proposal to return employer liability for third party sexual harassment to the Equality Act 2010, was under the previous Government. At this time, it is unclear whether the new Government will progress with this proposal.

5 RCN policies, procedures, Key Performance Indicators and strategic plan

5.1 Work to enable the resolution aligns with the RCN’s Group Strategy of providing active personal and workplace support through influencing workplace policies to ensure they provide a workplace that is safe and respects and supports the physical and mental wellbeing of our members.

5.2 The work contributes to the key performance indicator of ensuring our members and customers are satisfied with their RCN Group experience.

6 Stakeholder involvement and member consultation
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</thead>
<tbody>
<tr>
<td><strong>Present at Task and Finish Group on 16th December</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Members</strong></td>
<td></td>
</tr>
<tr>
<td>Zeba Arif (Outer North West London Branch - proposer)</td>
<td></td>
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<tr>
<td>Neil Thompson (Trade Union Committee representative)</td>
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<tr>
<td><strong>Staff</strong></td>
<td></td>
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<tr>
<td>Jane Carroll</td>
<td>Senior Officer RCN</td>
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<tr>
<td>Wales</td>
<td></td>
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<tr>
<td>Jo Galbriath Marten</td>
<td>Head of Legal</td>
</tr>
<tr>
<td>Kim Sunley, National Officer and staff lead</td>
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</tbody>
</table>

7 Evaluation and review

7.1 The congress resolution task and finish group will meet again in late January and in April to monitor the progress of the work.

7.2 Regular reports will be provided to the Trade Union Committee in line with the agreed timeframe.

7.3 Specific timescales and indicators of success are included in the work programme and have not changed.

8 Recommendations

8.1. Council is asked to note progress made by the task and finish group to meet the objectives and outputs within the work programme.

Author(s): Kim Sunley, National Officer
Input from: Josephine Brady, Associate Director, Employment Relations
Head of Department/SMT/ET: Susan Masters, Director Nursing, Employment Relations and Policy
Email: kim.sunley@rcn.org.uk
## Appendix 1

### Work Programme

**Congress Resolution 19: Third Party Sexual Harassment**

<table>
<thead>
<tr>
<th>Objective</th>
<th>Description of work</th>
<th>Indicators of success</th>
<th>Timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>To develop a good practice framework to use to lobby employers at a national and local level to address third party sexual harassment</td>
<td>Good practice framework which identifies actions we would expect employing organisations to take to address third party harassment</td>
<td>Evidence that organisations are implementing the good practice framework. Evidence of systems leads promoting the good practice framework</td>
<td>Draft framework developed and tested at joint reps conference in March 2020. Final framework launched at Congress 2020. Ongoing work to gather examples of promotion and implementation 2020 to 2022</td>
</tr>
<tr>
<td>To build the capacity of our workplace reps to work in partnership and, where appropriate, challenge employers in addressing third party sexual harassment</td>
<td>Resource for reps on third party harassment L&amp;D session at joint reps conference March 2020</td>
<td>Reps feel able to confidently support members experiencing third party harassment Reps have the knowledge and skills to work in partnership with employers to address third party harassment</td>
<td>Draft resources developed and tested at joint reps conference in March 2020. Final resource launched at Congress June 2020</td>
</tr>
<tr>
<td>To support our members to recognise and report cases of third party sexual harassment</td>
<td>Resource for members on third party harassment (hard copy and possible online/video resource)</td>
<td>Members are clear that the RCN takes a zero tolerance approach to third party sexual harassment and expects employers</td>
<td>Congress June 2020</td>
</tr>
<tr>
<td>Objective</td>
<td>Description of work</td>
<td>Indicators of success</td>
<td>Timeframe</td>
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<tr>
<td></td>
<td>Fringe at Congress 2020 to launch work and raise awareness amongst members</td>
<td>to address this issues. Members feel confident to report cases of third party sexual harassment</td>
<td></td>
</tr>
</tbody>
</table>

**Other work**

- Use additional opportunities to lobby for improvement in protections e.g. response to Government consultation on sexual harassment; discussion with Health and Safety Executive (linking to ILO convention on violence at work); discussions with NHS Improvement and Social Partnership Forum in relation to work on violence, bullying and harassment in the NHS Long Term Plan

- Ongoing links with stakeholders; input into external stakeholder groups and consultation responses

- Evidence that third party sexual harassment is recognised as a workplace issue in health and social care.

- Evidence that steps are being taken by system leads/regulators to ensure health and social care employers address this issue.

- Response to Government consultation by October 2019

- Ongoing input into relevant discussions and meetings with stakeholders
1. The Trade Union Committee has met 4 times since it last reported to Council.

2. We had two teleconferences on 12 and 21 November in addition to our scheduled meetings on 4 December and 20 January 2020.

**12 November**

3. We held a teleconference to consider the outcome of the ballot in Northern Ireland (NI) for industrial action and strike action and to consider for recommendation to Council the plans for initial industrial action and strike action.

4. We noted the outcome of the ballot and the strong member support to both ballot questions on willingness to take part in industrial action short of and including strike action.

5. An update was noted on the limited ongoing negotiations on pay and safe staffing between the NI trade unions and the Permanent Secretary and Chief Executive of the HSC.

6. A tabled report was received from the NI Board extraordinary meeting on 11 November at which planned dates for industrial action and strike action had been discussed in line with the mandate provided by NI members.

7. We recognised that moving to industrial action would have an impact on patients but were reassured that every effort had been made through negotiations to avoid this last resort course of action.

8. Work was underway to develop an RCN Industrial Action Rule book to support action going forward. Committee members were taking part in initial review of the draft documents ahead of a sign off at a further teleconference on 21 November.

9. We received an update on the communications plan going forward including maintaining engagement with members, the public, NI political parties and other NI trade unions.
10. Decision: the Committee agreed to recommend the plan of action as set out within the NI Board addendum report to RCN Council for approval as follows:

<table>
<thead>
<tr>
<th>Week</th>
<th>Date of action</th>
<th>Action planned</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>3 December 2019</td>
<td>24-hour Industrial Action (Short of strike)</td>
</tr>
<tr>
<td>2</td>
<td>10 &amp; 11 December 2019</td>
<td>48-hour Industrial Action (Short of strike)</td>
</tr>
<tr>
<td>3</td>
<td>18 December 2019</td>
<td>12-hour Strike Action</td>
</tr>
<tr>
<td>4</td>
<td>8 &amp; 10 January 2020</td>
<td>Targeted Strike Action</td>
</tr>
<tr>
<td>5</td>
<td>20, 22 &amp; 24 January 2020</td>
<td>Targeted Strike Action</td>
</tr>
<tr>
<td>6</td>
<td>10, 12 &amp; 14 January 2020</td>
<td>Targeted Strike Action</td>
</tr>
<tr>
<td>7</td>
<td>3, 5 &amp; 7 March 2020</td>
<td>Targeted Strike Action</td>
</tr>
</tbody>
</table>

[2019.11.13 - post meeting note:
An error was advised to the table contained within the NI Board addendum which related to the March dates as below:

| 3, 5 & 7 March 2020 | 2, 4 & 6 March 2020 | Targeted Strike Action |

21 November

11. We received a formal application from the South East (SE) Board seeking approval for RCN members working for the States of Guernsey to undertake a ballot on industrial action.

12. We were advised of increasing dissatisfaction with nursing pay terms and conditions in the State since 2011 centred on a disparity in pay equity with civil servants in comparable jobs and with nursing pay in neighbouring Jersey.

13. Long running pay negotiations with the employer had yet to deliver a pay offer that was acceptable to the trade unions, with two pay offers made for 2019 rejected on the grounds they did not meet the RCNs minimum ask of a 10% rise.

14. The member ballot on the latest two-year pay offer had been soundly rejected at 92%, with 90% of those members supporting a move to industrial action.

15. We noted that conciliation talks were continuing with the Industrial Disputes Officer following the declaration of a formal dispute in October.

16. Guernsey members remained resolved to progress to industrial action however as it was not anticipated that sufficient progress would be delivered under the conciliation process.
17. The SE Board had therefore supported the Guernsey Branch request to seek approval from Council to ballot on industrial action to be conducted at the conclusion of the conciliation process if no further suitable offer was secured.

18. Guernsey members were continuing to publicly campaign for fair pay to good public response, including an online petition and recent march.

19. We discussed concerns over the risk to Guernsey members in taking industrial action, with limited legal protection in place due to an absence of statutory regulation of industrial action in the State. It was highlighted that members taking industrial action could face disciplinary action for breaching their contracts of employment.

20. We noted that a comprehensive risk analysis would be undertaken should the application to ballot be approved.

21. **Decision:** the Committee agreed to recommend to Council that the RCN moves to ballot members employed by the States of Guernsey and working for the Guernsey Office for the Committee of Health and Social Care (HSC) for industrial action, including action short of strike action and strike action if no further significantly improved offer is secured during conciliation.

**RCN industrial dispute handbook**

22. We considered a draft RCN handbook on industrial action which aimed to ensure compliance with trade union legislation and policies and procedures during periods of industrial action.

23. The handbook was to support members and officers involved in industrial action.

24. We had undertaken an initial review of the draft handbook documents via email the previous week, and the feedback received had been incorporated into the draft before the Committee.

25. We noted the proposed decision making and management arrangements covering the processes for both approving and managing industrial action and strike action. These aimed to fit with our arrangements and ensure clarity of roles between governance and decision making, and delivery and management.

26. Concerns were raised over the proposal to restrict Country/Regional Board members from also sitting on Industrial Action Dispute Committees particularly for the current NI dispute.

27. We asked for a number of minor changes and points of clarification to the handbook.

28. **Decision:** the Committee agreed to recommend to Council approval of the draft RCN industrial action handbook.

**4 December**

29. An induction session was held before the start of the meeting for the new members elected to join the Committee in January 2020. The new members also observed the Committee meeting.

**Northern Ireland and Guernsey**
30. We received updates on the current positions of the ongoing disputes in both Northern Ireland (NI) and Guernsey.

31. We were especially pleased to hear positive feedback from the first day of industrial action short of strike in NI on 3 December and the extensive media coverage.

32. Planning was continuing for the further upcoming days of action including on 18 December a coordinated day of strike action with other trade unions.

33. We raised concerns about reports from a number of NI members of instances where employers were applying undue pressure on members taking part in industrial action.

34. It was advised that such instances were being dealt with swiftly by the relevant locally based industrial/strike action committee.

35. We noted that guidance was now on the RCN website on how members from the rest of the UK could support NI members taking industrial action. This focussed on reinforcing the key campaign messages on social media.

36. In Guernsey, the trade unions had rejected the latest offer from the employer as being unacceptable.

37. Legal advice was now being sought on next steps including the options of a further member ballot on the offer or moving to binding arbitration.

UK pay policy

38. We considered the first draft of a UK Pay Policy which had been informed by the workshop session we had at our October meeting and by initial scoping work undertaken by senior staff.

NHS Staff Council update

39. An update was received on the November NHS Staff Council meeting and the implementation of outstanding elements of the England and Wales pay framework agreements.

40. All elements of the Scotland agreement had now been implemented.

41. We noted that agreement had yet to be reached in England with regards to apprentice pay and the buying and selling of annual leave and were advised of next steps.

42. We discussed the approach to communications on the third year of the pay deals which would start in April 2020.

43. We noted that an NHS Staff Council sub group was developing joint communications for England including an ‘at a glance’ document and an updated pay journey tool for the third year of the pay deals.

44. We identified a number of additional areas for inclusion within the FAQ section to help support members to understand the impact on their pay.

45. Similar guidance would be developed for Wales and Scotland.

46. We reiterated the importance of prioritising our work on job evaluation. A task and finish group is being set up to lead this work.
An update was also received on the new NHS pension flexibilities.

NHS England had now confirmed that senior clinical staff adversely affected by a pension tax charge in 2019/20 would have their tax liabilities paid as a one off gesture in response to the arising workforce pressures.

A briefing was being produced for senior nurses affected.

We noted that a consultation was open on cost sharing for the public sector pension scheme on the Isle of Man.

**RCN position statement on work related violence**

A draft RCN position statement on work related violence had been drafted in consultation with the Safety Reps Committee.

This statement would form a starting point for the development of further resources on workplace violence including a charter and guidance for members and safety reps.

**Decision:** the Committee agreed the draft RCN position statement on work related violence subject to a number of minor amendments.

We also agreed to feed in any case studies or examples of good practice on prevention.

**Reps recruitment targets 2020**

Annual recruitment targets for Stewards, Safety and Learning Reps had been introduced in January 2019.

These had been set by each country and region based on a 10-20% increase on existing figures in order to take into account the considerable variation across the UK. The same approach had been adopted for the setting of targets for 2020.

**Decision:** the Committee approved the proposed reps targets from January 2020 as set out in the report.

**New activist/ambassador role**

We noted that a Council Member had drafted a proposal for a new RCN activist/ambassador role and had proposed a trial of this new role in a small number of branches.

We agreed to defer consideration of the proposal to our January meeting when the findings of two related pieces of work carried out in 2018 and 2019 on the engaging active members would be available.

**Congress 2020**

We discussed potential agenda and fringe applications that we could submit as a Committee for next year’s Congress and ideas for working collaboratively with other Committees on these.

A small group of Committee members was identified to draft the submissions.
Committee development programme 2020

62. We provided our views on how we would like to approach Committee development going forward, to address both our individual and collective learning needs.

63. A preference was outlined for continuing the approach this year of holding focussed development workshop sessions on particular topics as part of our Committee meetings.

64. We received a number of reports for noting including the latest quarterly MRSPB report, the RCNs response to the Migration Advisory Committee’s call for evidence, a report from the last International Committee and an update on the SSEC campaign.

65. We noted the 6 January deadline for written evidence submissions to the NHS pay review body 2020 pay round. As in previous years, there would be both RCN and joint staff-side submissions.

66. Owing to the tight timelines, we noted that the draft submissions would be circulated to us for comment via email with a deadline for response of 20 December.

Committee Membership
Lors Allford (South West) (Chair) * # ~
Tracey Budding (West Midlands) (Vice Chair) # * ~
Michael Appleby (Northern) *
Diane Coleman (Scotland) * # ~
Fiona Devlin (Northern Ireland) * #
Carol Evans (Eastern) # ~
Liz Jeremiah (South East) #
Gaynor Jones (Wales) *
Clare Manley (Student) #
Karen Pike (Health Practitioner) * ~
Karen Sanders (London) * ~
Neil Thompson (East Midlands) * # ~
Mike Travis (North West) * ~

(* in attendance 12 Nov meeting
(# in attendance 21 Nov meeting)
(~ in attendance 4 Dec meeting)

20 January 2020

67. The Committee met on 20 January and welcomed 6 new members and a new Chair. The membership is set out below.

68. The majority of the meeting was devoted to the fast evolving industrial disputes in Guernsey and Northern Ireland and as a result we deferred a number of agenda items.

Guernsey – latest position
69. We received a briefing on the background and current position of the long running pay dispute in the Crown Dependency of Guernsey on the disparity in nursing pay compared with that of other State Civil Servants.

70. The formal conciliation period had completed and had not delivered the significantly improved pay offer that had been a condition of Council’s decision in November to approve a request to ballot Guernsey members on industrial action.

71. Assurance was provided that Guernsey members were resolved to progress to action of last resort having lost confidence in reaching an acceptable resolution to the dispute. This was despite the limited legal protection afforded to them due to the absence of statutory regulation of industrial action in the State.

72. We noted that an industrial action handbook was currently being drafted to support Guernsey members in future action and that we would need to review this before the Council meeting on 3 February.

73. We reiterated our support for our Guernsey colleagues on moving to the next stage of action and offered our congratulations on the high level of public and member engagement they had achieved with their campaign.

74. **Decision: The Committee:**
   - Approved the proposed timeline for the ballot for recommendation to Council.
   - Confirmed the return rate for completed ballots to constitute an acceptable mandate for any action.
   - Approved the position, ballot questions and member information for recommendation to Council.

**Northern Ireland – latest position**

75. We received a briefing on the current position on action being taken by our colleagues in Northern Ireland in their industrial dispute.

76. The first period of strike action had started in December across all health and social care services, with excellent engagement from members and the public. The RCN had continued to engage in ongoing negotiations during this time.

77. We welcomed the resumption of the NI Assembly in early January and the subsequent progress of productive negotiations with the new Health Minister.

78. A temporary suspension of future planned RCN strike action had been agreed following the receipt of a ministerial framework document outlining a commitment to achieving full pay parity for nurses and addressing safe staffing with investment commitments.

79. We reviewed the framework document and noted that the trade unions were working collectively to fully assess the details of the proposals before consulting with members on their acceptability.

80. We stressed the importance of a comprehensive, collective approach across the trade unions to consulting with members on the details of the proposals to support informed decision making.

81. **Decision: the Committee:**
• Noted the update report submitted to Council from the RCN Northern Ireland Board.
• Agreed to recommend to Council the timeline and process to ballot members employed in health and social services in Northern Ireland on the proposals from the Department of Health.

82. We extended our congratulations to members and staff in Northern Ireland for achieving so much progress and the impact their unprecedented strike action had on restoring power sharing in Northern Ireland.

NHS Staff Council and NHS pay deal implementation
83. An update was received from the January NHS Staff Council meeting and on the implementation of the current framework agreements in England and Wales. The Scotland framework was fully implemented.
84. We would be feeding into the consultation on draft NHS Staff Council guidance covering Time Off In Lieu (TOIL) arrangements for Agenda for Change staff in England.
85. An update was received on key emerging issues related to the NHS pension schemes including around pension flexibilities, special class status and the impact of recent legal judgements around transitional protection arrangements for public sector pension schemes.

Supervision of reps
86. We considered a report on the current situation with regards to the supervision of all reps.
87. Support and supervision standards were now in place for all types of reps to ensure they were all receiving regular supervision and that this was consistently recorded using a new template.
88. A new improvement project was planned to trial peer supervision of reps as well as reviewing the Steward’s standards.
89. We discussed a future focussed piece of work around Facilities Time access and recording and which would be added to our work-plan.

New activist/ambassador role
90. We considered a proposal from Geoff Earl, Council Member, to develop and pilot the introduction of a new role of RCN activist/ambassador.
91. It was envisioned that this role could serve as a mechanism to engage directly in a face to face way with RCN members at a workplace level to encourage mobilisation and a two way flow of information.
92. We noted ongoing work to continue to explore different ways to strengthen workplace engagement including a new activist/ambassador role.
93. We stressed the importance of a comprehensive evaluation process being in place for the different pilots to capture learning and to inform future decision making.
94. The need to clearly differentiate any new roles with that of accredited reps was also highlighted.

**Independent Governance Review**

95. We gave feedback on issues we would like addressed under the independent governance review to a representative from the Centre for Public Scrutiny who attended our meeting.

**Committee Membership and attendance**

Graham Revie (Scotland) (Chair)
Tracey Budding (West Midlands) (Vice-Chair)
Michael Appleby (Northern)
Carol Evans (Eastern)
Jackie Davies (Wales)
Liz Jeremiah (South East)
Denise Kelly (Northern Ireland)
Heather Massie (Student)
Karen Pike (Nursing Support Worker) – apologies
Carol Popplestone (Yorkshire and Humber)
Karen Sanders (London)
Neil Thompson (East Midlands)
Mike Travis (North West) Jeni Watts (South West)
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The Committee met on 6 December 2019 and again on 21 January 2020. The first part of our meeting in December was an induction session for new members.

At our January meeting, we were joined by the five new members who took up post from 1 January – Fiona Sommerville (Eastern), Sue Haines (East Midlands), Alison Leary (London), Siobhan Donald (Northern Ireland) and Kendal Moran (student).

This meeting was also the first for Rachel Hollis as Chair and Siobhan Donald as Vice Chair.

Our January meeting was observed by the Centre for Public Scrutiny who are leading the independent governance review of the RCN.

Committee Terms of Reference

We noted the final version of our Committee terms of reference following Council’s approval in November 2019 of our proposed changes.
Representation on the Staffing for Safe and Effective Care Campaign Overview and Scrutiny Committee and Council Task and Finish Groups

6. At January’s meeting, we discussed our Committee representation on a number of task and finish groups set up by Council to carry out specific time-limited pieces of work.

7. Sally Young has agreed to be the Committee’s second representative on the Overview and Scrutiny Committee for the Staffing for Safe and Effective Care Campaign alongside Denise Llewellyn who is the Chair.

8. Theresa Connor will be representing the Committee on the Congress Review Group.

9. Carly Boyce will be the Committee representative on the Membership Category Review Group.

10. We are also identifying a member of the Committee to Chair the task and finish group for the development of the education, learning and development strategy as well as a second member to sit on the steering committee for the RCN/ University of Sheffield research alliance.

Performance Reporting, Ways of Working and Decision Making Timetable for Delivery of the Work Programme

11. In December, we agreed to monitor and report progress on our Committee work programme using a dashboard format with a supporting narrative and project update reports.

12. We have also agreed a project update template which includes an executive summary of the project and sections to report progress against the project plan, a financial report; and the risks/implications of any change(s).

13. In January we considered a first draft of a PNC dashboard to report performance against the key strategic priority areas set out in our work programme.

14. This approach is being rolled out across all the RCN committees to ensure a consistent approach to monitoring performance, reporting and escalating any exceptions and providing assurance to Council.

15. We provided our comments on the draft dashboard and agreed it was important to reflect impact as well as risk for each strategic area.

16. We will be undertaking more work on the dashboard before our next meeting to ensure it accurately reflects the current status of the priorities identified in our work programme.
Congress 2019 Agenda Items and Planning for Congress 2020

17. We received summary update reports at both meetings on the follow-up work on the Congress 2019 resolutions being overseen by the Committee and agreed that it made sense to ask the Committee leads who stood down in December 2019 to continue to lead on the items allocated to them.

18. Planning for Congress 2020 was discussed including progressing a joint fringe event with the Trade Union Committee to promote our roles and work to members.

19. We also submitted a matter for discussion on how members can contribute to the professional strategy of the College.

UK Staffing for Safe and Effective Care (SSEC)

20. We noted updates at both meetings on the work of the SSEC Overview and Scrutiny Committee.

21. In January, we also received a short presentation on the history of safe staffing in Northern Ireland, the evidence base underpinning the campaign there and the current position of the industrial dispute.

22. We asked that our congratulations be passed to Northern Ireland members and staff on their successful campaign.

23. We agreed that taking the difficult and unprecedented decision to take industrial action had constituted the highest act of professional judgement on the grounds of patient safety.

24. We discussed how the learning from this campaign would be captured and used as a case study of how the College mobilised its members and harnessed public support.

RCN Group UK Education, Learning and Development and Technology Enhanced Learning Strategy

25. We received updates at both meetings on plans to develop the education, learning and development and technology enhanced learning strategy. We discussed the first stages of the work which include engagement events for members to feed into the scoping of the College’s future education offer.

26. This piece of work will be led by a Council task and finish group, chaired by a member of the PNC.

27. We provided feedback on the work undertaken to date and asked to see the Project Initiation Document to enable members to make an informed decision about whether to put themselves forward to Chair the task and finish group.
28. We received a presentation in January on the work of the Alliance to date and an overview of its 2020 work plan.

29. We discussed the importance of moving towards the standardisation of career pathways and career development across the UK, in particular for Nursing Support Workers, and the research the Alliance might be able to carry out in this area.

30. We requested a short high level summary on the work plan for 2020 linked to the original strategic aims and priorities of the Alliance.

WHO 2020 Year of the Nurse and Midwife - RCN Plans

31. In January we noted the plans for the celebration of the International Year of the Nurse and Midwife 2020 and that a bulk email was to go out shortly to all members to raise awareness and promote the full calendar of events. We noted that the RCN Foundation also had events planned during 2020.

32. We asked to be kept updated as the plans progressed and offered our support where needed to promote the profession and the role of the Committee.

33. Committee members will also be engaging with events and activities taking place in their countries/regions.

Independent Health and Social Care Sector Project Implementation Plan

34. In December, we were briefed on plans to develop a UK wide independent health and social care strategy. We were also updated on progress with setting up the Council task and finish group and the UK Programme Board.

35. We discussed the proposed governance and management arrangements to deliver the strategy and how the Committee could contribute to this work. We took part in a workshop to enable us to input into the scope of the strategy.

International Recruitment of Nursing Staff in the UK

36. In December we also received a paper setting out the policy work undertaken in relation to the international recruitment of nursing staff.

37. We congratulated staff on this work and supported the publication early in 2020 of the paper on international recruitment of nursing staff in the UK which includes a set of assurance criteria for ethical international recruitment practice undertaken by any external organisation or governmental body for lobbying purposes.
Member Consultation on the Timing of the AGM

38. We agreed a process for drafting a consultation response from the Committee for submission. This will be co-ordinated by Theresa Connor.

Member Consultation on the Review of Membership Categories

39. It was agreed that Carly Boyce would co-ordinate the Committee response to this consultation once it went live as the new member of the task and finish group.

Committee Updates

40. We gave our support to a new RCN position statement supporting the fortification of flour with folic acid to help prevent neural tube defects which would be submitted in response to a government consultation.

41. A final report was received from the termination of pregnancy project which had been established to consider the membership response to the growing issue around decriminalisation.

42. We noted that following a member wide survey and the development of an RCN position statement, the focus going forward was on ensuring the RCN was engaged as a key stakeholder on a UK wide basis in this ongoing issue.

Any Other Business

International Council of Nurses (ICN)

43. An overview was provided of the work underway to inform a future decision about the RCN’s membership of the ICN.

44. This work included data gathering; a value-benefit assessment and a review of other alliances/networks.

45. We were advised that information on four key areas remained outstanding from the ICN.

Learning Disability Nursing Reset

46. We asked for clarity on the approach to work in this area by the RCN.

Proposal for Development Sessions

47. We discussed the best way of scheduling development sessions around our meetings to enable us to make the best use of our time together as a Committee.
Independent Governance Review

48. Finally, we provided feedback over lunch on the key issues we would like to see addressed as part of the independent governance review to the representative from the Centre for Public Scrutiny who attended our meeting.

The Committee next meets on 17 March 2020.

Committee Membership

Rachel Hollis (Yorkshire and the Humber – CHAIR)
Siobhan Donald (Northern Ireland – VICE CHAIR)
Carly Boyce (South West)
Mary Codling (South East)
Theresa Connor (Scotland)
Tracie Culpitt (Nursing Support Worker)
Tim Grace (Northern)
Julie Green (West Midlands)
Sue Haines (East Midlands)
Alison Leary (London)
Denise Llewellyn (Wales)
Kendal Moran (Student)
Fiona Sommerville (Eastern)
Sally Young (North West)

Anne Marie Rafferty (President)

Apologies were received from Carly Boyce, Theresa Connor and Lucy Mason (previous student member) for the December meeting. Mary Codling was unable to attend the January meeting.

Caroline Clinker
Governance Adviser
caroline.clinker@rcn.org.uk
1. **Purpose**

1.1. This paper sets out the decision made by the RCN Wales Board to agree with the request to change the name of the RCN Cwm Taf Branch to the RCN Cwm Taf Morgannwg Branch.

2. **Detail**

2.1. The RCN Wales Board is responsible for the governance of the RCN in Wales and considered an option appraisal in its open session on 13 December 2019 regarding the name of the RCN Cwm Taf Branch.

2.2. Following the October meeting of the Cwm Taf Branch, the Director received a letter from the Cwm Taf Branch Chair informing her that a vote had taken place at the meeting and a request was being made to change the name of the branch from Cwm Taf Branch to Cwm Taf Morgannwg Branch.

2.3. The RCN Cwm Taf Branch Chair, presented the rationale for the change of name to the RCN Wales Board as follows:
• The Cwm Taf University Health Board’s name had been changed to Cwm Taf Morgannwg University Health Board and its boundaries had been widened to include members from Bridgend.

• Boundary changes for both the Cwm Taf and Glamorgan branch were made at this time.

• The Cwm Taf branch expressed the desire to change the name to Cwm Taf Morgannwg branch to reflect these changes and to be more inclusive of members from Bridgend.

2.4. Following due consideration at the RCN Wales Board meeting of all the points raised, the RCN Wales Board made the decision that, as per the request, the branch name should be changed to the Cwm Taf Morgannwg Branch.

3. **Resources, costs and implications**

3.1. No cost implications associated with changing the name of the RCN Branch.

4. **Impact and/or risk assessments**

4.1. Following the move of Princess of Wales NHS Services to Cwm Taf University Health Board, the members working in the Health Board in Bridgend are now in the Cwm Taf Branch. Therefore, if the name was to be changed it may feel more inclusive to its members who live/work within the geographic area of Bridgend.

4.2. If the name was to change to the Cwm Taf Morgannwg Branch, there is the possibility that this may have a negative effect as members who were not present at the Branch meeting and who work within the Independent Sector may feel that the Branch name should not be this similar to the Cwm Taf Morgannwg University Health Board.

5. **RCN Group Action Plan and Council Priorities**

5.1 The activities associated with this paper are compliant with the 2019 – 2021 RCN Group Action Plan’s Council priorities.

6. **RCN Group Action Plan and Council Priorities**

6.1. The activities associated with this paper are compliant with the 2019 – 2021 RCN Group Action Plan’s Council priority to encourage more active membership: Harness the engagement of our members to strengthen the RCN’s voice locally and nationally and enable us to
respond as a union to the specific concerns of our members wherever they work.

6.2. The developments outlined in this paper will help the RCN extend its influence by encouraging more members to be active and increase member involvement.

7. **Stakeholder involvement and member consultation**

7.1. RCN members attending the RCN Cwm Taf Branch meeting were consulted with regarding the change of name.

7.2. The RCN Welsh Board decided on this request.

8. **Evaluation and review**

8.1. RCN Wales Board will review and evaluate this change of name.

9. **Recommendations**

9.1. Council is asked to ratify the decision made by the RCN Wales Board for the name of RCN Cwm Taf Branch to be changed to the RCN Cwm Taf Morgannwg Branch.

Author: Helen Whyley, Director, RCN Wales

Input from: Gaynor Jones, RCN Wales Ex Board Chair
Richard Jones, Vice Chair of Council & Council Member Wales and Chair of Cwm Taf Branch

Head of Department/SMT/ET: Helen Whyley, Director, RCN Wales

Email: helen.whyley@rcn.org.uk
To: Mrs Helen Whyley,
   Director,
   RCN Wales,
   Ty Maeth,
   King George V Drive East,
   Cardiff,
   CF14 4XZ

Dear Helen,

Re: Branch Name Change Request

Following discussions at our last branch meeting, I as Chair of the Branch have been mandated by the Cwm Taf RCN Branch requesting the Welsh Board consider forwarding our request to RCN Council applying for a change of branch name. This is due to the change of boundaries of our catchment area on 1st April 2019 and the legal formation of the new Cwm Taf Morgannwg University Health Board.

The Branch members were unanimously in their view that “Cwm Taf Morgannwg” name would be a much better fit for our new membership from Bridgend and much more inclusive of our membership as a whole in our new geographical catchment area. We look forward to hearing the outcome of our request following the next RCN Welsh Board Meeting.

Your Sincerely

Richard Jones
Cwm Taf RCN Branch Chair