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Dear Newly Qualified Nurse (or soon to be!),

So you've done it – you've passed all the Nursing and Midwifery Council (NMC) and university requirements. You can now breathe knowing that you have got that registration you have been working hard for.

But wait. That feeling of euphoria isn't lasting and, if you are anything like us, there is a feeling of mild panic! Don't worry — we all feel like this. Losing the support of your university, access to resources and a peer group can feel daunting. Add to this the pressure of navigating new systems, processes and a new role.

We know you can handle it, but as added support, the RCN's *Newly Qualified Nurse Handbook* and network* is here for you too. We provide a whole host of guidance, including how best to make the most of your preceptorship, social media peer support and your RCN membership. This guide isn't designed to be read from cover to cover – just dip in and out as required.

You have joined a profession with history, integrity, heart and compassion at its core; one that gives us opportunity and endless possibilities if we are brave enough to take the chances we are offered.

The nursing profession gives us the privilege of being with people during some of their hardest times. As Maya Angelou said: "I've learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel."

Wherever your nursing journey takes you, know that you will be remembered by many for how you made them feel and that individually we can be great, but together we can do something truly awesome!

Good luck in your career, we hope to meet many of you online and in person. Feel free to contact us and engage with the RCN through social media.

Clare Manley and Craig Davidson, RCN Newly Qualified Nurse Network

^{*} See page 56 for details of how to join the network.

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Preface - COVID-19

The challenge of starting your nursing career during a worldwide pandemic

As an NQN or student nurse in the UK in 2020, it is inevitable that the COVID-19 pandemic will have had an impact on you. As an NQN starting your career or a student nurse nearing the completion of your programme, the impact is likely to have been significant, as you negotiated changes to placements and to the end of your university course.

We know that for many, university courses may have been interrupted and there have been changes to your clinical placements and academic routes. Plans to prepare for the end of your programmes and the start of your nursing careers have been seriously challenged.

We know that the stress and anxiety about what the future holds for your nursing career, not to mention your personal and family life, will have had a profound effect. The *Newly Qualified Nurse Handbook*, together with additional resources relating to the COVID-19 pandemic, will provide you with points of reference and guidance to support you at this time.

For many, there will have been numerous challenges in our professional and personal lives that may leave us feeling unsure, wondering what our nursing career and opportunities hold for us now and in our future.

The importance of looking after yourselves, your physical, emotional and mental wellbeing, could not be greater than it is now, as you embark on your final placements or as newly qualified registered nurses across all health care settings.

We know that the skills, values, behaviours, knowledge and understanding that you have gained as a student nurse will provide you with a comprehensive base to continue your development through this pandemic. We also know that for each of you there may be stresses, anxieties, fears and worries that can be supported with access to the *Newly Qualified Nurse Handbook*.

At the RCN, we pride ourselves on the member support that we offer. We recognise that at these unusual times, support provided in these resources will be important for both personal and professional development.

We have developed and provided dedicated resources to support our members as they live and work through these challenging times.

The COVID-19 resources provide up-to-date, evidence-based information, employment guidance and clinical and learning resources. There are resources and guidance specific to the four nations – England, Northern Ireland, Scotland and Wales.

The resources include guidance on personal protective equipment (PPE), redeployment, raising concerns, infection prevention and control information and specific care for vulnerable groups (such as patients with cancer and end-of-life care).

Looking after yourself is vital and there are also resources focusing on self-care and mental health.

rcn.org.uk/covid-19

Members make it happen

Keep engaged and active in the RCN

The RCN promotes excellence in practice, shapes health policy and provides you with the tools and resources to help deliver high-quality patient care. But we also know that you deliver your best care when you have fair employment terms and conditions, a safe and healthy workplace, and your continued professional development is protected and promoted.

As a joint professional college and trade union, the RCN has a unique strength as these two elements provide members with a powerful voice. Sometimes that voice takes the form of individual support, resources and guidance, or representation at times when members feel most vulnerable and alone. Sometimes it's a strong collective voice, influencing for change to nursing practice, policy and employment.

Members say they want a visible RCN presence in the workplace. They want a person they can talk to who has the knowledge and skills to support them, but also has a network of organisational expertise to call on. Members also want the RCN to be at every table where decisions are being made, leading and influencing from the nursing perspective. They want their own lived experience, views and ideas to be heard and respected.

So the RCN needs to be local and national, personal and powerful, and it needs to listen and be listened to. It needs to be everywhere you need us to be and that's why active and engaged RCN members are so vital. Active RCN members build relationships in the workplace and professional communities and networks. They foster an understanding between members and staff, sharing what is important to them and ensuring the RCN leads the way in nursing. In a nutshell, it's the members that make it happen.

As a student member, you will have seen and experienced some of the ways in which the RCN supports nurses and nursing. You may have had contact with an RCN student ambassador who guided you through our resources, connected you into our professional networks, and worked within your university on issues that were important to you. You may have also worked with your student committee member and your council representative, who provide leadership and influence on your behalf to shape our work.

They are a valued part of a huge network of active RCN members and, now that you are stepping into your career as a qualified nurse, we'd like to show you how you can keep that connection with the RCN, find support when you need it, get your voice heard and get more active as a member.

As you make your way through this handbook, we'll signpost you to relevant RCN resources, activity and active members that you might want to link with to help you in those areas. Later in this handbook we'll talk more in depth about RCN roles and how you can get involved if you feel ready to step up and become more active as a member.

The Royal College of Nursing



Introduction

At this time, this may seem like the biggest step you have ever taken as you become a newly qualified nurse (NQN). I would personally like to extend to you our warmest welcome to your nursing family and you are now an NMC registrant. The RCN has worked with the NQN network to develop this resource for you to dip in and out of as required.

As you leave your university nursing course, you will look back over your time as a student nurse with warmth at the friendships you made, experiences you had, and pride at your own personal achievements. The knowledge and skill you have gained will provide you with the basis of your career for many years to come. You have made many friends and met colleagues who will journey with you into the future, as you continue to build upon the evidence-based training that you have just completed.

The first months may appear daunting as you enter this profession. However, whether you choose to work within the NHS, independent sector, military or social care, you will continue to learn new skills as you develop and grow in your new role. The professional learning and development you have achieved to date will provide you with the knowledge and skill to care for patients and families across all health care sectors.

We have developed the *Newly Qualified Nurse Handbook* and network to ensure that you have access to the further information you may require as you progress through your first year as a practitioner. This is the time where you are entering a highly skilled profession and during the next few months you will grow in confidence, facilitating the development of your role within your team and enabling you to support others entering the career after you. The NQN network, recently established in the RCN, will ensure you have a point of contact to share your experiences and make new friends along the journey.

Good luck in your career and I hope to see and meet many of you through the RCN, supporting you throughout your continuing professional development.

Best wishes,

Dr Nichola Ashby, Associate Professor, Head of Learning and Practice Development, Royal College of Nursing

Checklist

A useful guide to ensure that you are being proactive in self-managing your transition from student to newly qualified nurse (NQN).

| | Tasks | Completed |
|--|--|-----------|
| Completing your | Find out the dates that you will complete your studies. | |
| nursing degree and registering as a registered | Find out the date that your details will be sent to the NMC and the time it is likely to take before you receive your PIN. | |
| nurse (RN) | What date is your graduation? You will want to ensure you are not working that day/evening. | |
| | When do you receive your degree certificate? Your employer will need a copy. | |
| | Are you changing address? You will need to advise: | |
| | • the NMC | |
| | • the RCN | |
| | your future employer | |
| | your bank/building society | |
| | your university. | |
| | Changing your email? You will need to advise: | |
| | your university | |
| | your future employer | |
| | • the RCN. | |
| | Consider taking a break between completing your studentship and starting your first post if you are able to. | |

Applying for your first RN post

- You may want to spend some time considering what the best options are for you.
- Make an appointment with your personal tutor or a nurse who you feel would be able to guide and advise you about the range of opportunities for NQNs. Your university career support services can provide useful resources and opportunities.
- Register with www.jobs.nhs.uk and renbulletinjobs.co.uk
- Register with other employment agencies.
- Explore employment opportunities in the private, voluntary and independent sectors.
- Make appointments to arrange informal visits with senior nurses in wards, clinical areas and clinical teams where you are interested in working.
- Take a list of questions with you to both informal visits and importantly, to any interview you are invited to attend.
- Create a statement to support your application linking your student learning and experience to the specific requirements of the post you are applying for.*

^{*} View these helpful resources on applications and interviews: rcn.org.uk/just-about-graduate rcn.org.uk/your-career

Preparing for your interviews

- Check all of the information about the post before accepting the interview – is this the right job for you?
- Read all the available information about the organisation/area/services/ team for the post you are applying for.
- Prepare for any tests that the organisation is going to ask you to complete – ask for clarification of anything you are unsure of at least a week before the interview.
- Prepare a list of questions about the job and the support that will be offered in your first 6-12 months.*
- Plan your travel to and arrival at the interview – parking, meeting place, who to meet.
- Reflect on previous interviews and what you have learnt from them.*
- Ensure your referees are aware of your application.

Before your first day in your new job as an NQN

- Read all the information sent to you.
- Complete any request for a Disclosure and Barring Service (DBS) check - you often cannot commence employment without it.
- Complete Occupational Health information.
- Complete and submit uniform request (as appropriate).
- Check what additional uniform/work clothes regulations the organisation has, such as footwear.

Before or on your first day

Have you received:

- your job description?
- your contract of employment? See the RCN advice guide on contracts: rcn.org.uk/contracts
- details of working patterns days/shifts/times?

Your new employer will need to see:

- your passport or Right to Work in the UK documents. For immigration advice, visit: rcn.org.uk/ immigration-advice
- your nursing qualification (degree certificate)
- NMC PIN.

Check if the employer will require an additional form of identification, such as a driving license.

Your first day

- Check time of arrival transport, parking, who and where to meet.
- Are you expected to wear your uniform? Check the organisational guidelines with regards to wearing uniform outside of your place of work, appropriate changing facilities and laundry services.
- Are eating/drinking facilities available?
- Remember to keep hydrated. (pages 72 and 121).
- Keep personal belongings to a minimum.
- Have you received an induction plan?
 It is always helpful to know who the key person is that you should contact at your place of work.
- Have you ensured that you have professional indemnity cover for clinical negligence claims (page 82).

Your first few days

- Do you know your working pattern for the next few weeks?
- Who is your preceptor?
- Are preceptorship plans arranged?
- Have you received the information about your induction to the organisation?
- What mandatory training do you need to complete?
- What are the deadlines for completing this?
- Who do you report to about completing induction and mandatory training?
- You may want to complete a list to check with your preceptor or manager
- Is there a buddy system?
- Update your work details with the RCN at rcn.org.uk/log-in

Within 2-3 weeks

- Meet with your preceptor.
- Preceptorship plan agreed (page 49) (monthly updates and achievement of tasks).
- Discuss your personal development needs.
- Identify competencies/areas of development specific to the post/ service/area of practice.
- Create/maintain an e-portfolio that collates and records learning and development through preceptorship.
- Meet team members.
- Have a buddy and agreed buddy arrangements.

| | · |
|-------------------|--|
| End of first | Check your payslip (page 86). |
| complete month | Are all your details correct? |
| | Has your personal tax code been applied? |
| | Does this reflect your new allowance? (page 86). |
| | Have you paid into a pension? (page 85). |
| | Have you received your shift allowance? (This may not be paid until your second month.) |
| 2-3 months | Preceptorship plans being achieved. |
| | Recorded progress on competencies. |
| | Planned and booked some annual leave as per your employers guidelines and allowances. |
| | Reviewed RCN forums – identify those that are of relevance to you (page 114). |
| | Make contact with local RCN activists, such as reps and your local branch. (page 117). |
| | Review your role as a practice supervisor for students (page 59). |

6-12 months

- · Preceptorship plans being achieved.
- Recorded progress on competencies.
- Engaged with networks and forums of choice and considered how these inform and support your current role and ongoing professional development.
- Consider more engagement with RCN activities and branch.
- Understand role of practice supervisor and discussed with preceptor about development of skills and understanding of the role.
- Plan opportunities to develop practice supervisor skills (page 59).
- Prepare for first appraisal review preceptorship plan, e-portfolio and achievements. Identify goals for the next year of your practice.
- Complete your first reflection on practice for your NMC revalidation (page 23).

Notes

The foundations of good practice

This chapter brings together key information focused on upholding and maintaining your role as a registered nurse. You have successfully completed a programme of learning and practice through which you have demonstrated that you are safe and competent to undertake the role of a registered nurse within your chosen field of practice.

You are at the start of your professional career, a career that will offer a stimulating and exciting future with innumerable opportunities to develop. Also, you'll achieve the job satisfaction of knowing that you are providing quality care and services to your patients, their families and the public.

There will be challenges, there will be high points and low points, there will be times when you wonder what the future holds. But being confident in knowing what good practice is, what your responsibilities and accountabilities for that practice are, and what resources exist to support you, will provide a sound foundation to your professional role as a registered nurse.

In this chapter

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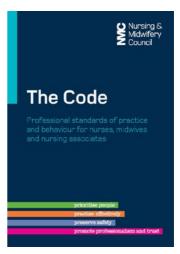
The Nursing and Midwifery Council (NMC)

The Code (NMC 2018) - Professional standards of practice and behaviour for nurses, midwives and nursing associates

When you confirmed that you wanted to join the Nursing and Midwifery Council (NMC) register, you committed to uphold the professional standards, as set out in the *The Code* (NMC 2018).

Throughout your learning and practice development you will have applied these standards as a student, and reflected on how important the standards are in ensuring that nurses meet the expectations of patients and the public, and maintain public confidence in the role of the registered nurse.

Now you are a registrant, it is your responsibility to ensure that you personally uphold these standards in all aspects of your role as a nurse.





Reflection

As an NQN, do you think there may be some challenges in the first six months in meeting the standards?

What are they? Reviewing chapters 2, 3, and 4 in the NQN handbook will assist you in considering what some of these challenges might be.

What action would you need to take if you were challenged in meeting any of the standards?

NMC registration

Every year, you will need to make a payment to remain on the NMC register. You must pay your annual fee before your retention date or your registration will lapse and you will automatically be removed from the register.

It is therefore vital you know when this date is. It will correspond with the month your application was submitted, so please check this. You will also receive emails from the NMC reminding you of your renewal. Please ensure these emails are not going into your spam folder and keep the NMC updated with your email address.

Interim employment as a nursing support worker (NSW)

There is often a time gap between when a student nurse has completed their pre-registration nursing programme and before they receive notification from the NMC that they are a registered nurse (RN).

During this interim period, between completion of studies and receipt of NMC registration, student nurses may need, or wish to be, employed as NSWs. This may be continuing in a NSW role that the student has had during their studentship or it may be with the health or social care employer that the student nurse has secured an RN offer of employment with.

The NSW role may be at Band 2, 3 or 4, or equivalent. As a student waiting to receive confirmation of NMC registration, you have achieved the capabilities and competencies required to be an RN. But until you receive your NMC registration you are not an RN and you are not employed as an RN, and therefore your duty of care is that of an NSW.

An NSW, like all practitioners, has a duty of care to perform competently whatever activities they undertake and to ensure that they don't work beyond their level of competence.

As an NSW you will have a job description that provides clear information about the roles and responsibilities of the post. You should be provided with detailed information about the scope of the work that you will be expected to undertake. You must not take on any role, responsibility or task that is outside of what is expected for any person working in that post.

Guidance on working as a NSW during this interim period:

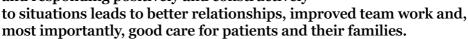
- · Read the job description.
- Ensure you understand the details of the role you are employed to do and the limitations of that role.
- Discuss any concerns that you have with the senior nurse.
- Ensure that you are rostered as a NSW, not as a RN.
- Wear the correct uniform for the NSW post.
- Raise your concerns immediately if you are asked to undertake any role
 or task that is not within the responsibility of a NSW's duty of care.

Using this time positively

- Take this opportunity to familiarise yourself with the clinical environment.
- Get to know the team.
- Start to understand the routines and day-to-day work patterns.
- Shadow and work with the RNs to better understand the role you will be taking on.
- Complete induction tasks that are required for your current NSW post many of these will be the same as those for an RN post.
- Reflect on what you will need when you do make the transition from NSW to RN, and discuss this with your senior nurse.

NMC revalidation

Nursing, in all its fields and areas of practice, is a continuous journey of learning and development. As a student, you will have learnt that being motivated to learn and responding positively and constructively to situations leads to better relationships, im-



As you continue this journey of learning, your professional development will be shaped by how you respond to situations and how role models within the teams in which you work inform your understanding, care skills and compassion for all those you interact with. Gaining feedback that enables you to reflect on your role as a nurse is an essential way of enabling professional development.

It may seem very early to be considering what you will need to achieve to remain on the NMC register, however the aim of revalidation is not simply to check every three years that you are still meeting the required level of practice hours or the standards of *The Code* (NMC 2018). The aim is to promote continuous professional development and to be able to demonstrate this through the accumulation of evidence presented in a portfolio.

The NMC have set out the requirements for revalidation, providing detailed guidance and templates for recording your evidence. revalidation.nmc.org.uk

Find out about the requirements of revalidation, what you can do to prepare and how the RCN can support you.

rcn.org.uk/revalidation

We would recommend that in the first year as an NQN you aim to:

1 Complete 15 hours of participatory learning.

Participatory learning is an activity undertaken with one or more professionals, where you personally interact with other people. The learning activity does not always need to be in a shared physical environment, it could be in a virtual environment, such as an online discussion group or a professional Twitter discussion. The professionals you engage with through participatory learning do not have to be health care professionals. Social media may also support your CPD. The RCN has produced a guide to social media, which also gives information on Twitter and how it may help you meet some of the participatory hours. Please see: rcn.org.uk/social-media-revalidate

Write up one reflection on your learning.

- Collect one piece of feedback.
 Write up one reflection on your learning from the feedback.
- 3 Ensure you have professional indemnity cover. You are required, as a condition of NMC registration, to have in place an indemnity arrangement. It is your responsibility to ensure that you have appropriate indemnity cover for any practice vou take on as a nurse, midwife or nursing associate. Most employers provide the appropriate cover for their employees, and there are state-backed indemnity schemes for all those who work in the NHS or GP services. It is worth checking with your employer to confirm that you have appropriate cover if you work in the independent sector. If you are self-employed you will need to have arranged your own professional indemnity cover. You may be covered by the RCN indemnity scheme as a self-employed practitioner, and all RCN members are included in the indemnity scheme for their voluntary work and their 'Good Samaritan' acts in an emergency.

Contact RCN Direct if you have any queries: 0345 772 6100 or visit rcn.org.uk/get-help









Interested in funding for education opportunities?

We know that patients deserve the best possible experience and care, delivered by well trained and high performing professionals like you.

The RCN Foundation offers grants to nurses, midwives and nursing support workers to engage in development and learning activities. These opportunities will enhance your skills and knowledge to transform your patients' care.

Visit our website to see what we offer, tips for applying and how you can make a difference to nursing and patients through RCN Foundation funding.

rcnfoundation.org.uk



The RCN Principles of Nursing Practice

The principles describe what constitutes safe and effective nursing care, and cover the aspects of behaviour, attitude and approach that underpin good care.

Each of the principles was developed by the RCN in partnership with the Department of Health and the Nursing and Midwifery Council. Patients, the public and health care staff were also involved in developing them.

| Principle | |
|-----------|--|
| A | Nurses and nursing staff treat everyone in their care with dignity and humanity – they understand their individual needs, show compassion and sensitivity, and provide care in a way that respects all people equally. |
| В | Nurses and nursing staff take responsibility for the care they provide and answer for their own judgements and actions – they carry out these actions in a way that is agreed with their patients, and the families and carers of their patients, and in a way that meets the requirements of their professional bodies and the law. |
| С | Nurses and nursing staff manage risk, are vigilant about risk, and help to keep everyone safe in the places they receive health care. |

| Principle | |
|-----------|--|
| D | Nurses and nursing staff provide and promote care that puts people at the centre, involves patients, service users, their families and their carers in decisions, and helps them make informed choices about their treatment and care. |
| Ε | Nurses and nursing staff are at the heart of the communication process: they assess, record and report on treatment and care, handle information sensitively and confidentially, deal with complaints effectively, and are conscientious in reporting the things they are concerned about. |
| F | Nurses and nursing staff have up-to-date knowledge and skills, and use these with intelligence, insight and understanding in line with the needs of each individual in their care. |
| G | Nurses and nursing staff work closely with their own team and with other professionals, making sure patients' care and treatment is co-ordinated, is of a high standard and has the best possible outcome. |
| Н | Nurses and nursing staff lead by example, develop themselves and other staff, and influence the way care is given in a manner that is open and responds to individual needs. |

As a registered nurse you can use the principles to:

- understand what patients, colleagues, families and carers can expect from nursing
- help you reflect on your practice and develop as a professional
- generate discussions with your colleagues on the aspects of behaviour, attitude and approach that underpin good nursing care
- identify where the principles are being practised within your organisation, and to identify instances where you think they are not being practised
- see how they relate to a trust's own set of nursing values.

There are some short films that present discussions between health care workers, explaining how to use the principles to deliver safe and effective nursing care.

rcn.org.uk/principles-of-nursing-practice-films



Reflection

Reflect on an episode of care where you were part of the nursing team and consider how aspects of that care demonstrate some of the principles. You may wish to use this activity as the basis for one of your NMC revalidation reflections.

Clinical judgement and decision making

In order to practice safely and effectively and provide the highest standard of care to your patients and their families, you will need to continue to develop your confidence and competence in using your clinical judgement and making decisions.

As a student, you will have learned about the importance of using knowledge, evidence and skills to inform your practice, and you will have had opportunities in your clinical placements to put this into practice. As an NQN, you will be further developing your knowledge and skills as a novice practitioner, becoming increasingly competent and proficient as you develop your role.

The Code (NMC 2018) sets out the standards and behaviours required of RNs, and in relation to clinical judgement and decision making includes:

Practice effectively:

Standard 6. Always practise in line with the best available evidence.

Standard 11. Be accountable for your decisions to delegate tasks and duties to other people.

Preserve safety:

Standard 13. Recognise and work within the limits of your competence.

Standard 19. Be aware of, and reduce as far as possible, any potential for harm associated with your practice.

Promote professionalism and trust:

Standard 25. Identify priorities, manage time, staff and resources effectively, and deal with risk to make sure that the quality of care or service you deliver is maintained and improved, putting the needs of those receiving care or services first.

Building sound clinical judgement, moving from novice to expert, is a long journey. As an NQN, your aim should be to broaden your knowledge and experience, so that you can make informed safe decisions and know where to turn when decision making proves difficult.

The RCN prides itself on the wealth of high-quality, evidence-based CPD resources available to all members through the professional forums, networks, subject areas and clinical topics.

rcn.org.uk/professional-development rcn.org.uk/clinical-topics rcn.org.uk/get-involved/forums

RCNi Learning – Enhance your skills and expand your clinical knowledge

RCNi Learning is an interactive online learning resource, featuring more than 200 RCN-accredited learning modules designed to support you with your professional development and help bridge the gap between theory and practice.



Try a module for free when you register. Visit: renilearning.com

RCNi Decision Support – Make evidence-based decisions with confidence when assessing and treating patients



With over 100 topics to choose from, the UK's first and only decision support tool for nurses helps to guide your thinking and supports you in delivering safe and effective patient care that meets the UK's best practice guidelines.

For more information and to subscribe, please visit: renidecisionsupport.com

Standards and guidance

Standards can help ensure that the care you are responsible for is safe, effective and based on current evidence.

Standards are often referred to as many other things, among them:

- protocols
- guidelines
- guidance
- best practice statements
- benchmarks.

Standards and guidance can be considered as a hierarchy:

Regulatory or legal standards

• normally presented as policies and/or protocols, eg NMC standards, Health and Safety at Work Act

Evidence-based standards or guidance

· agreed by a panel of experts eg NICE, SIGN

Local guidelines or best practice assessments

developed within organisations or local practice areas

As an RN, it is expected that you will know and understand your responsibilities to ensure that:

- regulatory standards and legal policies/protocols are adhered to
- guidance, best practice and benchmarks inform your practice decisions and interventions.

It is important that you consider how you will react in a situation where you, your team or the situation causes you to question the standard or guidance that exists.

Do not be tempted to take a risk that could harm you, your team, your organisation and most importantly your patient.

Escalating concerns

The Code (NMC 2018) states that you have a duty to:

'Act without delay if you believe that there is a risk to patient safety or public protection'.

It will take courage to uphold your professional responsibilities and to raise your concerns in a professional and effective way. 'Courage enables us to do the right thing for the people we care for, be bold when we have good ideas, and to speak up when things are wrong'.

Drawing on resources that are available to you will help:

Professionalism

What is professionalism in nursing? You probably recognise it when you see it in action, but what are its essential components? NHS England highlight six core competences that nurses and midwives should commit to when undertaking their roles.

1. Care

Care is our core business and that of our organisations. The care we deliver helps the individual person and improves the health of the whole community. Caring defines us and our work. People receiving care expect it to be right for them consistently throughout every stage of their life.

2. Compassion

Compassion is how care is given through relationships based on empathy, respect and dignity. It can also be described as intelligent kindness and is central to how people perceive their care.

3. Competence

Competence means all those in caring roles must have the ability to understand an individual's health and social needs. It is also about having the expertise, clinical and technical knowledge to deliver effective care and treatments based on research and evidence.

4. Communication

Communication is central to successful caring relationships and to effective team working. Listening is as important as what we say and do. It is essential for "no decision about me without me". Communication is the key to a good workplace with benefits for those in our care and staff alike.

5. Courage

Courage enables us to do the right thing for the people we care for, to speak up when we have concerns. It means we have the personal strength and vision to innovate and to embrace new ways of working.

6. Commitment

A commitment to our patients and populations is a cornerstone of what we do. We need to build on our commitment to improve the care and experience of our patients. We need to take action to make this vision and strategy a reality for all and meet the health and social care challenges ahead.

Duty of candour

It is entirely possible that you will make mistakes. If you do make a mistake, report it to your preceptor or the nurse in charge. It might be difficult, but putting patient safety and honesty first is vital.

As an RN you have a professional duty of candour this 'is about openness and honesty when things go wrong. Every healthcare professional must be open and honest with patients when something goes wrong with their treatment or care which causes, or has the potential to cause, harm or distress.'

Joint statement from the Chief Executives of statutory regulators of healthcare professionals.

The NMC (2019) states that you have a responsibility to: Standard 14. Be open and candid with all service users about all aspects of care and treatment, including when any mistakes or harm have taken place.

To achieve this, you must:

Standard 14.1. Act immediately to put right the situation if someone has suffered actual harm for any reason, or an incident has happened that had the potential for harm.

Standard 14.2. Explain fully and promptly what has happened, including the likely effects, and apologise to the person affected and, where appropriate, their advocate, family or carers. The Joint NMC/GMC guidance states*: "When you realise that something has gone wrong, and after doing what you can to put matters right, you or someone from the healthcare team must speak to the patient. The most appropriate team member will usually be the lead or accountable clinician." nmc.org.uk/standards/guidance/the-professional-duty-of-candour/read-the-professional-duty-of-candour/

Or Search: NMC Guidance on the professional duty of candour

Standard 14.3. Document all these events formally and take further action (escalate), if appropriate, so they can be dealt with quickly.

As a member of the RCN, you can seek guidance and support through your local RCN representatives or through RCN Direct. Contact 0345 772 6100 or visit rcn.org.uk/get-help



Points to remember:

Talk to your preceptor (chapter 2).

The RCN can offer expert guidance and support.

Reflect on your practice.

Learn from your experience and continue to ask for help where you need it.

Accountability, responsibility and delegation

In order for anyone to be accountable they must:

 have the ability (knowledge and skills) to perform the activity or intervention

As an NQN, you have demonstrated that you are competent to provide research based, safe care to patients and their families within your chosen field of practice. You are now accountable for the delivery of that care and any omissions or errors in delivering that care. From a legal perspective, your knowledge and skills will be compared to that of a similar NQN within that field and area of practice.

accept the responsibility for doing the activity

As an NQN, there are likely to be many aspects of care delivery that you do not have the level of knowledge or skills to perform effectively or safely. It is your responsibility to recognise your limitations and to ensure that the team leader is informed in order that care can be delivered safely by suitably skilled staff, and that you are able to access learning opportunities to develop the knowledge and skill required.

 have the authority to perform the activity within their role, through delegation and the policies and protocols of the organisation.

As an NQN, it is imperative that you have read your job description and contract of employment and fully understand the expectations of the organisation you are employed by. You must gain understanding and seek advice for any elements that you do not fully understand. View rcn.org.uk/get-help/your-contract and turn to page 84.

You must feel confident, knowledgeable and skilled before accepting delegation of duties and tasks, and know what action you need to take if you cannot accept the delegated duty or task.

Likewise, before delegating tasks or duties to team members, you must understand the expected knowledge and skill of the person to whom you are delegating.

You must know where to find the organisation's guidance, standards and policies that relate to the duties and tasks that you will undertake, and have read and understood them prior to carrying out the role.

During your student learning, and particularly your final practice placement, you will have considered issues of accountability, responsibility and delegation, and demonstrated skills within the care team in applying your knowledge and understanding of these core concepts of professional practice.

As an NQN, you will start to put these skills into practice more independently, but with the confidence that you can and should seek confirmation and guidance as necessary from more senior members of the team.



Reflection

Consider, and write down, what actions you would take if you were asked to undertake duties or tasks that you felt were beyond your current level of competence.

What would be a statement that you could use that would enable you to explain this in a professional and meaningful way to a senior member of the care team?

For example

'<Name of team member> I have been asked to......as an NQN, I have not had experience of this...... or I do not have the skill /knowledge of this... I am keen to learn and would like to work with/observe/learn from....in order that I can take this on next time.'

Thinking through what you would say in situations that may make you feel stressed or uncertain can provide confidence and ensure that you are able to voice your limitations or concerns (see chapter 2, Preceptorship).

Leadership and followership

Nurses lead in many ways:

- 1. They lead by example, being role models and demonstrating the values and behaviours expected of them as registered nurses.
- 2. They lead care, ensuring that patients and their families receive high quality, evidence-based, patient-centred care.
- 3. They lead teams planning, managing and co-ordinating the nursing team and the multi-professional team to ensure that the right care is delivered by the right people, with the right skills, achieving the best outcomes.
- 4. They lead change and practice development across all health care areas, at local and national levels, to promote and enable the highest levels of nursing practice.

As NQNs, you are expected to lead by example and to lead the care of your patients. You have demonstrated the knowledge, understanding, skills and competencies to do this as part of your studentship. Now you are putting into practice those knowledge-based skills and competencies, taking responsibility and being accountable for the nursing care your patients receive. During this time as an NQN, you will develop the confidence to provide nursing care that meets your patients' needs, but also to question and constructively challenge, to advocate for your patients and their families, and for your profession to promote excellence in practice.

In order to develop as a leader, you will need to engage in activities that support and promote the skills and values of effective leadership. An effective way of doing this is to recognise and embrace the importance of followership.

Followership can be very simply defined as a person who supports and admires a particular person or set of ideas. In health, as in other organisations, there is a growing recognition of the importance of followership in contributing to the goals and outcomes of the organisation at a macro and micro level. For example, at a hospital, NHS Trust or department level and a ward, team or individual level, this may be demonstrated through the more senior nurse's critical thinking, influencing and engagement with the work to be achieved.

As an NQN, you have the opportunity not only to be a responsible and engaged follower within your work environment, but to learn and develop the skills and attributes of leadership that you will need as you progress in your career.

- Identify role models in your team leaders and reflect on how their skills, knowledge, approaches, responses to situations all combine to create positive team engagement and good outcomes for patients
- Access learning opportunities that focus on team work and reflect on how you can utilise the knowledge and skills from the learning activity
- Engage in reviewing activities that monitor and evaluate care; handover, audits, reviewing standards and practices.



6 Top Tips for Managing and Leading Yourself

- 1. Do what fulfils you.
- 2. Build your networks within your work area and externally, for example RCN Forums (page 114).
- 3. Invest in yourself.
- 4. Face your fears.
- 5. Try something new.
- 6. Be kind and generous.





Developing Leadership Programme

Leading in times of change

- Understand the characteristics of effective leadership and how it underpins your role
- Learn how to positively influence those around you
- Identify and challenge barriers which have an impact on the safe delivery of care
- Develop strategies for improving your resilience and maintaining momentum during times of change

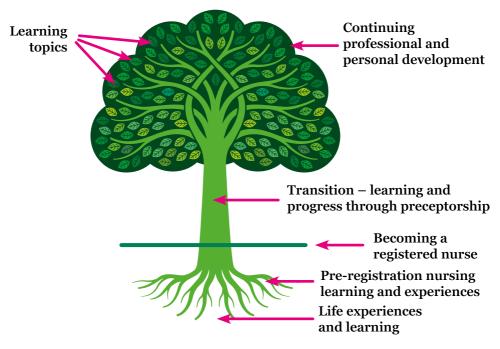
Find out more about the programme on our website: rcn.org.uk/ leadership "I have loved this course. I feel motivated and empowered to implement changes and discuss ideas in my clinical area."

DLP participant, Scotland

Continuing professional development (CPD)

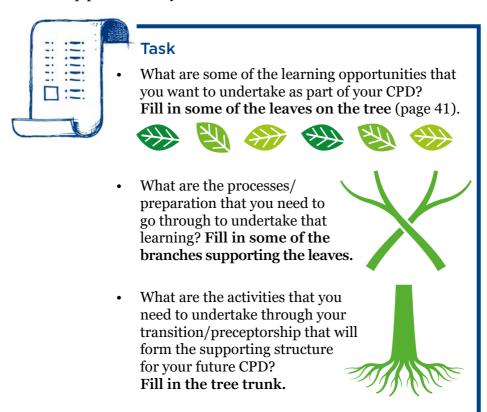
We have highlighted the importance of continuing to learn and develop in your nursing career. As an NQN, it is important to recognise the value of all that you have learnt through your life experiences, personal learning, your pre-registration programme experiences and learning to achieve your nursing degree. Transition is a period of consolidating and applying much of this learning in order that you can then continue to develop yourself and your career.

The tree of learning and personal development



Continuing professional development is a requirement for continued registration with the NMC through the revalidation process (page 23), which reflects the fundamental importance to the nursing profession of ensuring that nurses deliver up-to-date evidence-based practice throughout their careers and nursing roles.

There are a wide range of learning activities that can support you to develop professionally.



The NMC does not prescribe any particular CPD activities to meet its requirements. What is important is that you can demonstrate that your chosen learning activities are relevant to and have benefited your practice. For example:

- · You might read a journal article.
- Undertake an e-learning activity.
- Shadow a professional colleague.
- Engage in a Twitter conversation.

The evidence of learning from any of these activities is through reflection and exploring how they can inform and improve your practice.

You may also want to access more formal and structured CPD. There are a few things you should consider before applying:

- Will the course be useful to you in the long term?
- Are you sufficiently interested to commit yourself to further study?
- · How will it fit with organisational priorities?
- Will you have the support of your manager and colleagues?
- Can you get study leave?
- How will you manage your time?
- Who is going to pay for it?

Reviewing the questions will enable you to seek further information before you make the decision to apply. Meeting with your manager or a colleague who can advise you further is a useful next step.

Funding may be challenging, but there are options:

- Check your employer policies about CPD funding.
- Are there free activities that will enable you to achieve the same learning – for example, webinars, in-house courses, local RCN learning activities?
- Universities can advise you regarding post-graduate student loans.
- Career loans may be available through the government website: gov.uk/career-development-loans
- Scholarships and bursaries.

RCN Libraries

As you embark on the first steps of your career as a registered nurse, RCN Libraries are still here to support you and your professional development. You have access to all the same library services as a student, and more.

We know you'll be busy, so we provide eBooks and eJournals you can access when it suits you. We also offer training sessions via Skype, and you'll always have a warm welcome when you visit one of our libraries in Belfast, Cardiff, Edinburgh or London.

Discover how you can get the most from RCN Libraries by visiting rcn.org.uk/getting-started

Literature search service

As a newly qualified member you now have access to our literature search service. We will send you a list of relevant journal articles and books, whether it's to support you in preparing for an interview, writing a policy or thinking about a new area of research. rcn.org.uk/lit-search

Subject guides

Our subject guides provide a good introduction to a clinical area or specialism, and may be especially helpful for NQNs when they start out in their first position — allowing them to easily access books and journal articles on their area of practice.

Visit rcn.org.uk/library/subject-guides to see our list of over 60 subject guides.

Library events and exhibitions

Our events and exhibitions programme raises the profile of nursing and its history. We host free exhibitions in all of our libraries, as well as free talks, performances and debates around the UK. We can provide you with a Certificate of Attendance if you want it to count towards your CPD.

You can also view nursing history resources online, from historic registers to exhibitions, journals, oral histories and First World War scrapbooks.

Libraries summary

- Access to over 20,000 eBooks and 1,100 eJournals, plus databases such as CINAHL.
- Help setting up 'table of contents' alerts for your favourite journals to keep up to date.
- Skype, one-to-one, and drop-in literature search training sessions with a librarian.
- Certificate of attendance for our events, to count towards your CPD.
- Quiet study space with PCs and free printing, scanning and photocopying in our libraries in Belfast, Cardiff, Edinburgh and London.
- Email, phone or webchat with a librarian.

Contact us on **0345 337 3368** or **rcn.library@rcn.org.uk** and webchat via our website **rcn.org.uk/library**

Find our locations online at: rcn.org.uk/library/about-us

>> Follow us on Twitter, Instagram and Facebook @RCNLibraries

Mandatory training

All employers have regulatory responsibilities, such as the 'Health and Safety at Work Act' and care standards that require staff to have undertaken training to meet these requirements. Regulators and insurers will expect to see that staff have completed the training and are applying their knowledge and skills in their work.

Terms you might see in your workplace:

Mandatory training – learning deemed essential for safe and efficient service delivery and personal safety, which reduces organisational risks and complies with local policies and/or government guidelines. It may also include statutory training. Examples include:

- fire safety
- moving and handling
- · data protection
- · equality, diversity and inclusion
- infection control.

Although mandatory training needs to be regularly updated, employers are free to set their own protocols and policies on it, with staff contractually obliged to follow.

Statutory training – learning that all staff must undertake to ensure an organisation is meeting its legislative duties – see examples above.

Examples include:

- Health and Safety at Work Act 1974
- Management of Health and Safety at Work Regulations 1992
- The Data Protection Act 1998
- Mental Capacity Act 2005
- Mental Capacity Act (Northern Ireland) 2016
- The Adults with Incapacity (Scotland) Act 2000
- · Public sector equalities duties.

"Essential" and "compulsory" are sometimes used as 'catch-all' terms to describe both statutory and mandatory training, making it clear that staff must complete it. 'StatMand' is an informal term, blending statutory and mandatory together.

Mandatory training ensures you have the knowledge and skills, both to deliver safe and effective care, and reduce the risk of harm to you, your nursing colleagues and importantly to your patients, families and the public. Back injuries, for example, were once common among nurses. But the provision of effective equipment and training in safe moving and handling of patients has reduced the incidence of back injuries significantly.

If you are employed as bank-staff or by an agency, you need to ensure that you have accessed the mandatory training offered. When working in new settings, and with unfamiliar policies and procedures, you must seek guidance and training to ensure you are working safely in that environment.

As a registered nurse you are also required to undertake at least 35 hours CPD over three years. This is additional to any mandatory or statutory training that an organisation may provide. Only learning activities that are directly related to your scope of practice and professional development can be used as evidence for your hours of CPD for NMC revalidation purposes.

If you are unable to complete your mandatory training because the training is cancelled, or you have not been released from your work, it is very important that you keep a record. Career and pay progression could be stopped if you have not completed all mandatory training, so it is vital you have evidence if you believe that this was through no fault of your own. Contact your local RCN learning rep, or branch, if you have concerns about the provision of mandatory training in your organisation.

The RCN has more than 300 accredited safety representatives working across all health care sectors. They play a valuable role in supporting workforce health, safety and wellbeing and are a great source of support and advice on health and safety issues. Contact RCN Direct on 0345 772 6100 for more information or visit rcn.org.uk/reps



We think our Preceptorship Programme is unique, from the way we recruit, the benefits we offer, the comprehensive induction in to our organisation, to the support and financial benefits you will receive, plus you will be living in one of the most unique areas in the country.

Our wide range of mental health and learning disability services cover the whole of Devon, with opportunities in our community and inpatient settings.

Our offer to you

- A conditional offer of employment at any time during your training
- Up to £3,000 home to work travel costs paid for the first two years
- Monthly facilitated Continuing Professional Development (CPD) workshops for the first seven months
- Weekly group supervision
- A dedicated Preceptorship Lead
- £1,000 CPD voucher on completion of the Preceptorship Programme
- A relocation package of up to £8,000.

Programme has been tailored to meet my individual needs. The structured support and education package has been really valuable. I could not have asked for a better start to my role.

@DPT_Jobs @DPT_NHS



www.jobs.dpt.nhs.uk/nursing www.dpt.nhs.uk

2 Preceptorship

Preceptorship is the term used to define a period of transition from being a student on a pre-registration nursing programme, through to the first year of being a registered nurse.

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Overview of preceptorship

The NMC defines preceptorship as 'a period to guide and support all newly qualified practitioners to make the transition from student to develop their practice further'.

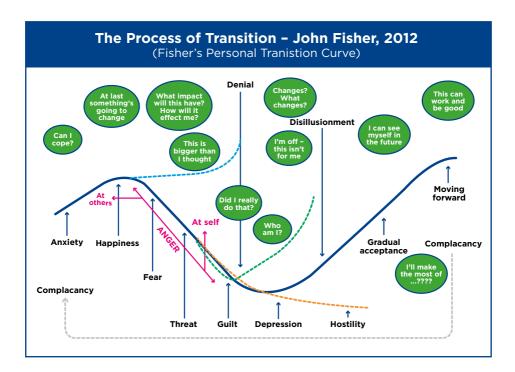
Preceptorship should be supported by an experienced practitioner, known as a preceptor, whose role is to promote the confidence of the NQN and facilitate learning and development as they work towards becoming an independent professional. The preceptor role focusses on enabling the NQN to refine their skills, values and behaviours within the context of their first nursing post and to underpin their future professional practice. This is underpinned by learning from best practice in providing effective patient-centered care and developing a foundation for lifelong learning.

We believe that in order to ensure a smooth transition into the profession, a preceptorship period, or an NQN period is essential. The NMC 'strongly recommend' that all NQNs should have a period of preceptorship at the start of their nursing career.

A model of transition

Fisher's process of transition, opposite, highlights the challenges and emotional highs and lows of transitional change, and has been shown to be the 'normal' personal experience of going through any signficant transition. It is complex and although there is no definitive time scale, the first six months to a year of a momentous and important change is expected to be the most demanding.

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Reflection

Looking at the first three elements on the left of the curve.

- What are you feeling?
- What has or will help you to successfully navigate this period?
- Who will help, support, guide you through this period?
- How can you ensure that you have the help and guidance needed?

Write an action plan for your first month of preceptorship.

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Research that supports preceptorship

There is a wealth of research that supports the importance of preceptorship for NQNs, as the transition from student to qualified nurse has been found to be a very stressful period. The need for support and guidance that is responsive to these stressors has been shown to be of significant value.

Findings from the research highlight the key stressors and resulting support and learning that NQNs need to successfully transition.

These are:

Preparation for practice

Understanding and being prepared for the post you have been appointed to. It is imperative that you fully understand all aspects of the registered nurse post that you will be doing. The interview, person specification and job description should provide you with some of the information. However, induction to your place of work, a meeting with your line manager to clarify roles, responsibilities, work schedules, team structures and what is expected of you throughout your initial induction and preceptorship period, and what support and learning is provided are all essential for you to know.

The reality of practice

The responsibilities and accountabilities of a registered nurse cannot be fully experienced until you start your first post. Issues of delegation, accountability and responsibility, competencies specific to the area of clinical practice, team working and communication will all 'feel' different to what you experienced as a student observing practice and being supervised whilst learning in practice.

Developing clinical practice

You have the knowledge, skills and competency to provide safe and effective care to a range of patients within your field of practice. The patients you are giving care to in your first post will have many additional care needs, require specialist interventions and decisions about their care that you may not have experience of before.

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Developing professional relationships

It is likely that you will be a permanent registered nurse within the care team and this will be different to your previous experience as a student. You will need to utilise your communication skills, your understanding and skills of team work and your inter-personal skills to establish yourself as a respected member of team.

Developing relationships with patients and families

As a student you will have gained skills and developed effective approaches to building relationships with patients and their families. You will have experienced and witnessed some difficult and challenging situations, where experienced nurses and health professionals have effectively communicated and managed in these circumstances.

Breaking bad news is a good example of this, whether it is likely to have a brief or long-term impact on the patient or their family. Observing and learning from experienced nurses and health professionals communicating this is very different to finding the words and the confidence to do this effectively and compassionately yourself.

This may seem daunting as you take those first steps into your professional role, but there is growing understanding of the importance of preceptorship across all four UK countries, with policies, guidelines and frameworks published and implemented in many NHS organisations.

Good practice in the voluntary, independent and private sector promotes the importance of support for NQNs. If you are working in any of those sectors, or in an NHS organisation with no formal preceptorship provision, you should ensure that you have discussed preceptorship and what you would expect in terms of support and guidance before starting your first post. You could use *The Code* (NMC 2018) to help you explore this with a prospective employer, using the specific requirements outlined in paragraph nine (practise effectively) and paragraph thirteen (preserve safety) to help focus your discussion.

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There is strong evidence to support a period of preceptorship for NQNs, as it can:

- · improve confidence
- increase job satisfaction
- offer a sense of being valued and respected by your employing organisation
- build a commitment to the organisation's corporate strategy and objectives.

RCN resources

The RCN provides useful information and resources to support preceptorship: rcni.com/keywords/preceptorship

NMC resources

rcn.org.uk/nmc-precept

Preceptorship guidance from the four nations

England – Health Education England (HEE) Elearning e-lfh.org.uk/programmes/preceptorship

Scotland – Flying Start programme learn.nes.nhs.scot/735/flying-start-nhs

Wales - Preceptorship guidelines

gov.wales/sites/default/files/publications/2019-03/all-walespreceptorship-guidelines-for-newly-appointed-ward-sisterscharge-nurses.pdf or search: All-Wales Preceptorship Guidelines for newly-appointed ward sisters/charge nurses

Northern Ireland - Preceptorship framework

nipec.hscni.net/resource-section/preceptorship/preceptorship-framework/ or search: NIPEC Preceptorship Framework

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The role of a preceptor

In order for a period of preceptorship to be useful in achieving its aims having a **named preceptor** is vital.

NHS Education for Scotland outlines that a good preceptor:

- · gives constructive feedback
- sets goals and assesses competency
- facilitates problem solving
- · demonstrates leadership skills
- knows what resources are available if you need additional support, such as occupational health services
- is an effective and inspirational role model who demonstrates professional values, attitudes and behaviours.

An effective and skilled preceptor to support and guide you through this transition is important in enabling you to achieve the learning, confidence and skills in your first year as a registered nurse. However, it is also important to have a preceptor as they will, along with many of your health colleagues, act as role models and will inspire and motivate you to support others as you develop your career.

Supporting others

The Code (NMC 2018) requires you to:

- support students' and colleagues' learning to help them develop their professional competence and confidence
- act as a role model of professional behaviour for students and newly qualified nurses, midwives and nursing associates to aspire to.

The new NMC Standards for Student Supervision and Assessment sets out the principles of student supervision in practice placements and the role of the practice supervisor. There is no longer a requirement for practice supervisors to have completed further NMC recorded training to become a supervisor. However, the standards do require organisations to ensure that practice supervisors 'receive ongoing support to prepare, reflect and develop for effective supervision and contribution to, student

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learning and assessment... and have understanding of the proficiencies and programme outcomes they are supporting students to achieve'.

Therefore, developing your skills in practice supervision is an important element of your preceptorship period and should be a key focus, as you approach the final stages of your preceptorship plan. Access to learning and training opportunities to build on your skills and enable you to become an effective practice supervisor of students and others should be made available. You have a duty to engage with this continuing professional development.

The RCN has developed resources to support practice supervision: rcn.org.uk/practice-supervision rcn.org.uk/practice-based-learning

nmc.org.uk/globalassets/sitedocuments/education-standards/student-supervision-assessment.pdf

Or search: Part 2: Standards for student supervision and assessment - NMC

RCN Newly Qualified Nurse Network

It can feel daunting and lonely making the transition from university, with its community and peer support network, to being the new person in an established workplace team.

We're here to support you make the transition. Join the RCN NQN Network Facebook page, where you can connect with other NQNs across all fields and UK countries.

facebook.com/groups/ RCNNewlyQualified NurseNetwork



Appraisal

Appraisal is an important part of your ongoing role development within your organisation. Normally you should have a performance appraisal and development review at least once a year. There may be a requirement within your organisation for a meeting at six months to review your progress and to prepare for your annual appraisal.

If your organisation does not have a policy for appraisal then it is good practice to request a review meeting with your preceptor and/or your manager to ensure that there is an opportunity to review and discuss your progress.

Appraisal is normally focussed on:

- agreeing personal objectives and ways of measuring whether they have been achieved
- personal development planning and review, defining the skills, knowledge and behaviour you require to carry out your work, assessing your current skill levels against those requirements and then putting in place development plans to meet any shortfalls
- an opportunity to have a professional reflective discussion about how you have performed in your job over the past 6-12 months, what areas of professional practice you need to be focusing on over the coming 12 months and what resources there are to support your continuing professional development.

Your appraisal will usually be built around competences or core dimensions detailed in your job description. In the NHS this is normally focussed on the NHS Knowledge and Skills Framework (KSF). Preparation for your appraisal begins with the gathering of evidence and wherever you work, even if it's somewhere that doesn't offer an annual appraisal, the six KSF dimensions are a useful framework for reviewing your learning and development. It is important that you identify how you have demonstrated achieving the knowledge, skills and behaviours set out in your job description and the six KSF dimensions:

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- 1. communication
- 2. personal and people development
- 3. health, safety and security
- 4. service improvement
- 5. quality
- 6. equality and diversity

There may be occasions when your preceptor and/or manager raises concerns in respect of your progress and professional development.

This is likely to cause you concern and anxiety about your role and your professional aspirations. In these circumstances seeking guidance and support from an RCN adviser can offer you expert help in addressing the situation.

RCN Direct, open 8.30am-8.30pm, seven days a week. 0345 772 6100

Please see rcn.org.uk/appraisals-review-checklist for more information.

Preparing for your review

- Ensure you understand the performance review process.
- Plan to meet with your manager throughout the year to review progress.
- Take time to prepare for the review.
- Know your organisation's visions and values. How does your professional development reflect these?
- Take an active part in reviewing your own performance and be honest about your development needs.
- Reflect on your ongoing development and focus your activity on achievable outcomes.
- Ensure that any agreed development actions have been undertaken and any future ones are planned for.
- Use your objectives and development plan regularly to ensure progress and take action if you are not achieving your goals.

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Glossary of terms

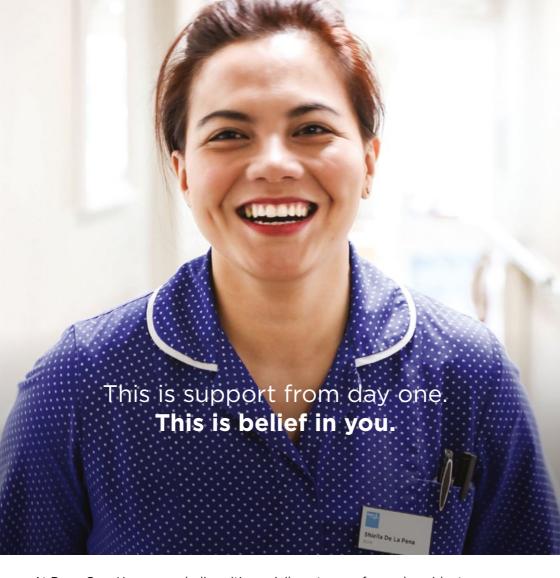
Preceptor – a registered health professional who takes responsibility for guiding, supporting and facilitating the NQNs period of preceptorship.

Mentor – someone who provides help, guidance and advice over a period of time, normally related to their role or professional development. If you work in the private, voluntary or independent sector you may find that you have a mentor rather than a preceptor, but you should expect the same level of support and guidance as a preceptor. There are no longer student mentors in practice – these are now referred to as practice supervisors.

Practice supervisor – can be any registered health and social care professional working in a practice environment. They've been prepared and supported to take up their role and have up-to-date knowledge and experience relevant to the student they are supervising (NMC 2019). All nurses and midwives in any practice learning environment should be able to act as a practice supervisor.

Practice assessors – are registered nurses who assess a student's practice learning for a placement or a series of placements. A nominated practice assessor also works with the academic assessor (a nurse lecturer in the students university) to make recommendations for progression for the student they are assigned to. They have been prepared and supported to take up their role and have current knowledge and experience relevant for the proficiencies and programme outcomes they are assessing.

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At Bupa Care Homes, we believe it's a privilege to care for each resident. Which is why we look after our nurses too. As they're at the forefront of our care, we always have their back, with support that includes:

- 24/7 health and well-being support
- Physiotherapist access
- Global mentoring opportunities
- NMC annual pin payment
- Invaluable ongoing training such as catheterisation and venepuncture
- Global Nurse Scholarship opportunity



5 Finding a balance

This chapter helps you to manage how you feel, so that the good times balance the stressful situations.

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Taking care of yourself

Committed to caring for others, nurses often forget to take care of themselves. However, think of the oxygen analogy on the plane: you have to take your own oxygen before you can help the struggling child beside you. Therefore, irrespective of the pressures you experience as part of your nursing role, don't be tempted to neglect your own health and wellbeing.

Whilst your employer has a legal duty to protect your health, safety and welfare at work, there is much you can do to care for yourself. You also have a professional responsibility to adopt a healthy lifestyle and maintain the level of personal fitness to undertake your nursing role.

Therefore, as a nursing professional, it is important that you take the time to consider factors that impact upon your own health - this is known as self-care.

"There's
a temptation
when feeling stressed
to go for quick fixes —
food full of fat and sugar, or
caffeinated drinks. Resist the
temptation. A quick fix can soon
give way to a wearying downer.
Better to try to maintain a
balanced diet — a little and
often diet' on days when
you feel especially
stressed."

Self-care and self-compassion

The first stage of self-care is self-compassion. Be kind to yourself. It is human nature to be self-critical, to fail to recognise our strengths and attributes. Take notice of your successes and achievements, and reflect on and learn from errors and challenges.

If you are unwell you must take care of yourself, take sick leave if necessary – irrespective of the pressures of work. You cannot work when unwell; to do so places you, your colleagues and patients at risk and you risk the NMC professional Code. You must give yourself permission to fully recover your physical and mental wellbeing before returning to work.

A message from Dr Hannah Andrews, RMN

It is important as nurses that we are able to be kind to ourselves, to recognise when we are being a little harsh and to accept that we are human beings who occasionally make mistakes or have limitations.

As nurses we want to be the best, to fix everything and to do our tasks independently, often without help. However, we are not machines and we need to remember that it is not a failing to ask for help and to realise we are fragile at times.

I remember as a newly qualified nurse walking onto the ward and being handed the keys and the bleep and being told I was in charge of a twenty-bedded acute psychiatric ward. I felt a stab of fear and panic, and my internal critic kicked in telling me I wasn't ready, that I couldn't do this, that I needed more training before being let loose. However, I took a moment to breathe as I walked around the ward, checking the environment before going into handover. My patients smiled at me and congratulated me on qualifying. I reminded myself that I knew my patients, that I knew the environment and that whilst I didn't know everything (and I still don't), I could do this, that I was ready. I also reminded myself that I was not alone, that actually although 'in charge', I was part of a team with many others supporting me. My compassionate voice had kicked in, my self-compassion reassured me.

If my self-compassion hadn't been there, then my nursing career would probably have looked very different and been much harder, particularly in making the transition from student to qualified nurse. I am a nurse, but I am also a human being and remembering that allows me to be compassionate towards myself, particularly when I make mistakes.

Self-care - A daily routine

Several domains make up a "healthy you". Taking care of all these domains will support you in your daily life, both at work and home, so that you are ready to face the inevitable challenges of daily life.





Task

To get started, you can complete a self-assessment using the diagram above, of how well you take care of each domain. Then plan ways of improving your self-care in areas that you may have forgotten about.

A set of resources to support you to do this is available on the RCN website: rcn.org.uk/healthy-you-assessment

What is stress?

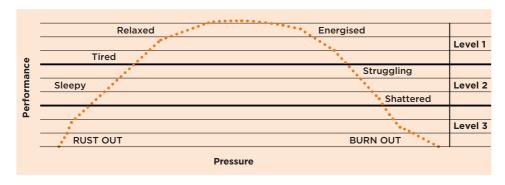
Whilst pressure is good for us and can help us complete a task or reach a goal - too much pressure can lead to stress and stress can have a negative impact on our wellbeing, ability to cope, our own safety, patient safety and life in general.

Nursing is rewarding, inspirational and can be deeply satisfying, but we also must recognise that it's emotional, hard work, carries great responsibility and is sometimes delivered in a system that is far from perfect.

It can be difficult to avoid stressful situations in nursing, but there are a number of things you can do to minimise and reduce the impact of stress.

Take a look at the Pressure/Performance chart below to gauge the level of pressure you are under at the moment.

Pressure/Performance Chart



Recognising stress

While you may have done your best to mitigate stressors in your life, inevitably a stressful situation will occasionally arise.

Stressors – the causes of stress – are either short term (acute) or long term (chronic). Our primal fight-or-flight response is a reaction to an immediate threat or acute stressor. Chemical changes in the brain prepare the body either to run away or defend itself.

With long-term stressors, the pressures are ongoing and continuous, and the fight or flight urge becomes suppressed.

The working environment can generate both acute and chronic stressors, particularly for a newly qualifed nurse, but it is more likely to be a source of chronic stressors.

An example might be a procedure you have not undertaken very often that goes wrong – taking blood, for example. You make a mess of it and feel terrible as a result. Those feelings manifest themselves as uneasiness or apprehension, particularly when you're placed in a similar situation again.

Events in your personal life can contribute to the build-up of stress.

Money worries, a sick child, the washing machine flooding the kitchen – each of these may be manageable on its own, but in combination with pressure at work can push you over the line. Think of it in terms of "demands" and "resources" at either end of a see-saw.

When the demands are heavier than the resources available to alleviate stress, the balance tips the wrong way. "Humour is
recognised as a great
stress buster. It distracts
you and gets your brain
working in a different way.
So watch a favourite comedy
programme, go to a comedy
club, try a comedy podcast on
the way home from work, or
share a joke with friends
or colleagues."

Symptoms of stress

Short-term physical effects include:

- faster breathing
- faster heartbeat
- dry mouth
- tense muscles
- tiredness/disturbed sleep
- a need to use the toilet more often/nausea
- increased sickness absence

 stress affects the immune system.

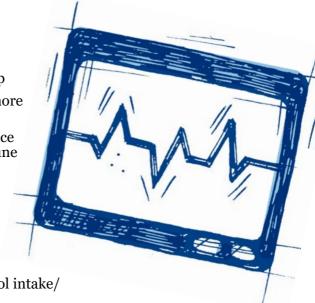
Stress can also induce changes in behaviour:

- restlessness
- overeating/undereating
- increased caffeine/alcohol intake/ smoking
- inability to relax
- · snapping at others/aggressive behaviours
- · double-checking everything.

There are psychological effects of stress too:

- feeling overwhelmed
- loss of confidence in your ability
- irrational thoughts
- · irritability/moodiness
- · lack of motivation
- feeling low or depressed.

There are many more symptoms but clearly, none of the above is conducive to calm, measured, effective nursing care.



Resilience is your ability to rebound quickly from a stressful or negative experience. It is a skill which enables you to recover from difficult and challenging situations. Building and improving resilience takes time and commitment. Adapting strategies, including those shared in this chapter will assist in doing so.

Please understand that resilience does not replace the need for self-care and self-compassion. The three work in partnership – each dependent upon the other.

Imagine you are walking up a rocky mountain in unsuitable shoes and so keep slipping and falling. Resilience is putting on a pair of walking boots so that you can manage the climb better. However, it doesn't alter the fact that the path is rocky and sometimes dangerous.

Stress busting

It's important that as soon as you notice any of the symptoms of stress that you take action. Putting off self-care or failing to address a stressful issue will result in a build-up of stress, which then becomes harder to deal with and a lot more debilitating, mentally and physically.

Be prepared

There's no way to completely eradicate stress, but there are ways to minimise and manage work related stress by taking back some of the control. First, you need to understand about yourself:

- how you practise
- your strengths and weaknesses
- · how you react to situations
- how you work with colleagues throughout your workplace
- · how the behaviour of others impacts on you.



Try this at work

- Try to organise your day differently or better

 there's a saying: "Failing to plan means planning to fail".
- Prioritise and delegate where appropriate.
- · Take breaks.
- Say no this is not always easy, but worth considering if possible.
- · Plan a holiday.
- Raising concerns about your working environment with your RCN workplace rep.

For further information on what your employer should do to promote a healthy workplace see rcn.org.uk/healthyworkplace

"The Healthy Workplace Toolkit has been such a positive resource and has strengthened the partnership between reps and the trust."

Denise McLaughlin, RCN Safety Rep and Steward

Outside of work:

- Exercise more.
- Eat a healthy diet.
- Communicate talk to someone about the causes of your stress or anxiety.
- Socialise with friends and family.
- Pamper yourself occasionally you really do deserve it.
- Make time for you find an hour or two each week to do something you enjoy.

Maintaining a healthy weight is a key part of looking after your body and a balanced diet is central to achieving that. The *Nursing You* wellbeing app enables nurses to reflect on how they make decisions at work and identify goals to help achieve and maintain a healthier weight. Email nursingyou@c3health.org for the app.

rcn.org.uk/healthy-weight rcn.org.uk/library/wellbeingcare-resilience "A brisk walk outdoors may sound like a Victorian remedy, but some fresh air and a change of environment can make a difference. Stimulate your senses with different smells – trees, rain, flowers, even traffic fumes. It doesn't matter what it is, just allow yourself to notice it."

Top tips



Get to know your team well

You'll have a preceptor and an amazing preceptorship team, so pester them! They have lots of combined knowledge and experience, and if they don't know, they'll help you find what you're looking for.

Get your competences out of the way!

It's nerve wrecking for us all, but the sooner you get your competency the quicker you can get any fears or worries out of the way, because you'll be practicing independently.

Don't be disheartened if it doesn't go to plan

Sometimes the vein blows, or you can't find the right "landmark". Keep your patient in mind; they'll often know if you feel defeated, so get some secondary advice and use it as a learning opportunity – your patients will understand.

Stand your ground

It's easy to feel like the new kid on the block and sometimes you might doubt your gut feelings. Don't. If there's a difference of opinion, go and find the actual answer in a policy, or get a second opinion. Regardless of if you were right or wrong, use it as another learning opportunity and rest in the knowledge you did the best by your patient.

Get a small notebook

Fill it full of hints and tips, bleeps, extension numbers, whatever you think you might forget, and keep it in your pocket.

Honesty is the best policy

We can't know everything – if you're asked a question and don't know the answer, be honest and say you'll find out. The more you ask, the more you'll understand and in turn you can explain it to patients and co-workers. People have respected me for that; and with respect often comes trust.

Look after you

Make sure you have a **really** nice, comfy pair of work shoes.

Drink lots of water, your brain function improves no end when you're hydrated.

Take your breaks, even if it seems impossibly busy, it's 24-hour care and it's okay to hand some jobs over.

Be prompt in booking annual leave – I quickly learned to take annual leave about every six weeks.

Because if you don't look after you, how can you look after anyone else?!

It's ok to cry

We all have down days, and it's not a bad thing to get the emotion out.

But also remember to laugh

Try and find the positives in every day, and take every shift as a clean slate.

DON'T GIVE UP!

"Small changes can
have a big impact on your
wellbeing, even if you simply
spend five minutes more in the
shower, or a few minutes listening
to your favourite music before
you get out of the car for an
appointment, or get off the bus a
stop earlier to get a few more
steps in and let your
mind wonder."

When things get tough

you may want to remind yourself of the following strategies

Make the most of your preceptor or senior nurse

If you feel unsure about something or need a bit more advice or guidance, talk to your preceptor or senior nurse. They can help you reflect on your experiences so far and identify where you might need some extra support – deflecting nervousness and anxiety before stress develops. Remember, you're not expected to know everything immediately, so don't be afraid to ask other colleagues questions too.

Recognise areas for improvement

A more formal process of professional support is clinical supervision. This can help nurses reflect on their practice and identify areas for improvement. It also provides an opportunity to develop expertise, find new ways of learning and to gain professional support, which may be especially important for new registrants who work alone.

Learn from others

Professional networking is another useful tool that can help newly qualified (and established) nurses to share and learn from their experiences, and develop insight and new ways of working.

The RCN's professional forums cover all nursing specialties. As a member you can join for free. They offer great capacity for support and learning from more experienced colleagues. Read more about the forums at rcn.org.uk/forums

Self-reflect

Take time to think about your practice and your day. What has gone well, what hasn't and what have you learned from the situation?

Think about what you could have done differently – would this have improved the care you have given? Or how you looked after yourself? You may prefer to use Rolfe et al's (2001) *What? So what? Now what?* reflective model.

"The RCN campaigns for nurses to Rest, Rehydrate and Refuel and for employers to recognise their responsibility in facilitating this."
rcn.org.uk/
rest-rehydrate-refuel



Mindfulness

If you're feeling stressed you could try some mindfulness techniques, paying attention to the present moment, your own thoughts and feelings, and the world around you.

For more information and to view mindfulness based videos for nursing staff, visit: rcn.org.uk/healthy-you/time-and-space
Some people also find complimentary therapies, such as massage, reflexology or aromatherapy, are good for relieving stress.

Sleep

Sleep is the cornerstone of good physical and mental health. You can find lots of helpful information about how to improve your sleep pattern at nhs.uk/live-well/sleep-and-tiredness

Or search: NHS live well sleep

Or you could try these NHS-recommended apps: Pzizz and Sleepio.

"Try a bit of mindfulness breathing, meditation or yoga to reduce stress and calm your nervous system, or why not make use of complementary therapies such as massage, reflexology and aromatherapy."

Taking action

Anxiety and stress are not the same. If feelings of stress remain long after the event that caused them has passed, that's anxiety.

If you try to implement strategies to reduce stress levels with no affect, then you must access additional support to get a better understanding of your situation in order to prevent your wellbeing from deteriorating, to avoid compassion fatigue and burn-out.

And remember that your employer carries a responsibility for your health and safety at work and may offer an employee assistance, a wellbeing programme and/or an occupational health service to support you.

Recognising how stress affects you is a first step towards dealing with it and asking for advice is the second step. RCN Member Support Services offer free, confidential advice, representation and support. Services include counselling, career advice, welfare rights and guidance, peer support and immigration advice. The team work closely with regional offices and legal services to ensure that RCN members are fully supported. For further information visit rcn.org.uk/mss or call RCN Direct on 0345 772 6100.

Just remember, take care of yourself, you are worth it.

Your accountability – please refer to 1.5 and 1.6 of NMC (2018) Future Nurse: Standards of Proficiency for Registered Nurses [Online]. Available at nmc.org.uk/globalassets/sitedocuments/education-standards/future-nurse-proficiencies.pdf

Bullying

The RCN believes that the nursing workforce should be treated fairly and consistently, and with dignity and respect wherever they work. As a newly qualified nurse you may be exposed to, or witness, bullying behaviours from colleagues or managers.

Bullying can impact on the victims' physical, psychological and emotional health. It can lead to poor work performance and feelings of fear and anger. Unsurprisingly in workplace cultures where bullying is allowed to thrive, it can impact on patient outcomes. There is increasing evidence that incivility or rudeness at work can impact on patient safety.

Your employer has a duty of care to provide a safe and healthy working environment, which includes one where dignity and respect is promoted and bullying behaviours tackled at the earliest instance. Nursing staff also have a responsibility to ensure their behaviour does not distress colleagues.

NMC Code: *The Code* (NMC 2018) requires registrants to 'work co-operatively'. This includes the requirement to respect the skills, expertise and contributions of your colleagues, referring matters to them when appropriate; to maintain effective communication with colleagues and to keep colleagues informed when you are sharing the care of individuals with other health and care professionals and staff.

Examples of workplace bullying

Workplace bullying is generally characterised by the misuse of power or position. The power can be formal, such as those a line manager has, or informal such as a long serving colleague who has built up a close network of peers. Bullying can take a number of forms. It can be overt, such as someone publically humiliating or being outwardly aggressive towards you, or more covert, such as deliberately withholding information, exclusion from meetings, or changing work deadlines. It can often be very subtle and increasingly, can take place online, for example, via emails and social media. Importantly, bullying behaviour is any behaviour that in your view is unwelcome or unwarranted and is having a detrimental effect on your wellbeing.

What to do if you think you are being bullied at work

Talk to other people

Bullying can be destructive and give the victim feelings of self-doubt and anxiety. If you perceive that you are being bullied, don't brush it aside, talk to a trusted friend or colleague about your experience and 'sound them out'. If you're not sure who to go to for advice you can speak to your at workplace occupational health service or counselling service. Your RCN representative can also be a source of advice and support, as can your preceptor. Some organisations have 'dignity champions' or 'freedom to speak out guardians'.

Make notes

Keeping a record of incidents can help clarify exactly what is going on and how it made you feel. A diary of events can also provide evidence of what you have been experiencing should you want to escalate your concerns informally or formally.

Make a direct approach

If you feel able, raise the issue informally with the person who is bullying you or, if appropriate, speak to their line manager, preferably at an early stage. They may be unaware that their behaviour is causing distress.

Familiarise yourself with the anti-bullying policy

Most health care organisations will have an anti-bullying policy (sometimes referred to as the Dignity at Work policy or Respect policy). Seek out your policy and follow the advice it gives.

Informal or formal approach?

An informal approach is when you ask your line manager or a senior manager (if the line manager is the perpetrator) to talk to the person who you are complaining about. If your manager is unsympathetic to this approach, you should keep a record of any meetings and talk to the human resources department and your RCN representative.

If the bullying continues following an informal approach, you can make a written formal complaint by following your employer's policy. If you are considering making a formal complaint, always speak to the RCN first for advice.

Witnessing bullying behaviours

It may be that you are not on the receiving end of bullying behaviours, but as a new member of staff, you may come into an unhealthy work environment where staff have normalised or avoided speaking up about bullying behaviours. Witnessing a colleague being bullied can also be distressing or offensive. It can be daunting to speak out when you witness bullying behaviours, especially as a newly qualified nurse. It's best to seek advice from a trusted friend or colleague, or dignity champion/freedom to speak up guardian. If it is the latter, they may be able to raise the issue on your behalf or may already be aware of concerns from other colleagues. Your workplace policy will give advice on how to address issues you witness. You can also speak to your RCN representative or contact RCN Direct for advice.

Finally, play your part. Many organisations will have values or behaviours they expect of staff. Be a role model to others by following those values and treat everyone you work with, from the domestic or the student on placement to the agency nurse, with respect.

Harassment from patients, clients and relatives

Harassment is defined under the Equality Act 2010 as 'unwanted conduct related to a relevant protected characteristic*, which has the purpose or effect of violating an individual's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for that individual'.

Harassment can come in many forms:

- It may be repeated events or a single serious incident.
- It can be physical abuse, such as physical contact.
- Verbal abuse, such as telling offensive jokes or using offensive language.

- Written abuse, such as emails or text messages.
- Obvious and direct, such as mimicking the effect of a disability, ridiculing sexual orientation, or an explicit threat.
- It can be unseen or covert abuse, such as pressure for sexual favours.

If you feel you are being harassed by a patient or member of the public, follow your employer's policy and procedures for dealing with harassment by patients or other members of the public. Where there is no protocol, report the incident to your manager. The RCN also recommends that you complete an incident form.

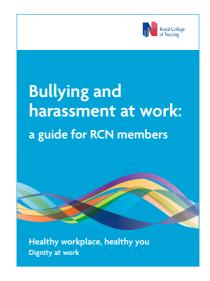
You have a right to expect your manager to take action on your behalf such as, in the first instance, speaking to the patient or member of public to tell them their behaviour is in appropriate. They should also review any health and safety risk assessments.

If your manager is not supportive, speak to your RCN workplace representative or call RCN Direct for help and advice: 0345 772 6100.

Further information

RCN Bullying and Harassment at Work: a guide for members rcn.org.uk/bullying-guide

Bullying, harassment and stress – online advice and a diary you can use to log incidents rcn.org.uk/bullying



^{*} Protected characteristics (2019) are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation equalityhumanrights.com/en/advice-and-guidance/your-rights-under-equality-act-2010

Or search: Your rights under the Equality Act 2010

4 Regulatory, employment and legal issues

This chapter is about the practical detail of becoming a nurse. It also considers employment issues and how the RCN can help you with them. There's also some advice about avoiding potential legal pitfalls.

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The NMC register

Not only does the NMC require you to pay your registration fee annually, you are also required to hold professional indemnity.

Professional indemnity

When you first apply for registration with the NMC, and every time you undergo revalidation in the future, you will be asked to complete a declaration to confirm that you have in place, or will have in place when you practise, appropriate indemnity arrangements.

The aim is to make sure that where a patient suffers harm through the negligent action of a nurse or midwife, the patient will be able to recover any compensation that is due, by ensuring that all nurses and midwives have appropriate indemnity cover.

Professional indemnity insurance is a requirement of registration, so you can't afford to ignore it.

However, it is likely that you are covered through your employer if you already have a job lined up. All NHS employers and General Practice employers will cover you. If you are joining a smaller employer, it might be wise to check the cover with the HR department, but employers will generally cover you and you should have no need for any other cover.

If you are self-employed you may benefit from the RCN indemnity scheme as part of your membership of the RCN. For more information please go to rcn.org.uk/indemnity. The RCN covers the cost of claims up to £3 million.

As an RCN member you will also be covered for your voluntary work or any time that you step in to help as a Good Samaritan.

The nursing associate role within England

You may hear of a relatively new nursing role called nursing associate (NA). NAs work across all four fields of nursing: adult, children's, mental health and learning disability. This role is designed to help bridge the gap between health and care assistants and registered nurses. NA is a stand-alone role that will also provide a progression route into graduate level nursing. NAs work with people of all ages and in a variety of settings in health and social care. The role will contribute to the core work of nursing, freeing up registered nurses to focus on more complex clinical care.

The NA role is only available in England and is only recognised, regulated and registered in England by the NMC. All NA education courses are now part of the apprenticeship scheme and are approved by the NMC. There are a small number of Health Education England providers offering the course for fee paying students.

The role follows *The Code* (NMC 2018) and needs to revalidate against the Code, as other registrants do. The NAs on entry to the register will have completed a two-year work-based learning programme and achieved a Foundation Degree at an academic institution. They will have achieved proficiencies in a range of clinical skills according to the Standards set by the NMC. These Standards set out what an NA should know and be able to do when they join the NMC register. This will make sure that everyone entering into the profession has the skills they require to care for people safely, with integrity, expertise, respect and compassion, from the moment they step into their first job.

Like nurses and other health professionals, NAs can expand their knowledge and skills with the right training and clinical governance. The intention is for NAs to support, not substitute, registered nurses.

More information can be found about the role on the NMC website at nmc.org.uk/standards/nursing-associates

Contracts

If everything's gone well, by now you will have applied for and been offered a job in the NHS or with an independent sector employer, and you will have signed a contract with your employer. The contract is enforceable in law.

As an RCN member, rcn.org.uk/get-help/your-contract is your best source of advice for issues relating to employment contracts should you have any queries, but here are some key things you should be made aware of.

Employment contracts set out terms and conditions – usually a range of promises made by the employer covering such matters as holidays, sick pay and working conditions.

From April 2020, all workers (including employees) should be given access to a written statement of employment particulars from day one. These form the basis of your contract of employment. When you sign an employment contract, you are agreeing to all the terms within that contract. It is therefore important that you understand what you're signing and that if there are any issues that might affect your willingness or ability to agree to the contract, you should have those points clarified before your start date. It is perfectly legitimate for you to negotiate with the employer to try to improve the terms, but of course your prospective employer is entitled to say no to your request.

You may be asked to work a probationary period. These are not defined by law, but may be included as a term of your contract. The contract should make clear how long the probationary period will last and whether it can be extended. Some employers will offer less favourable terms and conditions, and a lower salary during the probationary period. This is allowed providing it's stated in your contract.

Changes to your contract are generally unlawful unless both parties – you and your employer – agree to them. Generally, changes to your job description should only be made by agreement between you and your employer.

Important issues related to terms and conditions include:

- pay arrangements is there incremental pay – that is, will you move to a different level of pay each year?
- is there an annual cost of living increase and how is this determined?
- annual leave arrangements
- sick leave and sick pay arrangements
- unsocial hours/shift payments (weekends, nights, evenings, etc)
- flexible working arrangements
- travel cost reimbursement within work
- maternity and paternity leave arrangements
- pension type of pension available, including employee and employer contribution rates
- overtime arrangements, such as how this is covered
- grievance and disciplinary procedures

- trade union recognition is the RCN recognised by the employer to negotiate on your behalf?
- your starting pay
- your hours of work (including start and finish times, and any shift or unsocial hours arrangements)
- location of work and travel requirements
- reporting arrangements
- notice period
- job description (which won't be definitive, but should capture your core duties and responsibilities)
- preceptorship arrangements
- appraisal arrangements and whether appraisal is linked to pay
- continuing professional development (CPD) and training opportunities.

Payslips

The layout of payslips can vary greatly, but should contain the same basic information:

- · Name, employer, pay roll number
- · Monthly/weekly pay
- Hours worked
- · Gross pay
- Net pay after tax
- Tax paid
- National Insurance number and contribution
- Pension contribution from employee
- Pension contribution from employer
- Allowances (for example, London weighting)
- Overtime/shift payments, if worked
- Net deductions, for example for parking, hospital accommodation or lease car.

It is important that you become familiar with your employer's payslip, so that you can check that you are being paid correctly. Do check your hours, pension contributions, tax codes and other payments and deductions, as over-payments made by the employer can legally be reclaimed even if it is the employer's error.

Do also raise any queries with your payroll department in the first instance, who should be able to talk you through your payslip.

For further information on payslips and over and underpayments visit: gov.uk/payslips

rcn.org.uk/underpayment-of-wages

Agency and bank work

Agency or bank nursing is a way of gaining experience while you look for a permanent job. You may have tried it already – but while some newly qualified nurses find it valuable, it's not for everyone.

Be mindful that many agency and bank recruiters prefer nurses to have at least six months' post-registration experience and a period of preceptorship completed before taking them on.

Flexibility is the big attraction, with the opportunity to work when you want. There can be a risk that you end up accepting lots of work because you fear that it might dry up at any time. But many agency and bank recruiters can give candidates a realistic picture of demand for work.

It's certainly a great way to get your foot in the door, for staff to get to know and like you (and vice versa), and to ensure you're informed about forthcoming permanent opportunities. You can also build up valuable experience and skills to add to your CV.

Some nurses find that the initial novelty and excitement of working in new areas and being able to stay out of any internal politics can give way to feeling left out of the team, and not feeling valued or appreciated. However, many agency and bank workers manage to find regular lines of work in one area and have access to educational opportunities.

The NMC requires third-party feedback as part of the revalidation process (see chapter 1), agency and bank staff need to be mindful of keeping a record of positive feedback from patients and peers, and of asking for appraisal and mentorship support if they work in one place long term. It's also very important to build excellent relationships with colleagues and managers, as you may need to approach them for a clinical reference at a later date.

For further information about employment rights as an agency or bank worker, please see rcn.org.uk/agency and rcn.org.uk/bank-workers

RCN support in the workplace

There are many active RCN members in the workplace. Some hold official roles, and many others get active through their branch, professional forum or through the RCN's social media groups.

Branches

All members belong to an RCN branch. Branches participate in, and influence the work of the RCN. Although an official part of RCN governance, they are also local, accessible and social. Members can work together to challenge and improve things locally, but also link into regional and country boards, and can take your views and issues to the highest level. Branches meet regularly and many hold learning events and take part in local activities. Go to your

region or country pages on the RCN website to find out more.

RCN representatives

A trade union representative (rep) is a member who has been elected to represent union members in the organisation where they are employed. The RCN has three types of accredited rep; learning rep, safety rep and steward.

Learning reps

Support the ambitions of our members by promoting learning and career development. Where learning reps have the most influence in the workplace:



Safety reps

Help to ensure our members operate within a healthy and safe working environment. Where safety reps have the most influence in the workplace:



Stewards

rcn.org.uk

Protect the rights of our members, ensuring fair treatment on all employment related matters. Where stewards have the most influence in the workplace:



Source: the value of trade union workplace representatives in health care, rcn.org.uk/union-rep

Learning reps

RCN learning reps champion and promote the value of learning. They do this by offering support and signposting – assisting all members to plan, manage and undertake their learning in whatever way suits their learning style. They work in collaboration with the RCN, employers and other stakeholders to negotiate, develop, protect and embed learning in the workplace.

A learning rep might:

- provide information, advice and guidance, and signpost members to high-quality resources and learning opportunities
- engage with RCN members to organise an event in the workplace, or support a campaign relating to the promotion or protection of learning in the workplace
- support individuals to identify and address learning needs that arise from their practice, or from cases where they are being represented by stewards
- access and analyse information about learning and development, and work in partnership to question, understand and influence the learning agenda.

Helping members to deliver care for transgender patients



Workplace

Cumberland Infirmary, North Cumbria University Hospitals NHS Trust

RCN Rep

Rachael Ridley, Staff Nurse and RCN Learning representative lssue(s)

Provide targeted expert information to help nursing staff offer a better standard of care for transgender or trans patients.

Identify the problem

Many nursing staff have a lack of knowledge about trans issues, potentially affecting the quality of care they are able to deliver to this group. By improving understanding, the nursing community can reduce experiences of poor care, helping to eliminate the prejudice and discrimination often faced by trans patients.

Take action

- Highlighted the issue with a resolution at RCN Congress, calling for fair care for trans patients.
- Sought agreement to publish a new RCN learning resource to help nursing and health care staff improve the standard of care they offer to trans patients.
- Worked with other contributors, organisations and RCN staff to write the guidance.
- At a local level, encouraged the trust to promote the guide's key messages.
- Publicised the guidance more broadly, through national forums and lesbian, gay, bisexual and trans events.

Challenges

- Finding time there is much more work to be done and this is just the beginning.
- Ensuring that the publication doesn't just sit on a shelf, but is used to change practice for the better.

Results

- The RCN launched new national guidance, Fair Care for Trans Patients, which has been well received.
- The guidance is also available on the trust's intranet, enabling all members of staff to benefit.
- The publication, and work to promote its messages, have raised awareness of trans health care, both locally and nationally.
- Rachael's work also inspired an RCN survey, involving more than 1,200 nursing staff.
- This found that while more than three-quarters had encountered trans people during their nursing work, almost 90% felt unprepared to meet their needs.

"The impact is not just for nurses, but for patients too. Even the language that nurses use towards trans patients can make a huge difference to their overall experience of care." Rachael Ridley "Rachael has built new relationships both across the RCN and with other agencies, developing a national profile on these issues. Rachael's achievements were recognised when she was named as one of 25 LGBT national role models by the Health Service Journal." Wendy Irwin, RCN Diversity and Equalities Co-ordinator

Safety reps

RCN safety reps encourage and promote a safe working environment, ensuring members' rights to a safe and healthy workplace by working collaboratively with the RCN, employers and other stakeholders to recognise and influence the management of risk in the workplace.

A safety rep might:

- provide information, advice and guidance, and signpost members to information and resources that support a safe and healthy workplace
- organise initiatives and support campaigns that help to create a healthy and safe workplace and culture
- support individuals with health and safety needs, some of which may arise from cases where they are being represented by stewards
- carry out safety inspections and identify health and safety issues
 that need to be addressed, and work in partnership with employers
 to ensure risks and issues are addressed.

Reducing stress-related staff absence



Workplace
Queen Elizabeth Hospital Gateshead
RCN Rep
Denise McLaughlin, RCN Safety rep and Steward
Issue(s)

Staff on sick leave due to stress were absent for many weeks and were not accessing timely support.

Identify the problem

Staff absence due to stress was becoming a major concern. Staff on leave because of stress were only referred for additional support after four weeks absence.

Take action

- Accessed sickness absence data to identify the extent of the problem.
- Used the RCN's Healthy Workplace
 Toolkit with the trust's Health and
 Wellbeing Steering Group to develop a partnership approach to tackling issues.
- Worked with occupational health to devise a fast-track referral process for stress-related sick leave.

Challenges

- Lack of awareness of the extent of the impact of stress-related absence.
- No fast-track referral for stressrelated sickness absence.

Results

- Sickness levels have decreased.
- Anyone with a stress-related issue is contacted by the occupational health team within 24 hours.
- Staff can speak to a health care professional and receive independent advice, information about talking therapies, or support in approaching their GP.

"The Healthy
Workplace Toolkit
has been such a
positive resource and
has strengthened the
partnership between
reps and the trust."

Denise McLaughlin, RCN Safety Rep and Steward "Anecdotally, staff have said that being able to talk to a health care professional has given them the confidence to return to work sooner. Working with Denise and the toolkit hasn't only helped to tackle sickness absence. Our Trust has a reputation for investing in our staff, and the toolkit has helped us safeguard funding to develop and retain our existing staff. I have used it in conversations with senior management, because it clearly sets out the value of investing in staff."

Karen O'Brien, Deputy Director of Workforce, Queen Elizabeth Hospital

Stewards

RCN stewards promote the value of partnership working, facilitating the fair treatment of RCN members through collective and individual representation, and by working collaboratively with the RCN, employers and other stakeholders to negotiate, assist and promote good employment practice in the workplace.

A steward might:

- provide advice and guidance, and signpost members to resources relating to the terms and conditions of their employment
- organise an event in the workplace or support a campaign relating to the local or national issues of employment
- represent a member through a range of workplace issues, such as a disciplinary, sickness or capability review
- access and analyse information about employment-related issues and work in partnership to question, understand and negotiate terms and conditions of employment with employers, where these can be negotiated locally.

All these activists – learning representatives, safety representatives and stewards – are there to support you. If you're not sure how to make contact with them, phone RCN Direct on 0345 772 6100 for advice.

Supporting an RCN member in difficulty



Workplace Nottingham University Hospitals NHS Trust RCN Rep

Maive Coley, a health care support worker, RCN Steward and Learning representative

Issue(s)

Supporting a young, newly qualified, member who faced disciplinary proceedings for extending his break without permission.

Identify the problem

A staff nurse with just two years' experience didn't return from his break on time, but he was reassuring a patient's family, prioritising their health and wellbeing over his own time-keeping. Facing a formal disciplinary hearing, he needed both practical and emotional support to cope with a highly stressful situation, alongside a positive outcome to ensure his future career prospects.

Take action

- Sought expert advice from the RCN's team of professional officers.
- Supported the RCN member to develop his statement.
- Met regularly with the member to make sure he was up to date with developments and felt supported throughout.
- Spent as much time as possible preparing the case, going through the evidence line by line and anticipating various lines of questioning.

"He was really in trouble and needed our help. Without the RCN's support, I think he would have given up nursing. Now he can move forwards and put all this behind him. He behaved in a way that a young, newly qualified, enthusiastic staff nurse would do, going the extra mile. But sometimes policies and procedures can be so rigid, we loose sight of the human aspects."

Challenges

- Tackling a disciplinary hearing alone for the first time, with expert guidance from RCN officers.
- Developing the confidence to represent a member's interests in front of an experienced investigating panel.
- Understanding the process and terminology.

Results

- The individual received the lowest sanction possible: an oral warning with no loss of increment.
- His career has not suffered and he has since moved to another post.
- The member felt supported throughout, describing the outcome as 'a huge weight off my shoulders'.
- He was so impressed with the service he received from the RCN that he has now applied to become an RCN steward.
- Maive's confidence to represent members during disciplinary proceedings has been boosted.

"This was a very complex case, which had some significant issues. Throughout her dealings with both the individual and managers, Maive was patient, compassionate and very knowledgeable. She is someone who really does her homework and as a result, has great credibility. Respected by everyone, she's a team player, pragmatic and also has a good sense of humour. It's a privilege to work with her."

Guy Thomas, former RCN Regional Officer

Interested in becoming an RCN representative?

At some point you might want to think about becoming an RCN representative yourself. They make a real difference to the working lives of members and to nursing in general. Plus, they work with people at all levels, so they learn how to influence decisions. They become more politically aware as well as gaining in confidence. All representatives are fully supported by RCN staff and there are plenty of learning and development opportunities to ensure you acquire the necessary skills to stay on top of the role.

If your employer has a recognition agreement with the RCN, accredited trade union representatives are entitled to reasonable time off for learning and development, and duties related to member support. If you're interested in learning more, please visit rcn.org.uk/get-involved/rcn-reps. Why not see what reps are saying about their role - download *The Value of Reps: In our own words* at: rcn.org.uk/value-of-reps

Finances after graduating

The relief you feel after finishing your course can quickly be overtaken by feelings of anxiety about money if you don't plan ahead.

But don't panic. Whether you're going straight into full-time employment or if you need a while to apply for your first postregistration position, a small amount of time spent taking stock of your financial situation can make all the difference.

Here are some of the issues that you may need to consider after completing your course. Remember, you will officially be a student until the last day of your course – even if you have finished your final exam or placement earlier than this date.

Every graduate's situation will be different. Your financial circumstances will depend on whether you have taken out government student loans, have overdraft facilities, are living at home, or have to wait before starting your first job as a registered nurse.

Use the steps in this section as a checklist to ensure you start your postgraduate life on the right financial track.



Top Tip:

The Money Saving Expert website has some great tips on comparing the best graduate accounts to suit your specific financial needs.

Search 'graduate bank accounts' on moneysavingexpert.com

Graduate accounts

As a student it is likely that you will have held a student bank account. These accounts often have an interest free or very low-rate overdraft attached to them.

Before the end of your course you should check the terms and conditions of your overdraft and student bank account to find out what will happen to them after you have graduated. If you do not look into this your bank may automatically switch you to an account that has high bank charges, which will add considerably to your existing debt.

Depending on the type of account, your bank will do one of three things:

- convert your student account into an ordinary current account, thus removing your interest-free overdraft
- offer an interest free overdraft for a very limited period
- · significantly reduce or withdraw your overdraft facility.

Exceeding authorised overdraft limits can result in significant daily penalties amounting to hundreds of pounds per month.

Ideally you should be looking for a graduate account with preferential terms, so speak to your bank and see what they can offer you. There's no need to stay with your current bank. Shop around to see if another can give you a better deal.

Repaying university debts

Be careful about any money you owe your university. The university may threaten sanctions if you do not clear debts, such as accommodation and library fees. If you are unable to clear these before graduation, seek advice from a debt advice agency. They'll be able to help you negotiate a repayment plan with the university to clear the debts.

As a member of the RCN you can access free debt advice by calling RCN Direct on 0345 772 6100 and requesting to be referred to the RCN Welfare Service Debt Adviser.

Repaying your student loan

If you funded your studies with an income-contingent loan from the Student Loans Company you will be expected to start making repayments in the April after you graduate. These repayments will only start if you earn over the repayment threshold, which currently stands at £25,000.

You will have money taken off your salary to repay your student loan during any pay period where your earnings before tax are over the weekly or monthly threshold.

You pay 9% of anything you earn over the threshold.

It's important to keep an eye on your repayments, so that you know when you're due to finish repaying your loan. Regularly check your account online via the Student Loans Company repayment portal: studentloanrepayment.co.uk

As interest is charged on the student loan, if you are able to, you may wish to make additional payments to clear the debt more quickly. Details of how to do this are on the government website gov.uk/repaying-your-student-loan/make-extra-repayments

Or search: repaying student loan gov

In some cases there is no advantage of doing this, so do your research about your own personal circumstances before making any additional payments. The advantage of doing this will depend on the amount of loan and your salary over the 30-year repayment period. Further details can be found at:

moneysavingexpert.com/students/repay-post-2012-student-loan/#overpaying1

Or search: 5.4% interest on post-2012 student loans

Council tax/rates exemption

Once you cease to be a student you'll no longer be exempt from paying council tax or rates. The certificate provided by your university to present to your council should state the exact date when you stop being a student.

If you do not start work immediately, depending on your situation and that of your family, you may qualify for a means-tested benefit called Council Tax Support or Rate Relief in Northern Ireland. You can learn more about this by searching for 'council tax support' at ren.org.uk

Once you are in employment if you carry on living in accommodation with other students, then any student tenants will need to provide the exemption certificate. However, the property will no longer be exempt and you may face a council tax/rate bill. You will need to discuss with your flatmates how the bill will be paid.

If you need further advice please contact RCN Direct on 0345 772 6100 or visit rcn.org.uk/lamplight-eligibility

Tax credits

If you have dependent children you may have received Child Tax Credit while you were studying. It's important that you notify HMRC of any change in your circumstances, including completion of your studies and any paid employment you are undertaking. This will ensure that you do not have to repay any overpayments.

HMRC will be able to re-assess your claim to include Working Tax Credit and ensure you are getting all the support available, including help with childcare costs if you are paying a registered childminder to care for your children while you go to work. Notify HMRC of any changes by calling 0345 300 3900.

If you cannot make a new claim for Tax Credits, but you have dependent children and have recently started work, you can do an online calculation to see if you qualify for Universal Credits. Go to https://mrc.gov.uk/taxcredits/payments-entitlement/entitlement/question-how-much.htm Or search: Tax credits calculator – gov.uk

Claiming benefits and tax credits

Not everyone is able to work immediately after graduating, so you may need to apply for an earnings replacement while you look for work. There will be instances where newly qualified nurses are able to start work, but may also qualify for in-work benefits to top up their income. Usually you cannot claim any benefits until after your official university leaving date, although there are exceptions to this in certain circumstances if you have a disability or look after children. Once you have completed your course, you should make a phone application as soon as possible as you will not be able to get backdated payments unless you can prove there was a good reason for not applying sooner.

Jobseeker's allowance and Universal Credit*

If you do not secure employment upon graduation or you work for fewer than 16 hours per week, then you could be eligible to make an application for Universal Credit or new-style Job Seekers Allowance (JSA).

If you have been working during your studies and have been paying National Insurance contributions for a set period, above a set level. you may qualify for income-based JSA, which can be paid for up to 26 weeks. Other family income is not taken into consideration and you can claim this benefit even if your partner is working.

If you have not got the correct National Insurance contribution record, you can apply for Universal Credit. This is a means-tested benefit, so most family income and capital will be taken into consideration. You will need to meet the qualifying conditions of the benefit.

To make a claim you should contact Job Centre Plus on 0800 055 6688. Further information can be found at: gov.uk/apply-universal-credit

*Note that from April 2013 most claims for assistance with rental costs are being dealt with under the new Universal Credit arrangements. Updates on how your claim will be treated will be available at direct.gov.uk

Housing costs

If you have a low income and are renting a property or a room, you may be able to claim Local Housing Allowance or the housing element of Universal Credit (UC), which can help you to pay your rent. These are a means-tested benefit and the amount you are eligible to receive will depend on your age, your income, the area where you live, the number of people in the property and household size.

To make a claim you should contact your local council, or apply via Universal Credit. Further information can be found at Gov.UK at direct.gov.uk

Tax relief

As soon as you start work, you may be eligible for tax relief on:

- RCN membership
- NMC registration fees
- uniforms
 (including shoes, tights and laundry costs for your uniforms)

For further details and to download a form, visit: rcn.org.uk/membership/tax-relief

Tenancy deposit

If you are renting privately and leaving the accommodation at the end of your final year, you should request that your landlord return your deposit. It's likely that your deposit will have been put in the Tenancy Deposit Scheme. The scheme will release your deposit once it is satisfied that both parties are happy that the accommodation has been left in a satisfactory condition. If you are having problems with your landlord agreeing to the return of your deposit, then view the student money guide for advice on the steps to take:

rcn.org.uk/student-money-guide

TV licence refund

If you are leaving your accommodation and no one in your household will use your TV licence before it expires, you can claim a refund for any unused quarter (three consecutive calendar months). For information on how to do this, go to the 'Students' area of the TV Licensing website: tvlicensing.co.uk

Dealing with debt

If you have taken all the steps above and are still concerned or confused about your finances, then you may need specialist debt advice. RCN Welfare Service will be able to explore the options with you and will be able to offer solutions that will help you get back on track. Feeling that your finances are out of control causes stress and can be time consuming, which can be especially difficult when you have so much else on your mind, such as job hunting or starting a new post. So don't hesitate to contact the RCN if you need help. You can call us on 0345 772 6100 and ask to be referred to the specialist money advisers or visit rcn.org.uk/mss

The RCN has produced a money guide for newly qualified nurses, which will help you better manage your money by providing advice on:

- first steps to get your finances in order once you start work
- claiming top-up benefits and tax credits for those with dependents
- · affordable housing options
- · dealing with debt and other important money planning decisions
- the best ways to save money.

rcn.org.uk/nqn-money-guide



Save with RCNXtra

Thousands of us are still paying too much for our goods and services. The good news is that there are some great deals to be had. The RCNXtra scheme (available to RCN members, their family and friends) can help with money-saving ideas. rcn.org.uk/xtra



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RCN legal support

The vast majority of nurses go through their careers without ever making serious mistakes or getting into trouble with their employer or the NMC. Hence, the odds are you'll never need the support of the RCN legal team.

But this section explains some of the ways in which nurses can find themselves in hot water – often unwittingly – and how the RCN can step in if one of those nurses is you. The RCN has the largest in-house legal team of any trade union; they are here to help.

Employment Law

Sometimes problems arise at work. You might be absent for a health reason and wonder what will happen to you, you might have a disability that your employer is failing to accommodate, or you might face a disciplinary matter.

The RCN has local reps to provide you with support in the workplace, backed up by RCN regional officers who might represent you in hearings before your employer.

If the case is sufficiently serious to require legal support, the RCN has a specialist Employment Law Team who can even take your case to the Employment Tribunal. We would hope that nurses always receive fair treatment at work, and the RCN regional and legal teams aim to sort out problems as they arise and keep our members in their workplaces whenever they can.

However, sometimes nurses are not treated fairly, and in 2019 alone our Employment Law team recovered damages payments of nearly £2 million that went to RCN members to compensate them for unfair treatment by employers.

NMC Fitness to Practise

The NMC received 5,373 new concerns in 2018/19, which is about eight referrals for every 1,000 nurses on the NMC register. The RCN has a dedicated in-house legal team that supports RCN members from the moment that they hear from the NMC with a referral letter to the final NMC tribunal hearing.

Many RCN members are surprised at how fairly common errors can result in them facing an NMC investigation. The top misconduct allegations heard at the NMC involve:

- · neglect of patients
- poor drug administration
- poor record keeping
- dishonesty
- failing to keep clear professional boundaries with patients and colleagues.

Dishonesty features frequently in these cases and many nurses do not realise that if they alter a record after the event, this may be treated as evidence that the nurse is dishonest.

Nurses need to be especially careful that they don't exaggerate their CVs by claiming, for example, that a partly completed course has been awarded, or that a colleague supplying a reference was a supervisor rather than a peer. One of the most common dishonesty scenarios is the nurse who works a bank shift while signed off sick from their main job.

RCN members represented by the legal team are encouraged to engage with the process and are supported to present their best case. This includes their steps to put any deficiencies in their practice right and evidence of the reasons that they can be considered safe and insightful practitioners.

It is very important and an obligation under *The Code* (NMC 2018) that you tell the NMC and your employer as soon as you can if you are charged with an offence, or you have received a conviction or a caution. Failure to do so can lead to a further accusation that you have not been open and honest with your regulator, which is treated seriously. There

are some other situations when something has happened that has not resulted in a caution or conviction, but you may need to tell the NMC. Please do contact the RCN for advice about how to self-refer to the NMC and do call us if you are in any doubt about what to do. It is important that you do not bury your head in the sand in these situations.

The good news is that RCN data shows that members of the RCN are less likely to be referred to the NMC in the first place, and if they are referred, they are more likely to come out of the process with a less serious outcome or no sanction at all. Therefore, if something has gone wrong, you should contact the RCN as quickly as possible and make sure that you benefit from the service that is there for you when you need it.

Disclosure and Barring Service (DBS)/ Disclosure Scotland

All nurses must obtain a DBS (formerly CRB) certificate before they can work with the public. Nurses occasionally run into problems with checks by the DBS or Disclosure Scotland. These can include, in the enhanced disclosure section, details of accusations that have been made against them, even if these were never tested in a courtroom. An entry might set out the nature of the allegation.

This can sound very serious, such as "Ms X was investigated for abuse of an elderly patient" and might conclude: "A prosecution was not pursued due to insufficient evidence." It might be that the patient was someone who was confused and had made many complaints about other health care professionals. An entry of this type can ruin a career. Where it is clearly unfair for this sort of information to be included, the RCN legal team has successfully challenged certificates and removed damaging entries.

The DBS also runs a barring scheme for those who are deemed too much of a risk to work with children or vulnerable adults. Those listed on its register are barred from that work for 10 years. If you receive a letter from the DBS it is imperative that you seek the advice of the RCN immediately.

Coroner inquests

When a patient dies, in some circumstances there will be an inquest. Every year coroners hold about 30,000 inquests. You may be called to give evidence at an inquest, and the RCN website has guidance about the process and tips to bear in mind if you are a witness. Usually, there is nothing for the nurse to worry about. They are simply assisting the coroner establish the cause of death.

However, sometimes nurses are criticised at an inquest. If you are at risk of criticism, you might require representation and your employer may represent you, or you may need RCN representation. If you are concerned, please do contact RCND for advice and you will be referred to the RCN legal team if you need representation.

Police cautions

Nurses are sometimes unaware that if they are convicted or cautioned for a crime, both they themselves and the police are under a duty to report that fact to the NMC. When there has been a family fracas or an over-indulgent night out, and a nurse ends up in the police station, it is important that he or she takes legal advice before accepting a caution for a minor offence. The NMC will treat the facts of the accepted caution as proven.

The police will issue a caution where there is evidence that the offender is guilty, the offence has been admitted, and the offender agrees to a caution. The offender will be advised that a simple caution is not a criminal conviction, but may not realise that it will be recorded on the police database. The fact that it is recorded means that it will be revealed to a prospective or existing employer on a DBS check.

Although it doesn't necessarily mean that if this happens the nurse will not get a job, the fact of the caution might influence the employer. At the very least, the nurse will need to give an explanation to the employer for the offence, and perhaps offer some mitigation.

The lesson from this is that if you are apprehended by the police and questioned in relation to a suspected criminal offence, wherever it occurs, you should not accept the caution until you have taken legal advice. If the accusation arises from a workplace situation, contact the RCN for advice. And do remember that you have obligations under

The Code (NMC 2018) to tell the NMC and your employer if you are charged with an offence or you receive a conviction or caution.

Further information is also available at:

rcn.org.uk/dbs rcn.org.uk/police-matters

Negligence and patient injury

Nurses can find themselves criticised after a patient has been injured through clinical negligence and is suing for compensation. In most cases, the employer and their insurers are defending the case, but the nurse involved will be a witness. By taking care with your record keeping you are much less likely to be involved in a clinical negligence action.

When creating records, you need to be sure that they capture the whole picture. For example, some cases turn on whether the nurse gave a patient clear advice about when to return for further medical advice if their symptoms fail to improve (safety-netting). If the records do not show, with precision, the advice given, the nurse is unable to prove to the court that the right advice was given and the case can be found against them. Careful record keeping is vital.

Finally, don't be put off by thoughts of NMC hearings, troublesome tweets or police cautions. They are only mentioned here to serve as a reminder that occasionally nurses can get into trouble, particularly if they have not realised that as a regulated professional, they are held to a high standard of behaviour.

If you think you need legal support, contact RCN Direct 0345 772 6100 or visit rcn.org.uk/get-help/legal-help

If you suffer an injury through the fault of somebody else, either at work or outside work, contact RCN Direct for a referral to RCN Law – our personal injury specialists. The RCN also offers other legal services including will writing.

Don't be a twit



The RCN legal team is seeing an increase in the number of Twitter, Facebook and other social media posts that form part of cases against registrants.

Nurses must be very vigilant never to mention their employer or colleagues in a way they would not feel confident to do in an open forum.

Also, they should never talk about patients because they will be breaching confidentiality. One nurse posted about how she was up late, worse for wear, and had to be at work in a few hours. The post was picked up by a patient's family.

rcn.org.uk



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5 Get involved

Make your voice heard to change nursing for the better. This chapter explores the ways to get involved with the RCN.

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Forums and networks

Forums are groups of RCN members who work or have an interest in a particular area of professional nursing practice. There are over 30 forums covering a wide range of areas (see right).

As a forum member, you are part of a community that:

- · shares ideas and best practice
- works to enhance knowledge in a particular specialty
- shapes nursing practice
- helps to identify, promote and develop future nurse leaders.

You can join more than one forum, but have to nominate one as your first choice forum, as this can impact on the power of a forum by influencing its voting rights at RCN Congress.

All forums provide you with the opportunity to keep up to date with developments in your field, contribute in consultations, network with your peers and explore career development opportunities.

You can join a forum by logging into your MyRCN account. ren.org.uk/myrcn

Who leads the forums?

Each forum has a steering committee with a minimum of four and maximum of seven members, including a forum chair. The steering committee represents the best interests of the forum as a whole and undertakes work that is relevant to that speciality. This includes, but is not limited to:

- proposing Congress agenda items relevant to the forum and running Congress events
- developing national guidance
- working with the RCN Events team to run conferences/workshops/ roadshows
- attending meetings with relevant stakeholders and ensuring that their voice is heard
- lobbying to influence change that will benefit staff and patients.

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The following is a list of the RCN forums and networks:

- Advanced Nurse Practitioner Forum
- Bladder and Bowel Forum
- Cancer and Breast Care Forum
- Care Home Network
- Critical Care and Flight Nursing Forum
- Children and Young People: Acute Care Forum
- Children and Young People: Continuing and Community Care Forum
- Children and Young People: Professional Issues Forum
- Children and Young People: Specialist Care Forum
- Children and Young People: Staying Healthy Forum
- Defence Nursing Forum
- Diabetes Forum
- District and Community Nursing Forum
- Education Forum
- eHealth Forum
- Emergency Care Association
- ENT Maxillofacial Nursing Forum

- Fertility Nursing Forum
- Gastrointestinal Nursing Forum
- General Practice Nursing Forum
- History of Nursing Forum
- Learning Disability Nursing Forum
- Mental Health Forum
- Midwifery Forum
- Neuroscience Forum
- Nurses in Management and Leadership Forum
- Nursing in Justice and Forensic Health Care Forum
- Older People's Forum
- Ophthalmic Nursing Forum
- Pain and Palliative Care Forum
- Perioperative Forum
- Public Health Forum
- Research Society
- Rheumatology Nursing Forum
- Society of Orthopaedics and Trauma Nursing
- Women's Health Forum

There are also a number of networks in which members with similar nursing specialties and interests can come together to share their expertise. Unlike forums, networks do not have voting rights at RCN Congress. For details of RCN networks you can join, visit rcn.org.uk/forums

Newly qualified nurse network

This Facebook group was set up to allow you to have professional discussions relevant to your role and to enable you to network with other newly qualified nurses.

facebook.com/groups/RCNNewlyQualifiedNurseNetwork



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RCN branches

As a RCN member, you are automatically a member of your local branch and we encourage you to attend branch meetings. RCN branches are made up of RCN members in a geographical area. The branch organises RCN activities in the area and provides opportunities for you to meet and network with other activists. They also offer the opportunity to participate in and shape the work of the RCN.

Make sure you update your details with the RCN to ensure you have access to the correct branch. To find out about your local branch visit: rcn.org.uk/get-involved/countries-and-regions

RCN representatives

You can become more involved with the work of the RCN by becoming an RCN representative. This could give you the chance to make a real difference to your patients, the working lives of yourself and your colleagues – and even the future of nursing. See chapter 4 for further information or visit:

rcn.org.uk/become-a-rep rcn.org.uk/library/subject-guides/rcn-reps

RCN Congress

RCN Congress is the most important event of its type in the nursing calendar. It is where nursing staff meet to learn, develop and share nursing practice, and to influence nursing and health care policy.

Congress is free to attend, however you will need to consider the cost of your travel and accommodation.



Member debates

Each year Congress debates around 25 subjects, submitted by members, covering clinical, staffing, financial, social and political areas. These issues are often reported in the media direct from Congress, and they lead to wide-ranging work carried out by the RCN, often lasting for many years. The whole process is led by the Congress agenda committee.

Any RCN member is entitled to contribute to debates in the hall.

There are two types of debate:

- **resolutions** RCN members vote on resolutions and a majority vote directs the future work of the RCN
- matter for discussion these allow members to explore issues and share views, but no vote is called.

There will also be debates on emergency agenda items. These items can be submitted at any point up to and during Congress, and reflect the most pressing professional and political issues.

Each RCN branch and forum is allocated a certain number of votes, depending on their size. This helps to ensure that the whole RCN membership is represented in the vote.

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Keynote speakers

We invite health professionals, politicians, campaigners and other influential speakers to address Congress each year. These are often announced in the days and weeks leading up to Congress, and are always a highlight of the week.

Fringe events

There are a selection of seminars to choose from – these are a great opportunity for personal and professional development, and can count towards NMC revalidation requirements. Other events are tailored specifically for nursing support workers or students. These are in smaller rooms, last around 45 minutes and cover a broad range of specialist areas of practice, workplace issues, health and wellbeing and networking. They give you the chance to share knowledge and innovations.

Exhibition

The exhibition at Congress is the largest, most comprehensive exhibition of its type, where you'll be able to meet employers, universities, recruitment agencies and health care providers. You'll get to see many of the latest innovations relating to your workplace.

Social events

Congress also features a number of networking and social events for all delegates.

For further information, visit rcn.org.uk/congress

For details of other RCN conferences and events, please turn to page 124 or visit rcn.org.uk/events

RCN campaigns

As the voice of nursing across the United Kingdom, we do all we can to safeguard your interests. Our work together includes:

- lobbying and influencing governments and other bodies on a range of issues, ensuring that your voice is heard where it counts
- raising awareness of a number of health-related and clinical topics, which puts your health and wellbeing front and centre, whilst ensuring you have the most up-to-date information to care for patients.

As a member, we need you to get involved in campaigns to promote nursing, champion top-quality care and fight harmful cuts.

The Staffing for Safe and Effective Care campaigns across the UK involve lobbying governments and other bodies:



Staffing is the single most important issue for RCN members: there should be enough staff to enable you to deliver the care you have been trained to provide. Progress has been made in Wales and Scotland where staffing legislation now exists. We are campaigning for similar legislation in England. The situation in Northern Ireland is compounded with nurses' pay having fallen behind the rest of the UK. Our message is getting through, but we need you to continue to support this vital work.

Fund Our Future

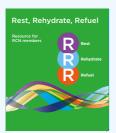
Nursing students are unique. Their courses are longer than most other degrees and on top of their studies, they spend additional time on clinical placements working all hours of the day and night. Many students struggle financially because they don't have time to work to support themselves. The government must fix this. We're calling on the government to provide full tuition fee support and maintenance grants, which cover the true cost of living for all nursing students in England.

120 6. Get involved

The following campaigns aim to improve working environments and provide you with up-to-date information to take care of yourself, as well as your patients.



The RCN defines healthy workplaces as those that offer fair pay and rewards, and promote a good work-life balance. *Healthy Workplace, Healthy You* is supporting employers and RCN representatives to improve working environments and the wellbeing of nursing staff.



As part of the *Healthy Workplace*, *Healthy You* campaign, we're encouraging health and social care managers to ensure staff are taking their at-work breaks; are well hydrated and have access to nutritional food. We're also encouraging nursing staff to focus on self-care and assert their right to a break.



Each winter we call on RCN members to beat the flu by getting vaccinated. The campaign offers a range of materials to help you promote the benefits of the flu vaccine, as well as up-to-date information on the vaccine and how to administer it.



The RCN promotes equality of opportunity for lesbian, gay, bisexual and trans (LGBT) staff, and champions equality, diversity, human rights and inclusion in the health and social care sector.

As an RCN member you can work with us to create positive change for the nursing profession; improve conditions in your workplace and help raise awareness of our campaigns. Find out how you can take action today at rcn.org.uk/get-involved/campaigns

Equality and inclusion

As a nurse, understanding your responsibilities in promoting inclusion and implementing equality of opportunity is important, not just to ensure that you keep within *The Code* (NMC 2018), but it is critical to your colleagues and to your patients too.

The RCN's corporate equality and inclusion strategy highlights five key areas for action for us all.

1. Challenge and change

This means that we are all responsible for calling attention to poor and discriminatory behaviour in nursing and holding ourselves and others to account.

2. Connect and communicate

As a nurse you'll connect and communicate with a diverse range of colleagues, clients and patients. Have you thought about how you do that and whether or not your skills could improve in this area?

3. Equip and inform

Your continuing professional development isn't simply confined to your clinical skills. Equipping yourself with information about your patients and their cultural practices is important in delivering holistic patient care.

4. Identity and intersectionality

Everybody has an age, an ethnicity or national origin, a sexual orientation and gender identity, which may include identifying a non-binary. How these elements interact to shape our dignity and experiences in the workplace and as patients is often dependent in their intersection and interaction over time. Remembering that we are all complex human beings who deserve dignity and respect is fundamental to nursing practice.

5. Inspire and activate

Get involved in your local branch and networks, be inspired by campaigns and movements that seek to promote social justice.

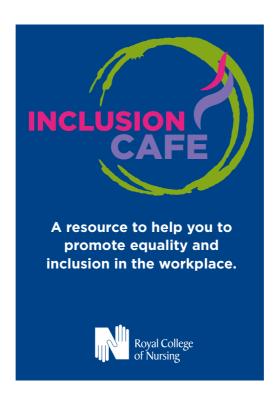
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Task

Download the RCN Inclusion Café booklet to learn more about workplace incivility and boost your knowledge of the protections that you have against facing discrimination in the workplace.

rcn.org.uk/inclusion-cafe



RCN conferences, courses, events and magazines

Conferences, courses and events

Each year we organise a UK-wide programme of professional conferences, courses and events. As well as helping you to meet your NMC revalidation or continuing professional development requirements, these keep you up to date and enable you to network with colleagues. Events are available at a member-discounted rate. Any income generated from events supports the work of the College. Some events are free to members.

RCN Events also offers some digital event content on **renevents.tv**. As we grow, this platform will host selected pre-recorded event content and webinars, as well as facilitate the live streaming of events. The intention is to create a repository of 24/7 accessible event-related CPD and learning.

rcn.org.uk/events

RCN magazines

The RCN's member magazines are a great way to stay up-to-date with what's happening across the organisation, as well as with wider nursing issues. Find out about campaigns the RCN is working on and how you can get involved, what events might be coming up in your area, and the most recent nursing news.

RCN magazines are about our members, for our members. Through reading about the work of your nursing colleagues, you will find inspiration, support and advice, and stay at the forefront of your specialty.

You can also get involved by sharing your stories with the RCN magazines team. Why not write a column on a nursing subject you feel passionate about, or share your insight into your area of nursing practice?

124 6. Get involved

As a newly qualified nurse, the highs, lows and learning you experience as you navigate your first working year will be especially invaluable to nursing students approaching registration.

Contact bulletin@rcn.org.uk for more information, guidance and to submit story suggestions. Visit rcn.org.uk/magazines to explore all the magazines' online features, including content specifically for newly qualified nurses such as:

Terrified of being newly qualified?



We asked four newly qualified nurses (NQNs) from across the different disciplines to answer questions about their own experience of transitioning from student to NQN.

rcn.org.uk/terrified-of-being-newly-qualified

Members of the RCN are eligible for discounted rates on specialist publications produced by RCNi, including the UK's best-selling nursing journal, *Nursing Standard*.



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For employment or legal queries, please visit **rcn.org.uk/get-help** or call **0345** 77**26** 100 (option 2). This service is available between 8.30am-8.30pm, seven days a week, 365 days a year.

If you are calling from overseas, please dial **00** 44 **20** 7647 3456.

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