MISSING!
TENS OF THOUSANDS OF NURSING STAFF

SAFE STAFFING CAMPAIGN SPECIAL ISSUE

RCN.ORG.UK/BULLETIN
It's time for action

What are we doing?
We’re campaigning for laws to ensure safe staffing in all four countries of the UK, and for these laws to make a real difference to nursing staff. Our campaigning differs in each country as each is at a different stage. But we want to ensure we have the right number of nurses with the right skills in the right places to provide safe and effective care in all health care settings across the UK.

Why are we doing it?
We surveyed 30,000 members and found that...

- **Shifts are understaffed**
  55% said shifts fell short of planned levels for registered nurses.

- **Care is being compromised**
  53% said care was compromised on their last shift due to the shortfall of nursing staff.

- **Members feel demoralised**
  53% felt sad or upset that they couldn’t provide the level of care they wanted.

- **Concerns are being ignored**
  44% said no action was taken when they raised concerns about staffing levels.

- **Staff health is suffering**
  59% said they didn’t get to take sufficient breaks on their last shift.

I drive home from work sobbing today, knowing the patients I cared for didn’t get a fraction of the level of care I would consider acceptable.

I love being a nurse but the demands placed on us are unsafe.

What do we want?

- **Numbers**
  We want the right number of nurses, with the right skills, to be in the right place, at the right time so patients’ needs are met.

- **Accountability**
  We want it to be clear whose job it is to make sure there are enough nurses to meet patients’ needs.

- **Strategy**
  We want a vision for tackling nurse shortages and making sure nursing helps meet the whole of the UK’s health needs.

- **Plans**
  We want clear plans for getting the right numbers and skill mix of nursing staff and we want checks to make sure they really happen.

- **Education**
  We want governments to educate enough nursing students, and develop existing staff, to meet patients’ needs.

What can you do?

Get involved, talk to others, share your experience and make noise on social media. This is your campaign. Join the conversation and help us push for real change. Visit rcn.org.uk/safestaffing or tweet @theRCN @RCNScot @RCN_NI @RCNWales

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We can force change if we campaign together

Donna urges members to help safeguard the future of nursing by joining our fight for safe staffing

As a nurse, the most important thing to me is being able to deliver the care that is needed by my patients. That’s why my number one priority is to put an end to the nursing workforce crisis by getting meaningful investment to meet the needs of patients in every part of the UK.

I will not stop until there is system-wide legislative accountability for the desperate nursing shortages each and every one of us has witnessed. This starts with ensuring the UK health secretary has a specific responsibility for the adequate supply of nursing staff.

Nurses have for too long witnessed politicians presiding over investment cuts to the profession, so that we are unable to recruit or attract enough nursing students, while parading up and down the country claiming to champion patient safety.

Ministers and employers need to change the way they think. Rather than just looking at the cost of educating and employing nurses and support workers, they must think about the true cost – to people’s lives – of not investing in our profession.

Those with power, money and authority to change this are too often found unwilling, all too happy to let the individual take the blame for failings that are genuinely systemic.

We have to stop this.

Each country is in a different place on this journey. Earlier this year, a safe staffing law was passed in Scotland that applies to both health and social care settings. We had huge influence in shaping that law, and will be working hard to make sure it delivers what frontline staff need it to.

In Wales, where a law has been in place for three years, we have safe staffing champions in each health board supporting managers to enact what it says, and we’re campaigning to get it extended to more health care settings.

In Northern Ireland, our campaign for safe nurse staffing is uniquely challenging. The political impasse is making nursing pay negotiations extremely difficult. It is forcing staff to leave and exacerbating severe nurse shortages. We’re weighing up whether industrial action is the only option left to get the change we need to safeguard care.

In England, we must ramp up our campaigning efforts. While politicians have been distracted by Brexit, registered nurse vacancies have reached crisis point. There are now 40,000 in the NHS alone, and patients, as well as staff, are continuing to suffer.

Though we’re making headway with our calls for better student funding in England, we must not ease up the pressure. Our safe staffing campaign has never been so crucial. The stakes are high, but so is our determination. We must come together to force change. You can help save patients’ lives, and help save our vital profession, by campaigning with us for safe nurse staffing.

Dame Donna Kinnair, RCN Chief Executive & General Secretary

With special thanks...

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Editor: Kim Scott
Illustrator: Jenny Robins
Graphic designer: Fern Bale
Email: bulletin@rcn.org.uk
Web: rcn.org.uk/bulletin
Address: 20 Cavendish Square, London W1G 0RN
Nurse recruitment advertising
Tel: 020 8423 1333
Email: advertising@rcni.com

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Let’s make some noise

We have the power to pressure the government into tackling unsafe staffing levels in England. No law exists and nobody is accountable for making sure there are enough nurses. Only with your help can we break the cycle of staff stretched to the limit and compromised care.

Our safe staffing campaign in England is being designed like no other campaign we’ve run before. Members are not just the foot soldiers but the campaign’s designers and strategists. They’re leading the charge locally and planning activities to make maximum impact.

Members you elected to RCN Council have made safe staffing their top priority and recently gave the green light to new campaign ideas to be unveiled later this summer. From ward walks and workplace meetings, to press appearances and town takeovers, this campaign is about building strength in numbers and piling pressure on the government to tackle the problem of severe nurse shortages in all publicly-funded services. This includes the independent sector, care homes, prisons, community, mental health, learning disability and children’s services.

Student nurse Jess is helping direct the campaign in the South East. She recently organised a workshop at the University of Southampton, bringing students from across the region together to learn about nursing workforce research, and get their ideas for how to empower people to take action. “The students were so fired up afterwards,” she says. “They’re so keen to support the campaign, but they need quick, simple things they can do, without having to commit huge amounts of time. The RCN Students Committee is now planning a series of 30-day challenges for student members, and anyone else who wants to join in. The first will be for them to get at least 10 friends or family members to sign up to be safe staffing e-campaigners.”

Over in Norwich, the plan is to hold a high-profile press stunt at the cathedral, which is the final resting place of wartime nurse heroine Edith Cavell. “We want to hold a candlelit vigil to bring together members, patients and the public,” says emergency nurse Natalie. “We did this before during our pay campaign, and it really caught the imagination of local people. Whenever I speak to the public about nurse staffing issues they’re shocked to hear there is no law or anybody accountable for staffing numbers. They say they’ll support us to change this.”

Our campaign in England won’t be won unless it’s backed by thousands. We need to raise the alarm. Staffing levels have reached crisis point and patient care is under threat. We must take action now to prevent this crisis turning into a catastrophe. Each small action can make a big difference.

Patricia Marquis, RCN England Director, @RCNEnglandDir

Our four-step campaign plan

1. Empower RCN members to...
2. Activate communities to...
3. Encourage the public to...
4. Short staffing is recognised as a NATIONAL CRISIS

The government is forced to act. We have proper workforce planning and a law to ensure accountability for safe nurse staffing.
A little effort can go a long way
It doesn’t take much to add your voice to our campaign. Whether you have five minutes, 15 minutes or an hour, there is something everyone can do to spread the word.

5 minutes: Find out who your MP is and tweet or email them about the importance of safe staffing.

15 minutes: Chat to your workmates, family and friends about the RCN’s campaign and encourage them to sign up as e-campaigners.

1 hour: Arrange a staff meeting to discuss how you could collectively support the campaign.

What do we want a new law to do?
There are 40,000 nurse vacancies in the NHS in England, and thousands more across public health, social care and the independent sector. No one person or organisation is accountable for staffing levels and there is no legislation on this. This has to change.

We’re campaigning to get accountability for safe staffing written into English law. It means having a legal framework that clarifies roles, responsibilities, and accountability for the supply, recruitment, retention and pay of nursing staff. We want:

• the secretary of state for health and social care to have a specific legal duty to ensure there are enough nursing staff to meet the health and care needs of the population

• national NHS bodies to have a legal duty for workforce planning so that they know how many nurses are needed to deliver health care services

• commissioners to have a legal duty to understand local care needs and plan staffing to meet these needs

• providers to have a legal duty to deliver safe and effective services.

Getting our voices heard in parliament
We hosted an event in parliament recently so members could tell MPs how urgently we need to tackle the nursing workforce crisis. More than 100 politicians turned up to hear what we had to say.

Student nurse Siobhann went along. She said: “Making do isn’t good enough anymore. I’ve been used as an extra pair of hands on placements because there simply aren’t enough nursing staff. I don’t mind that but it means I’ve lost learning opportunities because I’ve been helping with patients. It’s what I want to do but I also need to learn to be a nurse.”

Clive Lewis, MP for Norwich South, went to the event and spoke to Siobhann. He said: “The thing that’s resonated with me is that there is no responsibility when it comes to senior members of the government and that’s wrong. We need to be able to say who’s responsible and who the buck stops with. Clearly, right now, we can’t answer. That has to change.”

We’re chipping away
Our campaign is already ruffling feathers in the corridors of power. Over the past few months, with your help, we’ve managed to:

• send 300 tweets to new Prime Minister Boris Johnson about the importance of safe staffing to patient care

• secure a debate in parliament about the need for accountability for the supply of nursing staff

• get the health secretary to say they’ll consider a law for safe staffing

• send 10,000 emails about legislative changes needed to deliver the NHS Long Term Plan.

Become an e-campaigner
Signing up to become on e-campaigner is the quickest and simplest way to do your bit. You’ll get a monthly email with campaign updates and a quick and easy online action to take. Sign up at rcn.org.uk/safestaffing/england

Watch this space!
We’ve been testing campaign adverts to see what strikes a chord with the public. In the coming months we’ll be launching an awareness campaign to get their support for our fight for safe staffing. Keep your eyes and ears peeled to find out which winning advert will be rolled out.
A class act

RCN members in Scotland made a massive contribution to shaping new safe staffing legislation. Here’s what the law means and what’s left to do ahead of implementation.

What will the new legislation do?

The Health and Care (Staffing) (Scotland) Act, passed by the Scottish parliament on 2 May and given Royal Assent on 6 June, sets out the process for decision making on safe staffing and is clear about who is accountable for providing the right numbers of staff, with the right skills, to provide safe and effective care. It also recognises the need to listen to nurse leaders and their professional judgement.

The legislation is hugely significant. But there’s much to do over the coming months. We’ll be helping the Scottish government develop guidance and a plan for implementing the new act.

How did the RCN influence the legislation?

Scotland’s First Minister Nicola Sturgeon committed to a law on safe staffing at RCN Congress in 2016. Members and RCN staff then worked hard to influence the draft legislation. As the bill took shape, we submitted two consultation responses and after the bill was published in May last year, we worked on building a coalition of support across all political parties.

Our Ask for More campaign was launched last September and explained the changes required for the bill to make a real difference. There was extensive media coverage, widespread advertising and lots of social media activity. We took the campaign out onto the streets and more than 5,000 people signed up in support.

As the bill passed through the Scottish parliament, members and staff gave evidence and briefed MSPs.

Ahead of the crucial final vote, 3,330 emails were sent by members and the public as part of our “Email your MSP” action. When the bill was passed on 2 May, it included 85% of what the RCN wanted.

How members made a difference

Andy Notman, RCN steward, safety rep and a member of the RCN Scotland Board, is a clinical nurse manager in forensic mental health.

“Inadequate staffing impacts on our patients because we can’t provide what we want to. You can only deal with a range of basic safety needs,” Andy says. If staff numbers are insufficient, all the things that may improve a patient’s life and their experience of being in hospital have to be put on hold. As a result, recovery may be delayed, he suggests.

Aurelia
Julie Lamberth, Vice Chair of the RCN Scotland Board, helped raise awareness of the safe staffing campaign among colleagues and the public.

“We had information stands in the hospital dining room and we chatted with the public in Glasgow’s St Enoch shopping centre on a Saturday morning. We asked them to sign up to the RCN Ask for More campaign. I’d never done anything like that before and most people were definitely saying yes, we need more nurses. We got a good response.

“I’ve been a nurse for 24 years and I’m very passionate about making things happen. There’s no point continuing to say we’re short staffed but not wanting to do anything about it.

“I went to the Scottish parliament on the day the bill went through and it was just amazing to be there. I don’t think members realise the influence the RCN has.”

What happens next?

Theresa explains what the RCN will do now to influence safe staffing

Scotland now has safe staffing legislation – a significant achievement that members should be proud of. The changes made to the Health and Care (Staffing) (Scotland) Act as a direct result of members campaigning are substantial. Those changes should not be underestimated in terms of the impact the legislation will have.

While our members and staff worked tirelessly to influence the act, our work is by no means done.

We will continue to lobby the Scottish government to increase student places and to ensure students have the financial support they need to complete their education.

We will be pushing for additional resources for key disciplines, such as district nursing, and we will be supporting registered nurses and health care support workers across Scotland’s NHS and care homes to speak up about the challenges they face in providing safe and effective care.

We will champion the role of senior charge nurses and other nursing leaders to ensure they get the time and resources the act promises for them and their teams. And we will continue to influence and shape the guidance and secondary legislation required to support implementation of the new law.

However, the act alone will not deliver the workforce needed to address staffing challenges across health and social care. Scotland needs a fully-funded integrated plan that sets out a long-term strategic approach to growing the workforce and redesigning services.

Theresa Fyffe, RCN Scotland Director

Implementing the act

The passing of the safe staffing act is a first step and its implementation is probably still 12 to 18 months away, although the Scottish government is yet to confirm this. Now it’s time to develop guidelines and other laws to support implementation. Getting the guidance right will be essential if the law is going to make a real difference for patients, care home residents and staff.

Nine areas where guidance will be developed have been outlined. These are wide-ranging and cover subjects such as staffing tools; allowing sufficient time for clinical leaders’ responsibilities; and the processes by which health boards and ministers will report on how they have carried out their duties under the act.

Timelines for producing the guidance are currently being developed by the Scottish government. RCN Scotland is helping to shape this work and we’ll be engaging with members across health and social care to ensure their views are represented. In particular, we want to make sure the full implications of the guidance and its day-to-day impact on service delivery are considered.
‘Nurses feel exploited and can take no more’

Without a fair pay deal, Northern Ireland will continue to haemorrhage nursing staff and patient safety will be further compromised.

Pay talks between unions, the Department of Health and employers in Northern Ireland were due to conclude at the end of June but have now been extended into the summer months.

In February, nursing staff in Northern Ireland received a small pay increase for 2018-2019, but salaries continue to lag significantly behind the rest of the UK.

A newly-qualified registered nurse earns £1,419 less each year than in England and Wales, and £1,875 less than in Scotland. This is a major contributing factor to the number of vacancies in the country, which in turn has an impact on patient care.

And it is getting worse. Recent figures from the Department of Health in Northern Ireland showed an increase in nurse vacancies within the Health and Social Care service (HSC) over the last year of more than 20%. The total nursing vacancy rate within the HSC is around 12%.

Some staff are leaving to work in other countries where they can earn a higher salary, while others are leaving the profession entirely due to the demands and pressures of working in an environment with too few staff.

In response to this, the RCN is considering balloting members for industrial action, including strike action, in what would be a historic decision for the organisation and its members.

“No one really wants to strike and it’s not something any nurse would do lightly,” says RCN Council Member for Northern Ireland Ann Marie O’Neill. “But things have gone too far and people simply can’t keep working like this. Nursing staff have been undervalued for too long and now we’ve reached crisis point.”

Fiona Devlin, Chair of the RCN Northern Ireland Board, says: “It will be a sad day if we do decide to ballot for industrial action inclusive of strike, however we now believe we’ve been left with little alternative. We must see change. If we don’t do something as a nursing profession, we’re going to let patients down and we’ll ultimately end up in a worse situation.”

Following a series of member and public events, the RCN Northern Ireland Board held an extraordinary meeting on 29 July to evaluate the current situation. For the latest updates visit rcn.org.uk/safestaffing/ni

Want to get involved?

- Follow @RCN_NI on Twitter to keep up with developments
- Share your story and help get the message out there: rcn.org.uk/safestaffing/ni
- Make sure your postal details are up to date at rcn.org.uk/myrcn

Safe staffing framework

The RCN has been involved in the development of Delivering Care: Nurse Staffing Levels in Northern Ireland, a policy framework for safe nurse staffing created in 2014. The framework identifies what the profession believes are the correct number of nurses required to deliver safe care across nine clinical settings. To date, only phase one (acute medicine and surgery) has been funded and implemented by the Department of Health. Work on phases two to eight is ongoing.

The identification of safe staffing ranges within this framework has further highlighted the significant issues with the supply and retention of nurses within Northern Ireland’s Health and Social Care service.
**Safer staff and safer patients**

After campaigning for almost 10 years, RCN members in Wales helped secure the first law in Europe for safe and effective nurse staffing. The Nurse Staffing Levels (Wales) Act became law in March 2016. Safe staffing champion Rhian Wright explains how it’s having an impact on the frontline.

**What does your safe staffing champion role involve?**

I raise awareness of the act when talking to members and ward managers. As I walk through the hospital I check the safe staffing figures are displayed on the wards. I had one manager tell me they had taken theirs down and they were planning to replace it. This is not good enough. I explained to the manager that it’s a legal requirement to display this information at all times.

**How does the legislation work?**

In adult acute medical and surgical wards an appropriate safe nurse staffing level must be calculated and maintained. The Welsh government has issued guidance on how to determine this using an acuity tool. Health boards have a duty to report on compliance and take action if there are vast failings.

**What do you do when the safe staffing numbers aren’t right?**

I have a supportive, rather than confrontational, role and recognise that we have a national shortage of nursing staff. I know we can’t just make staff magically appear but I insist we take reasonable steps if there aren’t enough staff on a ward.

**What does ‘reasonable steps’ mean?**

For example, if a ward is short of staff and they’re only recruiting bank staff from their ward, they could do much more. The act has given the RCN more leverage to request action.

**What do you do if a member tells you safe staffing isn’t in place?**

I speak to managers and try to establish the reasons for lower staffing levels. I then follow this up with the RCN Wales office if needed.

Rhian is a voluntary safe staffing champion in Cardiff and Vale University Health Board. The RCN has safe staffing champions in each health board in Wales.

Want to get involved?

Help spread the message about the importance of safe staffing by putting up a poster in your workplace. Download the poster, in Welsh or English, from [rcn.org.uk/safestaffing/wales](http://rcn.org.uk/safestaffing/wales)

Moira Davies, RCN Welsh Board Member

‘We’re ahead of the game, but there’s still a lot to do’

Moira says members’ support is crucial to our continued campaigning:

We’re thrilled that we have legislation in place but we’re not resting on our laurels. We’re now monitoring how the act is being implemented and we’re ready to take action where necessary.

But that’s not all. We want to see the act extended into other health care areas including mental health, children’s care, and in the community. Please get involved. There’s plenty of lobbying and influencing work on the horizon and you can make a difference. Even if you can only spare a few minutes to send a postcard to your local AM or feedback your experiences to the RCN team, remember the impact we’ve already made and think about what you can do for your patients and colleagues in the future.

Every small action helps build a stronger and safer workforce.

Moira Davies, RCN Welsh Board Member
Investing in our future workforce

The number of nursing degree applicants in England has fallen 29% since the bursary was axed. We need urgent investment to reverse the trend. Join our campaign to fund our future nurses

Securing a steady supply of nurses is essential to safe staffing. But how will this be possible when incentives to study nursing are at an all-time low in England, where NHS nurse vacancies stand at 40,000?

In 2016, the UK government removed the student bursary in England, which paid tuition fees in full. They said this would increase the number of degree places with more people able to study nursing, but figures released by UCAS reveal the number of student nursing applicants in England has fallen 29% since then. The reforms have failed.

Student nurses are unique, and need unique financial support. Completing around 1,000 more hours during their degree than an average student, with placements and academic work to balance, it’s difficult for them to work to supplement their income.

Not only is the financial burden of undertaking a degree in nursing failing to attract new students, it’s causing many to quit their courses. Figures released by The Health Foundation last September revealed that as many as one in four nursing students in the UK didn’t complete their degree.

So the #FundOurFuture campaign is demanding that the government looks again at how it supports nursing students in England.

We’re calling for a minimum of £1bn a year to be invested in nursing higher education in England to financially support students and encourage more people to study nursing.

Kelly Hitchcock from the RCN Students Committee says: “The time for action is now. Nursing students face unparalleled pressures, only heightened by financial strain. Without improved support the profession faces an uncertain future.

“The campaign has already made waves. More than 3,000 members have contacted their MP and, after we descended on parliament to lobby MPs last year, Health Minister Stephen Hammond publicly committed to work with the RCN on funding models for nursing students.

“But there is still a long way to go. We urge all our student members to make sure their voices are heard and campaign for a future in which nursing students have proper financial support.”

Four students from my cohort, who I know would have been amazing nurses, have already had to drop out

Campaign highlights
• Student nurses descend on Westminster to lobby MPs.
• Health Minister Stephen Hammond publicly pledges to work with the RCN on student funding.
• Record numbers of students attend RCN Congress and call for parity in student funding across the UK.
• NHS England Chief Executive Simon Stevens says the student bursary debate is “back in play”.

Want to get involved?
Show your support for funding our future nurses by joining our campaign at rcn.eaction.org.uk/fundourfuture

Around the UK
Students in Scotland, Wales and Northern Ireland continue to receive bursaries although they’re not all guaranteed to continue.

In Scotland, RCN campaigning led to the Scottish government announcing it would increase the bursary amount, reaching £16,000 per year by 2020.

Across the UK, the RCN supports students with advice on funding, money, accommodation and placements as well as the search for that first nursing job.
Persuading politicians about the need for more nursing staff

Student nurse Amy shares her top tips for meeting and influencing your elected representative

Speaking to an elected representative, like an MP, MSP, AM or MLA, is one of the best ways to get your voice heard by those in government across the four countries of the UK.

Elected representatives have a responsibility to listen to their constituents’ views and you can contact them directly about issues you feel are important.

Political influencing is key to any campaign but it’s also a great way to raise local issues or concerns with someone who can influence change. The following tips will help you begin to build a relationship with your elected representative, wherever you live in the UK.

Make initial contact

You can contact your elected representative by email or letter and request a meeting. Make sure you include your own address and postcode because they are only required to respond to people who live within their constituency. Your local RCN office can signpost you to templates if you need help. Explain how the issue you want to discuss affects you and your local community, and how you’d like your elected representative to support you.

Don’t be afraid to follow up

If you don’t receive a reply, don’t be afraid to follow it up with a phone call to the constituency office. You might also be able to contact your elected representative on social media.

Remember politicians are people too

Try to remember that elected representatives are human and some of the experiences they’ve had might be similar to your own. Even if that isn’t the case, they should be able to empathise with you. They may even have health care workers in their family or friendship groups.

Be prepared and use your own experiences

When you meet your elected representative, be as prepared as possible. Consider what you want to say and do some research on them too. Remember, you’re the expert on your own experiences. Be yourself and use your own words.

Let your RCN office know

If you arrange a meeting with your elected representative, let your local RCN office know. They can support you if you want them to. Don’t forget to follow up your meeting with a thank you email or letter.

What else can I do?

If you don’t feel able to meet with your elected representative, that’s OK. There are other ways to get involved in political influencing. A lot of RCN campaigns use online tools which allow you to search for your elected representative by entering your postcode and send them a pre-populated message about a certain issue. Don’t underestimate the power of this – the more emails they receive, the more they’re likely to take notice.

Don’t forget...

The RCN isn’t affiliated to any political party so we need to work with those who champion our causes, and talk constructively with those who don’t agree with us.

Amy Fancourt is the student member of RCN Council
Evidence matters: the stark figures behind our safe staffing campaign

Professor Anne Marie Rafferty, RCN President, has been involved in two decades of vital nursing workforce research. She shares how the evidence could help us achieve safe staffing.

What does the research show?

There’s been a steady build-up of evidence over the past 20 years. More recently, we’ve shown that in acute care following common surgery, every one patient added to a registered nurse’s [RN’s] workload is associated with a 7% increase in deaths. And substituting one RN for one nursing support worker is associated with a 21% increase in chance of death. Meanwhile every 10% increase in the number of degree-educated RNs is associated with a 7% drop in patient mortality.

How do staffing levels affect nurse wellbeing and patient satisfaction?

We know that poor staffing leads to higher levels of burnout and job dissatisfaction among nurses. Poor staffing also leads to lower patient satisfaction levels. Patient satisfaction and nurse wellbeing then translate into patient outcomes in terms of overall mortality.

How does the mix of skills on nursing teams affect safe staffing?

We need a high concentration of RNs in hospitals. A balance of 70:30 [RNs to other nursing staff] is what the safe staffing tool originally came up with. But it also depends on how people are deployed and supported, and ultimately people do work in teams. As a researcher, I would say that the richer the RN mix, the better.

Would setting ratios of nursing staff to patients solve safe staffing?

I’m not sure we’ve debated it enough. If we look at some of the research on ratios, for example in California, it does seem to have provided enduring benefits. But I think this needs more scrutiny. We couldn’t move to ratios immediately. It could be a blunt tool, so we would need to figure out how it could work in practice.

How could systems of accountability help nursing staff?

Accountability enables different conversations around safe staffing – in boardrooms, in HR and finance departments and in governors’ meetings, not just among nurses. Introducing accountability can help make safe staffing a shared responsibility.

Why are education and career progression important?

I don’t think nursing education, career progression and safe staffing are connected within the system currently. We need all of those things to be designed to deliver a long-term plan for the nursing workforce, and if any arm of that tripod is rickety, then it will all fall apart. But the future is fixable. Policy makers can choose to support the nursing profession to flourish and we must put pressure on them to do so.

Why is research important?

It’s increasingly accepted in government circles that policy needs to be evidence-based. Research gives us a framework on which to make the argument for safe staffing. I don’t think anyone could disagree with the evidence we’ve been garnering for the last 20 years. What we need now is follow-up action.
Has short staffing become a safety risk where you work?

Nursing staff have an important part to play in reporting threats to safety. If you feel inadequate staffing is affecting patient care in your workplace, follow these steps, drawn from our publication Raising Concerns

Before you start

Knowing if a situation should be raised as a concern can be difficult. Ask yourself whether it has caused harm or distress, or, if you let it continue, is it likely to result in harm or distress? You don’t need hard evidence but your concern should be based on a reasonable belief which you can justify. The Nursing and Midwifery Council (NMC) Code is clear: you must “act without delay if you believe there is a risk to patient safety or public protection”.

Remember, too, that help is available. Raising concerns can be difficult and draining, but the RCN can support and advise you at every stage of the process.

Act early

Don’t wait for things to go wrong. If you feel you are being prevented from providing safe, compassionate care, read your local policy on raising concerns or whistleblowing and identify the person to speak to. You can raise issues verbally or in writing but make sure you’re clear about the nature of your concern.

Agency nurses should talk to the nurse in charge and their agency, while students should discuss safety concerns with their mentor first, then the nurse in charge.

Keep records

From the start, take notes and keep records. They may be useful for future reference.

Escalate

If you’re unable to talk to your line manager or your concerns are not adequately addressed, go to the next level of management. Alternatively, speak to your director of nursing or, in England, a local freedom to speak up guardian: tinyurl.com/cqc-speakup

Students who feel their concerns are not properly dealt with should contact their link lecturer who will speak to the nurse in charge.

Taking it further

If you’re still concerned, go to the chief executive or equivalent of your employing organisation – but ensure your director of nursing is aware you are taking this step.

Not satisfied?

If you’ve exhausted all local policies and procedures, or you feel unable to raise your concern internally, you should consider going outside your organisation. The government has produced a list of people and organisations to which you can make a disclosure: tinyurl.com/whistle-list. Going to the media should always be a last resort. And remember, there may be confidentiality issues or employer policies that apply when raising a concern externally so ask the RCN for guidance.

Caring for yourself

Most employers take concerns very seriously and you are protected in law from victimisation if you speak out. But even though you are right to raise concerns about threats to care – and are required to do so by the NMC – it takes courage and can be stressful.

RCN Member Support

Services offer confidential counselling to any member facing challenging emotional issues, whether work-related or personal. To make an appointment, call the RCN on 0345 772 6100 between 8.30am and 8.30pm, seven days a week.

Remember, the RCN is here for you at every step of the raising concerns process. Dial the number above or visit rcn.org.uk/raisingconcerns if you need support.
‘Let’s get this right for everyone’

Kevin explains why our safe staffing campaign is relevant to the whole nursing team.

This campaign highlights the importance of having the right numbers and skill mix of nursing staff. Nursing support workers play a crucial role in caring for patients and we’re a valuable part of the nursing team. Without a law for safe staffing, we’ll always struggle to provide the care we want to give, and that patients deserve. There’s also a danger we’ll be used to replace registered nurses to cover staff shortages.

As well as legislation, we want there to be a standardised method for assessing the skills mix of nursing teams. This would not only recognise the breadth of roles there are, but also protect patients and staff.

This campaign is about supporting all of us. There’s not just a shortage of registered nurses but a shortage of nursing support workers too. Let’s work together to get this right for everyone.

Kevin Morley, Northern representative on the RCN Nursing Support Workers Committee

Giant letters delivered

Members recently delivered three supersized letters to the Department of Health and Social Care demanding action on the nurse staffing crisis in England. The letters, signed by thousands who attended RCN Congress in Liverpool, call on the health secretary to follow the lead on safe staffing legislation set elsewhere in the UK.

Rebecca Stevens, who helped deliver the letters, says: “Safe staffing saves lives. If we have the right number of staff, we can deliver the care people need. There’s a lack of nursing staff right now and it’s difficult to recruit and retain. We can’t go on like this.”

Did you know?

The RCN has a research team which collects and analyses data on the nursing workforce across the UK. It brings together stats from different sources to create a big picture of what’s happening. It also conducts and commissions research where there are gaps in the evidence.

Its work includes tracking the number of nurses and nursing support workers in different settings, how many nursing vacancies there are, how many people are in nursing education and how many are leaving the profession and why.

The team identifies trends and potential risks as well as predicts changes in the nursing workforce. This helps our understanding of what’s happening in different health care settings and provides evidence to influence policy makers as part of our safe staffing campaign.

In the longer term, we want to gather extra data on the independent sector and build a more complete picture of the wider health care workforce. We also want to analyse stats on the changing patient population so we know what nursing staff will be needed in the future.

So far we know that Brexit is having a huge impact on the number of European nurses leaving the UK, and that a worrying number of nurses are quitting the profession midway through their careers.
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The Royal College of Nursing acts as an Introducer Appointed Representative to the Liverpool Victoria group of companies for General Insurance.

*To the nearest charge point. For Text Phone: first dial 18001. Mon–Fri 8am–8pm, Sat 9am–5pm, Sun 10am–4pm. Calls will be recorded.
We’re making sure our work is member led

Denise has a crucial role in overseeing the RCN’s campaign for safe staffing

As a registered nurse for nearly 40 years and someone passionate about safe and effective care, I’m delighted to be chairing the new UK Overview and Scrutiny Committee of the RCN safe staffing campaign.

We know safe staffing has a positive impact on patient care, and with the support and hard work of members, the campaign is driving real change. This work needs to continue so that safe staffing across the UK becomes statutory, not a privilege. The public, patients and nursing deserve that.

The committee will help deliver this complex but vital work. At our first meeting in June, committee members – passionate, committed and from all over the UK – discussed how we ensure all key campaign decisions are taken by RCN members locally. They know their communities, their politicians and who can help us achieve our aim.

The purpose of the committee is to provide assurance to RCN Council about the delivery of the campaign. We will be ensuring that the project takes account of the recommendations in the independent report into the RCN’s processes and communications around the NHS pay deal 2018.

We have made recommendations, especially in relation to the campaign’s key messages and communication with members. We have also recommended an additional key message about the incidence in our profession of suicide, sickness and mental ill-health, and staff being stretched to breaking point.

All of us on the committee recognise the importance of this work and feel privileged to serve the wider membership. We’ll update the RCN website after each meeting. Please keep in touch. Only by working together will we achieve our aims. Visit rcn.org.uk/safestaffing

Denise Llewellyn
MBE FRCN

Creating professional guidance

Bronagh says we need members’ expertise to expand upon nursing research

Though a wealth of evidence exists to support the call for safe staffing, we’re committed to adding to the weight of it. This would help policy makers realise how crucial it is to have laws that secure the right numbers of nursing staff to care safely and effectively for patients no matter how old they are, where they live, or in what setting they’re receiving care.

As your professional college, the RCN is keen to create professional guidance that you can rely on. Some already exists, and we plan to review that as part of our work. But we also want to seek your input to help us create UK-wide guidance for multiple care settings.

This could be used as a benchmark for what nursing services should look like and enable conversations about raising concerns where standards fall short. It’s a huge piece of work, but a vital one, and we’re excited about taking it forward in partnership with you. Watch this space for how you could get involved. Visit rcn.org.uk/safestaffing

Bronagh Scott, RCN Director of Nursing, Policy and Practice

Low staffing levels are causing members to jump ship

Our latest employment survey shows nearly 40% of members want a new job, and almost half of those say short staffing is the main reason why they’re looking elsewhere. Stress was a major reason for wanting to change jobs, as well as feeling undervalued.

More than 90% of members looking for a move because of staffing levels said they had worked when sick at least once in the last year. Nearly a third had done so at least five times. As well as stress, mental health issues and musculoskeletal problems were common among those looking for a new job.

If you want to move on from your current role, the RCN Careers Service can help. Visit rcn.org.uk/careers to see our range of free resources.

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Working hard to keep patients safe? We’ll help you keep your energy up.

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We require skilled individuals with a clinical or nursing background and a teaching qualification who can deliver clinical training topics to healthcare professionals in various settings.

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*The UK’s most experienced Live-in care provider*
There is a real will to do things differently and invest in staff from a wider pool.

Managers are keen to bring in people who may not have thought about neonatal care as a career pathway, such as midwives who fancy a career change or adult-trained nurses willing to use their transferable skills. As we become increasingly aware of the importance of caring for tiny minds, dual registered mental health and adult nurses are especially welcome.

**A special role**

So, what do neonatal services have to offer? It’s an opportunity to work in a tightly knit and appreciative multidisciplinary team. We offer a friendly welcome and support package, and opportunities for further training to equip you to work in this very specialist area.

The prevailing ethos in neonatal care is to integrate the infant’s family into the team. This minimises separation, promotes attachment and helps the family develop confidence. Getting to know the families is one of the best parts of the job, as is the knowledge that you have played a special part in the start of someone’s life.

To find out more about a career in neonatal services, visit tinyurl.com/rcn-neonatal-nursing or nna.org.uk

Doreen Crawford is a nurse adviser with Crawford McKenzie and a member of the RCN CYP Acute Care Forum.

Claire O’Mara is lead nurse and innovation lead for the east of England neonatal operational delivery network and chair of the Neonatal Nurses Association.
Are you a Children's or Neonatal Nurse looking for a better work-life balance?

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You will be treating children with a wide range of conditions including rare and orphan diseases, such as Lysosomal Storage Disorders and educating other children and their families on administering their medication to treat conditions like Juvenile Idiopathic Arthritis, Crohn’s disease, Psoriasis and Growth Hormone Deficiency. Your electronic feedback on care delivered and escalation when concerns are recognised, enable collaborative working with the NHS, ensuring the children’s full needs are met. Educating through play or observing a child in school receiving intravenous care is all part of a normal day.

Children's Homecare Nurse
Salary - Up to £29,247 • Vacancies - Nationwide

You will be a Registered Sick Children’s Nurse or Registered Nurse (Child) who is competent in the administration of IV therapies. This is an autonomous position and, so you will need to be able to work confidently and decisively without supervision. You also need to have strong communication skills, including actively listening, communicating sensitively and putting people at ease whilst making technical details easy to understand. Any additional skill required for the role, for example paediatric cannulation, or port access, are desirable skills, but we can up skill you at HAH if required.

As this is a regional role travelling to visit patients in their home setting, therefore it is crucial that you have a full UK driving licence.

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What delivering great healthcare should feel like.

This programme has been accredited by the RCN Centre for Professional Accreditation until 30th September 2019. Accreditation applies only to the educational content of the programme and does not apply to any product.
Paul Wood Ward, Royal Brompton Hospital, London

Sister/Charge Nurse

Job Ref: 312-RB-CA-6713
Salary: Band 7 £44,347 to £50,549 pa inc HCAS

Royal Brompton & Harefield NHS Foundation Trust is the largest heart and lung centre in the UK and among the largest in Europe. We are a partnership of two specialist hospitals which are known throughout the world for their expertise, standard of care and research success.

We’re looking for a highly motivated and dynamic individual, to lead our nursing team on Paul Wood Ward; a 31-bed cardiology ward, which cares for an extensive range of cardiology specialities.

You’ll have proven clinical and people management skills. You must also demonstrate critical thinking in the clinical decision-making process, whilst displaying professionalism and leadership at all times.

The Trust is at the forefront of academic and nursing excellence, providing an environment that is both challenging and rewarding. We’re also committed to supporting your personal growth and development through a variety of learning opportunity programmes.

For further information or to arrange an informal visit, please contact Susan Bunce, Deputy Matron on 0207 351 82475, email: s.bunce@rbht.nhs.uk

To apply, visit www.jobs.nhs.uk using Job Ref: 312-RB-CA-6713.

Closing date: 18 August 2019
DHU Health Care is a 'not-for-profit' CIC providing Urgent Care Services in Derbyshire, Leicestershire & Northamptonshire including Home Visiting, Community Nursing and Urgent Care Centres. DHU also provide the NHS 111 telephone service across the East Midlands.

We employ a range of GP’s, ANP’s, HCAs, Clinical Advisors & Dental Nurses. DHU believe that patients deserve good quality treatment in a caring and safe environment. Working in partnership with the NHS and other organisations, we are a leading provider of healthcare, with a well-established and quality portfolio of services. We are committed to providing the best possible patient care in the right way, by the right people, in the right place, at the right time to ultimately improve the health and wellbeing of our patients 24 hours a day, 365 days of the year.

Please contact us regarding our current opportunities:
HR: 0300 1000 410 (Option 2)/human.resources@dhuhealthcare.nhs.uk
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For further information or to apply please go to:
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Virtue operates and manages nursing homes on the southside of Dublin.
Our commitment is to enhance the quality of life for all our residents. We feel it is our vocation to ensure that residents feel valued and loved within their homes. Our strong family ethos is central to the creation of a supportive and nurturing environment that creates a strong sense of home for our residents.

We strive to promote an optimal quality of life for our residents through a progressive approach to clinical and social care. This approach includes a commitment to continually improve the service we provide.

APPLICATIONS:
We are currently inviting applications from suitably qualified and experienced individuals for the following positions within our Nursing Homes:

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Recruitment Open Day for Band 6 ODP/Anaesthetic Nurses

Saturday 3rd August between 09:00 & 13:00
SWLEOC Board Room, 3rd Floor Denbies Wing, Epsom General Hospital
£34,961 to £42,010 inc. HCAS

Pending funding approval for a state of the art 6th operating theatre, we are expanding our theatre team at SWLEOC. We are looking to recruit both experienced orthopaedic theatre practitioners in anaesthetics and surgery, and those that may be new to theatres, but who are enthusiastic and ready to develop new skills.

As a Centre of Excellence, we deliver 5,200 operations a year, of which 3000 are joints, mainly hip and knee replacements. SWLEOC is recognised as the largest joint replacement centre in the UK, and one of the largest in Europe. Other sub-specialities include soft tissue/sports injuries, foot and ankle, shoulders and spines.

You will have the opportunity to work alongside some of the regions most experienced orthopaedic consultants, covering a varied and diverse caseload. Training is available to allow you to broaden your experience, career development and opportunity for promotion is encouraged and supported.

We have vacancies for band 5 and 6 scrub nurses, band 6 ODP/anaesthetic nurses and band 6 dual role posts.

Free parking and refreshments available on the day.

Please bring along your CV / or submit an on-line application via NHS Jobs: Reference: 343-SWLEOC-OPEN-DAY-3-8

For enquiries please contact: Paula Cox, Matron for SWLEOC Theatres – email paula.cox8@nhs.net - Telephone: 01372 735 877/814

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A variety of needs, a choice of care

We have developed a new national rehabilitative service in mental health and are inviting applications for permanent positions as:

Mental Health Nurses

This is an exciting opportunity for an experienced and newly qualified Mental Health Nurse to play an integral and active role in a committed Multidisciplinary Team, supporting the development of our Specialised Mental Health Rehabilitation and Continuing Care Services.

What you will need:
- Be a Registered Mental Health Nurse (with Nursing & Midwifery Board of Ireland or with eligibility to register);
- Hold post registration nursing experience in adult, rehabilitation or community-based mental health services;
- Have established clinical experience or an interest in the areas of mental health rehabilitation, serious and enduring mental health conditions.

We will support you:
- By offering a competitive package inclusive of support for relocation and further professional development in a highly rewarding and caring environment.

Join Our Team Today!
To apply or for further information, please contact HR on +35314950021 or hr@bloomfield.ie

Closing date for applications is 9th August 2019
Bloomfield Health Services, Stocking Lane, Rathfarnham, Dublin 16, Ireland

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Reset your work life balance with a career in nursing at Devon Partnership NHS Trust

Relocation package up to £8k

Senior Staff Nurses Band 6 - Secure Services Directorate
£30,401 - £37,267 per annum pro rata

This is a great opportunity to join our nursing therapy team at one of the country’s most respected providers of secure mental health services. As a Senior Staff Nurse for the Secure Services Directorate you will be based at Langdon Hospital in Dawlish, an 111 acre campus-style site which includes the recently-opened Dewnans Centre, a £27 million state-of-the-art ‘medium secure’ unit, as well as a number of ‘low secure’ and open wards.

You will be a qualified RMN and will either hold, or be prepared to train in, qualifications including DBT, CBT and other recovery based therapies.

The CQC outstanding-rated hospital is located in the Devon Countryside, overlooking the Devon coast, with an onsite gym, patient-led café and free car parking.

For an informal chat please contact Julie Wilson on 01626 884553 / 01626 884673 or email julie.j.wilson@nhs.net

For further information or to apply for this role please go to: www.jobs.nhs.uk - Job reference: 369-A-19-42185-5

RMN – CLINICAL LEAD
Looe, Cornwall

Family run care home in Looe, Cornwall, which comprises a 50 bed General Nursing Unit and a 38 bed Mental Health community.

For further details please see our main advert in the General section of the careers pages

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We have a high calibre of speakers who are specialists in their field who will inform you of new and recent developments, which you will be able to apply to your vocation and revalidation.

The conference will be an invaluable platform for you to network with your fellow colleagues and to be a part of the discussion. You will leave the conference feeling informed, enlightened and with a new energy to engage with the challenges you face within your profession.

We welcome all those who work in women’s nursing from gynaecology ward nurses to practice and specialist nurses. We also welcome students and those newly practicing.

Planned topics include:

- Menstrual wellbeing
- Contraception at the extreme of ages
- Smashing the stigma around gynaecology cancers
- Trafficking and its impact on women
- Menopause and mental health
- Providing early pregnancy care in the community
- The role of the Nurse within paediatrics and adolescent gynaecology

For further information, to view the programme and to book, visit www.rcn.org.uk/WH19
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<td>£90 (inc of VAT)</td>
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<td></td>
<td>Fullfill your duty of care, refresh your safeguarding best practice, certificate valid for 3 years</td>
</tr>
<tr>
<td><strong>Breakaway Training</strong></td>
<td>(1 Day)</td>
<td>NEW!</td>
<td>£90 (inc of VAT)</td>
<td></td>
<td></td>
<td>Refresh common breakaway techniques, protect yourself from physical assault, break away from aggressive situations</td>
</tr>
<tr>
<td><strong>Clinical Record Keeping</strong></td>
<td>(½ Day)</td>
<td></td>
<td>£78 (inc of VAT)</td>
<td></td>
<td></td>
<td>Perfect your Clinical Record Keeping skills, avoid unnecessary negligence claims, best practice for clinical evidence</td>
</tr>
<tr>
<td><strong>Medication Administration</strong></td>
<td>(½ Day)</td>
<td></td>
<td>£78 (inc of VAT)</td>
<td></td>
<td></td>
<td>Deliver, store + dispose of medication safely, uphold user/patient dignity, includes relevant and up to date legislation</td>
</tr>
<tr>
<td><strong>People Moving &amp; Handling</strong></td>
<td>Train the Trainer – Level 3 (2 Day)</td>
<td></td>
<td>£474 (inc of VAT)</td>
<td></td>
<td></td>
<td>Train key staff to deliver moving + handling training, accredited by the Association of First Aiders, expert training materials provided</td>
</tr>
<tr>
<td><strong>Mental Health Awareness</strong></td>
<td>(1 Day)</td>
<td></td>
<td>£90 (inc of VAT)</td>
<td></td>
<td></td>
<td>Identify signs, triggers and effects of Mental Health, understand causes, symptoms + treatment, provide high standard of support for patients</td>
</tr>
<tr>
<td><strong>Dementia Awareness</strong></td>
<td>(1 Day)</td>
<td></td>
<td>£90 (inc of VAT)</td>
<td></td>
<td></td>
<td>Expand your existing knowledge of Dementia, reinforce confidence when caring for Dementia patients, refresh dementia care best practice</td>
</tr>
</tbody>
</table>

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- Promoting mental health, preventing mental illness
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- Rights-based approaches to mental health.

Abstracts are considered for research projects (completed or in progress); education developments; practice initiatives and innovative, critical thinking.

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For further information and to book, visit [www.rcn.org.uk/mhnr19](http://www.rcn.org.uk/mhnr19)

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**Going Global: Safety... Let’s think beyond the patient**
Flight nursing workshop 2019

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- To support advanced clinical knowledge in relation to areas of practice where autonomy is supported.

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- Fatigue management
- Career development in flight nursing
- Safety in flight – a commercial airline perspective
- Natural disasters – mass evacuation case study

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