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ISSUE NO. 359 JANUARY 2018



BREAKING BOUNDARIES

WHY BEING DEAF HASN'T STOPPED HELEN

The RCN represents nurses and nursing, promotes excellence in practice and shapes health policies.

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New faces for 2018

Maria Trewern, née Nicholson, is the new Chair of RCN Council. Maria, a former chair of the RCN Buckinghamshire branch and an RCN South East Board member, became a nurse in 1977 and has extensive experience in the NHS and independent sector. She has also been an RCN steward, safety rep and a Congress Agenda Committee member. Council's new Vice Chair, Richard Jones, brings more than 40 years' experience in nursing and nursing education to his new role.

Changes to RCN Council are now in place, following recommendations made in the Council Review. To increase the involvement of members in RCN decision-making, two new Council committees, the professional nursing and trade union committees, started their work on 1 January. RCN Council is now smaller and is made up of one person from each country or region along with a student, a health care support worker, and the President, Deputy President and Chair of Congress.

Read more about Maria and her plans in the role on page 13.

Are you up to date?

We need members' correct details in case we need to consult you as part of negotiations over pay. Update your details at www.rcn.org.uk/myrcn or call 0345 7726 100.

Nurses honoured

Congratulations to former RCNi Nurse Awards student award finalist Neomi Bennett who was awarded a British Empire Medal for her services to nursing and health care in the New Year's Honours list. Neomi previously featured on the *Dragons' Den* programme with her invention the Neo Slip, used to help those with deep vein thrombosis.

She was one of 19 nurses, midwives and health care assistants on the honours list. Other RCN members acknowledged include Professor Hilary Chapman (DBE) and Rowena Jones (MBE).

RCN Chief Executive Janet Davies said: "Congratulations to all the nursing staff recognised for their hard work, dedication and success. They show that nursing is a profession to be proud of."

This year 10% of all honours recipients came from the health sector.

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Nursing is a profession to be proud of



Brexit breakthrough

The RCN has welcomed news that the rights of European Union (EU) health care staff working in the UK will be protected following a breakthrough in Brexit negotiations. There will be a simple process for health care workers who wish to remain in the UK, and those who already have the right to permanent residence will have a quick, free of charge way to convert to the new status. Reciprocal health care arrangements will continue to apply for UK nationals living in other EU countries and for EU nationals here too.



Pay around the UK

Months after their colleagues elsewhere in the UK, nurses and other health care staff in Northern Ireland have finally been awarded a 1% pay increase for 2017-18. The increase was originally announced last March and implemented across the rest of the UK from April 2017.

In a statement, the Northern Ireland Department of Health said staff could expect a backdated pay award “before the end of the financial year”, which could in effect be a full year late.

RCN Northern Ireland Director Janice Smyth said: “Nurses and other health staff are owed an apology by the department for the ways in which this pay award has been handled and the unnecessary waiting, uncertainty and financial detriment to which they have been subjected.”

Meanwhile, the Scottish Government is planning to offer nursing staff on lower grades a higher pay rise than more senior colleagues.

Finance Secretary Derek Mackay outlined proposals for a 3% increase in pay for public sector workers earning £30,000 or less, with a limit of 2% on pay increases for those earning more than £30,000. A cash cap of £1,600 would be applied to those earning £80,000 or more. He also committed to respecting the pay review body process in setting the final pay settlements for NHS staff in Scotland.

RCN Scotland Director Theresa Fyffe said: “This announcement will go some way to addressing the years of pay restraint, however, we have yet to see the detail on how this pay award will be funded. We also have to understand the implications of changes to income tax on members to be clear on the real benefit.”

Pay offer must ‘acknowledge sacrifices made by NHS staff’

The RCN has called for a ‘meaningful pay rise’ in its written evidence to the body responsible for deciding what increase NHS staff will receive this year



In its submission to the NHS Pay Review Body (PRB), the RCN has called for a pay rise in line with inflation plus an £800 flat rate increase for all staff on Agenda for Change contracts.

This is to begin to make up for lost earnings over the past seven years, during which time nursing pay has fallen 14% behind the cost of living.

The RCN has warned that pay restraint has left nursing staff feeling angry and demoralised, resulting in severe nursing shortages. Unless they are given a fair pay award, the exodus of staff will continue and nursing will become less and less attractive as a career, the College argued.

The official submission to the PRB draws on evidence from the RCN’s employment survey, which revealed 24% of nursing staff are thinking of leaving their job because of money worries.

This pressure is having a negative effect on patient care, with the survey also

showing nearly 80% of nursing staff feel that nursing levels where they work are too low to meet patient needs.

Any pay award should not be linked to productivity improvements, the RCN has said, stressing that it would be difficult for individual staff to be any more productive when so many are already working extra hours without pay.

RCN Chief Executive Janet Davies said: “The NHS has been running on the goodwill of nursing and other staff for far too long. This goodwill cannot last indefinitely, and we look to the pay review body to make a recommendation which both acknowledges the sacrifices made by NHS staff and the economic necessity of a meaningful pay rise.

“With more than 40,000 nursing posts currently vacant across the UK, the NHS cannot afford to haemorrhage any more nursing staff.”

www.rcn.org.uk/closethegap

4 DOING THE ROUNDS

Celebrate the best in nursing

The annual search for Britain's nursing heroes has begun. By nominating someone for an RCNi Nurse Award members have a chance to celebrate the inspirational achievements of nursing staff from all over the UK.

Now in their 31st year, the awards identify and celebrate nurses who go above and beyond to save lives, provide outstanding care for patients and transform nursing practice for the better.

The RCNi Nurse Awards recognise a wide range of specialties, spanning 14 categories, from student nurses to specialist mental health nurses, health care assistants and assistant practitioners to nursing managers.

RCN member Dorcas Gwata, winner of the RCNi Mental Health Nurse Award 2015, has pioneered mental health initiatives to address the rising number of youths involved in gang violence and crime.



Winning her award further motivated Dorcas and gave her the confidence to go on to do bigger projects, helping more youngsters and their families.

"I would urge any nurse to go out and nominate. It's important our work is recognised because we're doing a great job," she said.

To find out more about all the different categories, how to enter or to nominate visit www.rcni.com/nurse-awards/enter-now

The RCNi Nurse Awards ceremony 2018 will take place on 4 July in London. An overall winner from the 14 categories will be awarded Nurse of the Year. Find out more at www.nurseawards.co.uk

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It's important our work is recognised because we're doing a great job

➔ Visit www.rcn.org.uk/bulletin to find out more about Dorcas' work

Northern Ireland Nurse of the Year

Nominations are now open for the RCN Northern Ireland Nurse of the Year awards. If you know someone whose work deserves to be recognised, this is your chance to have your say. Find out more at www.rcn.org.uk/northernireland

Retired members lead the way

A new retired members' network in the South East of England attracted more than 50 members to its inaugural meeting. Spearheaded by Peggy Pryer and Michael Vince, the meeting addressed concerns about pensions.

Peggy said the meeting demonstrated how much retired members needed a voice in the RCN. "If you want something similar in your area, you must ask for it," she said. The network will hold a small number of events each year, with most of the work being virtual.

Members' champion

Gerry O'Dwyer, a national officer in the RCN's Employment Relations Department, has won the Members' Award for Outstanding Customer Service at the RCN Staff Awards for Excellence.

A familiar face to many, Gerry has worked on a range of RCN campaigns and is always on hand to provide advice about current issues and key changes.

He said: "I've been an activist with the RCN since 1988 and worked here for more than 20 years. I'm very proud to get this award for supporting members."



The big picture



Some of the RCN's dedicated and diverse members were recently filmed sharing their experiences of what being a member means to them. Find out more at www.rcn.org.uk/membership

MEET THE MEMBER



Each month *RCN Bulletin* asks a member to share a little bit about themselves.

Name: Jayne Shaw

Role: Community staff nurse

Describe your job in three words: Proud, difficult, rewarding.

What item can't you do without at work? A pen.

Who would play you in a film? Cameron Diaz.

How do you unwind? Watching TV – I love pointing out the mistakes in *Holby City* and *Casualty*!

If you could have a superpower, what would it be? To turn back time.

Why did you choose this profession? My grandmother was a matron and I used to go to the hospital with her and speak to the patients.

What three things would you take to a desert island? Wine, my kids and a good book.

If you could go back in time, which era would you live in? The 60s – before nursing got too political.

Where is your dream holiday destination? Hawaii.

www.rcn.org.uk/myrcn



PATIENT PERSPECTIVE



Richard D France says if it wasn't for nursing staff at the Bluebell Ward at Springfield University Hospital, he wouldn't be where he is today

“After a long struggle with mental illness, including many suicide attempts, trips to psychiatric hospitals and even a stint in a psychiatric prison in Spain, I was finally admitted to the Bluebell Ward, which is a special mental health unit for Deaf people where all staff – whether Deaf or hearing – use British Sign Language. It came after my most recent attempt to kill myself, where I'd broken my back and both feet jumping into the Thames.

As I was wheeled into the ward, nurses and patients both signed greetings at me and I was completely taken aback. I had to go in my room and take 30 seconds for myself then come back out again to check it was real. Being in an environment where I was understood and could communicate clearly was the key to my recovery.

The nursing staff were amazing, always taking the time to sit and talk and to make sure I was OK, even though I could be very difficult and grumpy at times. For the first time in my life, I was made to feel human and understood and I'll be forever grateful to the nursing staff and everyone at the Bluebell Ward.

ARE YOUR MEMBERSHIP DETAILS UP TO DATE?

CHECK ONLINE AT MYRCN, CALL 0345 7726 100, OR WRITE TO RCN MEMBERSHIP TEAM, COPSE WALK, CARDIFF GATE BUSINESS PARK, CARDIFF CF23 8XG.

6 OPINION

What you've been saying

Learning from the past

I was drawn to the article 'When Bath became home' (*RCN Bulletin*, issue 357, page 10) as I live nearby and have enjoyed a spa treat at the hotel featured, formerly the nurses' home.

Several thoughts occurred to me. First, how brave these young women were to travel so far to venture on a new life. Second, how grateful we should be to them for staying and enriching UK health care.

However, the contrast with student nurses now and how we support them also struck me. No gentle knock on the door and cup of tea, free meals, transport to work and accommodation.

I understand that some might find the environment described stifling, but I wonder if the attrition rate of students leaving their courses would reduce if students were given

access to even some of the support provided in the past.

✉ **Jenny Gray, by email**

Highlighting poor practice

I have and still am suffering the repercussions of whistleblowing poor practice ('Whistleblowing woes', *RCN Bulletin*, issue 357, page 6). My concerns were for a baby who could have died. I had no agenda other than to save a life.

Now a year down the line I've suffered the backlash of abuse and bullies. I will never change though. I saved this baby's life and poor practice will always be highlighted. My agenda is doing the best we can do for our families. Isn't that what nursing is about first and foremost?

✉ **Anonymous, by email**

If you need whistleblowing support, call RCN Direct on 0345 772 6100

Intolerable pressure

As a result of the Government's four-hour emergency department rule, assessment units have been created and the workload shifted to them without adequate staffing or recognition. The burnout rate has been so high that our assessment unit has almost constantly been staffed by a majority of newly registered nurses who, much as they try, are not able to keep up with the ridiculously fast pace. They frequently end up in tears and very few last longer than six months. This puts increasing pressure on the few senior staff who tough it out. Several people have left and now work in different countries where nursing staff are treated with respect and paid well.

✉ **Anonymous, by email**

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HOT TOPIC



What does being an RCN member mean to you?

"It meant legal support following a work-related injury. I'm most grateful." **Sarah Kiernan**

"As a first-year student, being a member of the RCN gives me confidence by having a community of nurses to support me through my training." **Jon Feeney**

"They fight our corner and speak out for nurses for better pay and working conditions. The RCN is a place where I have a voice, a place I can join to connect with passionate people, a place to feel welcomed and somewhere to belong." **Tammy Heath**

"It's always good to know there is somewhere to go if you're in difficulty at work, or changes are being made that will affect you." **Mary Dougan**

"Over the years I've used many of the benefits of being a member from advice and support with employment issues to accessing the many resources available. In addition, over the last few years I have really enjoyed the benefits of being a member of some of the forums." **Sarah Winfield-Davies**

"I only really started to use my RCN membership when my father died unexpectedly. As nurses, we are not used to asking for help. However, when I managed to pluck up the courage to call the RCN counselling service, it couldn't have been easier and more comforting to speak to someone who had a lovely manner and tone." **Janice Richardson**

"Meeting new like-minded people at conferences and knowing the RCN's there for legal advice should I ever need it is a comfort. I also saved more than £1,000 booking a holiday through RCNXtra." **Yasma Osman**

MESSAGE TO MEMBERS



Josie Irwin RCN Associate Director, Employment Relations

Since the Budget pledge of extra money to fund a pay rise for nursing staff, in return for contract reform and more productivity, RCN negotiators have been exploring the possibility of a breakthrough on NHS pay. We've started talking to the Government and NHS employers about what contract reforms they want to see, what strings might be attached to a pay rise and what they mean by increases to productivity.

Negotiating pay reform won't be easy. The Agenda for Change contract covers more than a million NHS staff represented by 14 trade unions. However, the opportunity to have a discussion about long-term improvements to the pay structure is positive.

Our priorities include: removing overlaps between pay bands; making it quicker to get to the top of bands by reducing incremental points; and protecting unsocial hours payments. However, the other parties also have their own priorities.

If negotiators feel that reform is possible, talks will be on the same basis as the original Agenda for Change package, 'nothing agreed until everything agreed'. We'll ensure members have all the information they need and there will be a full consultation before any deal is agreed. If any deal doesn't look good for nursing staff, we won't hesitate to say no.

www.rcn.org.uk/closethegap



Making an informed choice



RCN policy adviser Rachel Cackett explains why we need to hear members' views on consent for organ and tissue donation

The RCN took a position on

consent for organ and tissue donation in 2009. After consulting members, RCN Council decided to support the opt-in system, whereby anyone who wants to donate their organs after death has to give their explicit consent. Council also agreed to review this position at a later date.

Since then, there has been lots of activity on the issue across the UK. In 2015, Wales legalised a "soft opt-out" system, which means consent is presumed unless someone has explicitly said otherwise, or

if their family objects. Northern Ireland and Scotland also made moves to bring in similar laws, though these weren't passed by politicians. However, there are now new proposals on the table in Scotland and England to introduce opt-out systems. These will be debated during 2018.

Given all this, the RCN has decided that it's time to gather member views once again to inform the review of its position.

On 15 January we'll launch an all-member survey to help us to understand nursing experiences and opinions about consent from across the UK. Please keep an eye on RCN emails, the website, and social media to follow the link to the survey.

The RCN's reviewed position will be available in the spring. To find out more about the issues now, and to access the survey from 15 January, please visit: www.rcn.org.uk/organ-donation-consent

Breaking boundaries

What's it like being a D/deaf nurse in a world that's predominantly set up for the hearing? Leah Williams finds out from two pioneering members



Helen pictured at London Southbank University, and, inset, as a district nurse sister in the 80s

In 1977, Helen Cherry became one of the first deaf people to begin nurse training. Helen has severe to profound deafness, meaning that she has little to no hearing without the benefit of hearing aids. She lost her hearing as a child but, having already learned to speak and lip-read, was not diagnosed until she went to school and her hearing challenges became more apparent. When she left she wanted to train to be a nurse.

"It took me about a year to find a school that would take me," she says. "Brighton School of Nursing was the only one to respond. In the interview, they really challenged me on my difficulties but they weren't trying to put me off, they just wanted to openly discuss how we could make it work. They were a very forward-thinking school and were more focused on what I could do rather than where I may struggle."

Helen became a state enrolled nurse (SEN) through pupil nurse

training, then moved on to qualify as a state registered nurse (SRN). She found the majority of people understanding and helpful, willing to find solutions to difficulties faced rather than make problems out of them.

"I was fortunate to have supportive colleagues and we worked as a team, trading off on certain tasks. I'd do temperature rounds and they'd answer calls or do the manual blood pressure readings for me, which required listening through a stethoscope," says Helen.

With earlier hearing aid technology not well suited to lots of noise, the acoustics of a hospital weren't preferable for Helen and she chose to go into district nursing, becoming a sister in 1986. Being with people in their own environment was where she felt she could make a difference.

"One of the things that took me into nursing was that I knew what

it felt like to be misunderstood. This has allowed me to empathise and help patients overcome anxieties and difficulties."

Helen is currently working in education, co-facilitating sessions in health and social care at London Southbank University's innovative People's Academy. "I think people with diverse disabilities bring a wealth of their own experience to nursing," she concludes.

Communication is key

When nursing degrees were becoming popular in the 90s, nursing was closed off further to D/deaf nurses and it was only after a decade of campaigning by the British Society for Mental Health and Deafness that the first D/deaf nurses graduated in 2004.

The benefits of being able to provide D/deaf nursing staff to care for D/deaf mental health service users have been clear. RCN member Jackie Wan is a Deaf community nurse who works within the Deaf Adult Community Team (DACT) at



People with diverse disabilities bring a wealth of their own experience to nursing

Pictures by Duncan Soar

Key terms explained

Big 'D' Deaf is used for people who are born Deaf or became Deaf before spoken language is acquired and regard their deafness as part of their identity and culture rather than as a disability. They form the Deaf Community and are predominantly British Sign Language (BSL) users.

Small 'd' deaf is more often used for those who may have become deaf, deafened or hard of hearing after they have acquired a spoken language, any time in life. Lower case d is more often used to define hearing loss.



Jackie, left, with a colleague at Springfield University Hospital

Springfield University Hospital, which provides inpatient and outpatient mental health services to D/deaf children and adults. The staff mix includes D/deaf and hearing professionals working together, all of whom use sign language.

“The health of D/deaf people is generally quite poor for any number of reasons but communication can be one of the main factors,” says Jackie. “Having health care staff they can properly communicate with, either directly or through an interpreter, is vital. Especially when dealing with mental illness.”

Jackie trained as part of the third cohort to be taken onto a mainstream course in mental health nursing with reasonable adjustments made for D/deaf students at Salford University. The growing number of D/deaf nurses from this and other courses is proof that there is no reason D/deaf students cannot flourish, given the right access.

“The course was very well organised,” Jackie adds. “The majority of my placements were within D/deaf environments but even in hearing placements there were always interpreters – taken from the same pool of interpreters who knew us and the course – and

lectures always had interpreters and note takers as well so it was very smooth.”

Since qualifying, Jackie has been working tirelessly to improve services for D/deaf patients.

“As a qualified nurse, I could have worked with hearing people as well but my passion is really in supporting the D/deaf community. I recognise their challenges and struggles and felt strongly that I wanted to work supporting them,” Jackie says.

In 2016, Jackie won the Best Deaf Role Model award for her work supporting D/deaf people and for being a leading example of what D/deaf people can achieve.

Celebrating nursing diversity

The RCN is currently hosting an exhibition at its Library and Heritage Centre in London looking at diversity in nursing throughout the ages, including the contribution of D/deaf nurses. *Hidden in Plain Sight* is on display until 10 March and can also be accessed online at www.rcn.org.uk/libraryexhibitions

THE VIEW FROM HERE



Kathy Martyn Disability Liaison Tutor, Brighton University

I completed my PhD on inclusion within the workplace and my research revealed that there is still a narrow perspective within the NHS of what a nurse should be like. Mainly this comes down to negative preconceptions about adjustments required and the effect this will have on the workplace.

Obviously, each individual is different but a lot of adjustments will be quite minor and are in fact beneficial for the general working environment through improvement of overall communication and understanding. Things like talking clearly, not talking over one another, improving lighting and maintaining eye contact, for example.

In a busy hospital setting, small things like this are often overlooked and, not only would they be reasonable adjustments for a lot of D/deaf nurses, but poor communication is often at the root of a lot of issues in clinical environments.

It's only through illustrating how things could be that perceptions will change and that is what we are trying to do by encouraging all aspiring students to feel confident that they will have any support required. We will miss out on a lot of amazing nurses otherwise.

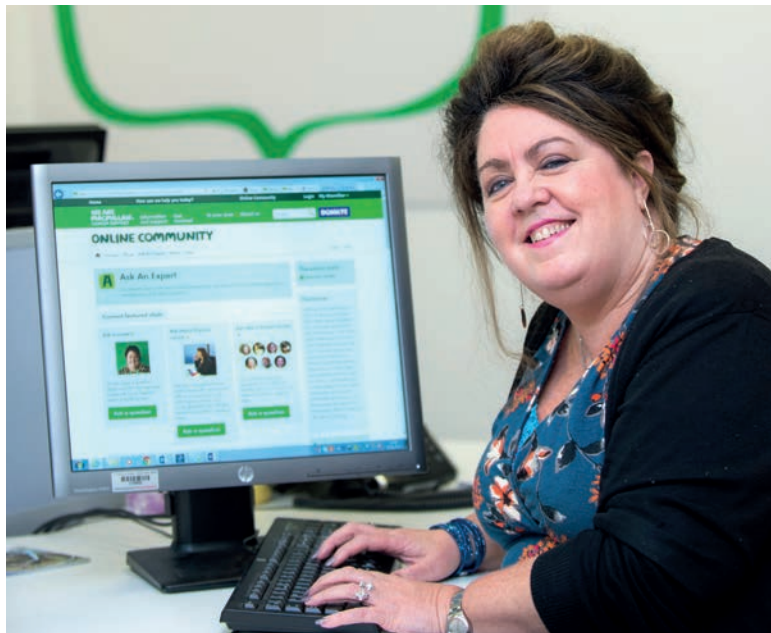
Kathy has contributed to new guidance for students who may require adjustments on placements, recently launched by the RCN Peer Support Service – follow the link below to access it.

<https://tinyurl.com/yckowwye>



Debunking cancer myths

RCN member Ellen McPake has become Macmillan's first digital nurse, helping patients with cancer and their families find the right advice online



Looking up an illness or disease has never been so easy. There are thousands of websites offering information on symptoms, treatments and “cures”.

According to research from Macmillan Cancer Support, 42% of people with cancer have looked up information about their diagnosis online and 6% of those thought they were going to die after doing so.

To help people get the correct information online, the charity has appointed Ellen McPake as its first digital nurse. It's her role to combat “fake news”, answer online queries and support patients in getting the most appropriate advice.

“There were times when I was a breast cancer nurse that I thought I had told the patient everything they needed to know. But they would leave hospital, go home

and completely forget everything due to being in shock,” says Ellen.

Previous research has revealed that one in three people say they were in a daze and couldn't take anything in when they were diagnosed. More than a quarter claim not to have received easy-to-understand written information about their type of cancer.

Turning to unverified medical sites can leave people frightened, at risk of pursuing potentially

dangerous bogus cures and underestimating the benefit of routine treatments, says Ellen.

“We know that people Google their symptoms if they're stressed,” she says. “If the cancer is incurable, people look for hope. Some have spent a lot of money looking for a cure and been disappointed. Sadly, much of the information online can be misleading, especially in terms of expensive treatments that don't work.”

One internet search brings up a website which says chemotherapy is a bigger killer than cancer itself while another claims that baking soda can cure breast cancer.

“As more people seek information about their cancer online, we want them to know that charities like Macmillan are able to offer reliable health advice,” adds Ellen. “The idea is to reach as many people as possible. Not everyone wants to pick up the phone, they just want an answer to a quick question. Sometimes it's a relative who wants more information. Often they too are in shock after a cancer diagnosis and they might not be able to get the right answers from their loved one.”

The RCN says...

Ann McMahon, RCN Professional Lead for Cancer and Breast Care Nursing, says: “People have been researching their symptoms online since the internet began, which can be problematic as it can cause anxiety and give false information. It's the job of nurses to debunk online health myths and help put patients' minds at ease. Ellen's role will provide reliable advice to help people who need reassurance at a vulnerable and confusing time in their lives.”

“

If the cancer is incurable, people look for hope

Words by
Susan Embley

🔍 Find out more about the work of the RCN Cancer and Breast Care Forum at www.rcn.org.uk/forums

18 things to do in



New year, new opportunities. Grab 2018 by the horns with our handy list of ways to make it count

1 Nominate someone for an RCNi award
The most prestigious awards in the nursing profession are open until Friday 9 February. Do you know an inspirational colleague? Celebrate them. Visit www.nurseawards.co.uk

2 Be a representative
Becoming an RCN rep means you can make a real difference to patients, colleagues and even the future of nursing. Or, if you're a student, consider becoming a student information officer (SIO). Visit www.rcn.org.uk/get-involved/rcn-reps

3 Get involved in an RCN campaign
Such as the RCN safe staffing campaign, launching in May. The RCN is calling for new legislation that guarantees safe and effective nurse staffing after tens of thousands of members said they were stretched to the limit. Visit www.rcn.org.uk/safestaffing

4 Write for RCN Bulletin
Have a burning issue you're bursting to talk about? Why not write a letter to *RCN Bulletin* or, better still, write a column. Email bulletin@rcn.org.uk for more information. Or submit an idea for an article for any one of the RCN magazines. We'd love to hear from you.

5 Plan ahead
As a member of the RCN you're entitled to a complimentary, no obligation financial review from Lighthouse Financial Advice. And don't forget to make use of the RCN's discounted will writing service, RCN Law.

6 Bookmark the RCN Magazines website
Visit www.rcn.org.uk/magazines for unmissable features and exclusive online content and read articles on the go.

7 Further your knowledge
Why not sign up for an event or complete an online module? The RCN is committed to lifelong learning and our members' development. Visit www.rcn.org.uk/professional-development

8 Do a career evaluation
Are you where you want to be? If not, how will you get there? Why not update your CV and make use of the RCN careers service? www.rcn.org.uk/careers

9 Take care of yourself
Find out how the RCN's *Healthy Workplace, Healthy You* toolkit could help improve conditions in your workplace. www.rcn.org.uk/healthyworkplace

10 Sign up to an RCN forum
Join colleagues working in your nursing specialty in driving forward professional change and innovation. www.rcn.org.uk/forums

11 Organise a wellbeing event
When everyone is busy, looking after staff wellbeing becomes even more vital. Consider organising yoga, a fundraising event for charity or mindfulness sessions at your workplace.

12 Take the time to check in
Spare five minutes for someone who looks stressed at work. Or take a minute to check in with a newly-qualified colleague to see how they're doing.

13 Commemorate a milestone
The NHS turns 70 this year. Long live the NHS. Visit www.england.nhs.uk/nhs70

14 Vote in an RCN election
Or stand for election yourself! It can open so many doors and help you make the changes you want to see a reality. www.rcn.org.uk/elections

15 Visit the RCN library's diversity exhibition
While you're there find out a bit more about RCN headquarters in London and discover its rich and interesting past (there's even a ghost!).

16 Explore social media
Join the RCN Facebook page, check out your forum's social media presence, and follow the RCN's Twitter and Instagram accounts.

17 Spread the word
Tell a colleague about the benefits of RCN membership and help strengthen the organisation. The RCN is only as strong as its members.

18 Attend RCN Congress
The biggest event in the nursing calendar is taking place in Belfast on 12-16 May 2018. It's free to attend so book today at www.rcn.org.uk/congress



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A conversation with...

Maria Trewern has gone from the most challenging of starts in life to becoming one of the most influential members in the RCN. She talks to Kim Scott about her journey so far

As of this month, Maria Trewern, née Nicholson, will be leading RCN Council, the group of 17 members elected to direct the organisation. “I’m excited about the role,” she says. “I want to inspire other members, increase the value of nursing and have it acknowledged and also ensure safe staffing.”

Though Maria has a wealth of management and leadership experience, her path to success hasn’t always been smooth. She was brought up in care and was split up from her family when she was young. It was in nursing that she found her sense of belonging.

“As soon as I stepped inside a hospital, I loved it,” she recalls. “I wanted to be somewhere for the first time in my life and I loved the feeling of being part of a team.”

Maria started out as a cadet nurse before undertaking nurse training, successfully passing her registered nurse examinations. However, just months shy of completing her training hours, she was forced to withdraw from the course. It was some years later that Maria returned to nursing.

Around this time, in the early 90s, she joined the RCN. “I was very interested in the professional side of the organisation. But like many members, I joined for the indemnity. Then I found out my local RCN branch would close unless people came forward to take on roles. I went along to find out more and before I knew it, I was chair of the branch.”

While Maria’s nursing experience was growing, so too was her

“

You must do what your heart tells you

desire to influence politically. She trained to be a workplace steward and became a familiar face at RCN Congress, the organisation’s annual professional event where nursing issues are debated.

Unafraid to challenge, she door-stepped Frank Dobson when he was Secretary of State for Health, urging him to prioritise school nursing, an issue she campaigned for with fellow branch member Anne Asprey.

It later became government policy that every child deserves a school nurse after members at Congress voted almost unanimously in favour of a resolution Maria’s branch put forward. “Congress is a major event in the RCN calendar. It’s not to be missed,” she says.

Over the past 15 years Maria’s career has gone from strength to strength. She’s worked as an associate director of service delivery, completed a master’s

degree in health care management, worked for herself as a workforce strategy consultant and undertaken various management roles for NHS Professionals, where she works now as Head of Workforce Insight.

“I’m a problem solver,” Maria says. “It’s my job to look at things from a clinical and management perspective and provide solutions that are meaningful for staff and patients. One thing my clients can be sure of is an honest opinion. I will be frank.”

So how will that style be applied to her new role as Chair of RCN Council? “I want to use my experience to help drive the RCN forward,” Maria concludes. “For me, it’s about doing what’s right and not being afraid to say it. There’s a time to stand up and there’s a time to speak out. You must do what your heart tells you and use your strategy strength to get you there.”

Picture by Duncan Soar

Find out more about the role of RCN Council at www.rcn.org.uk/rcn-council



‘Nurses kept me sane’

Patient Alex Bunting spoke at the recent Society of Orthopaedics and Trauma Nursing (SOTN) conference about his life-changing experience and the nurses who helped him



Alex Bunting pictured at the spot where the bomb went off

Alex, then a taxi driver, was the victim of an IRA bomb blast in Belfast in 1991. He had his left leg blown off and lost the bottom of his right leg and half his thigh when a timed explosion went off in his cab in a case of mistaken identity. It's

believed the terrorists were trying to target a policeman who lived two doors away from him.

The incident has had a lasting impact on Alex. He has ongoing health problems but says he

owes much of his recovery, both physically and mentally, to nurses.

“I don't think I would have pulled through if it hadn't been for nursing staff,” he says. “The doctors fixed me up and saved my life, but it's the nurses who really looked after me and kept me sane.”

He was treated at the time by Chair of the SOTN Sonya Clarke. Caring for Alex had a profound effect on Sonya, who had just qualified as a nurse.

“I invited Alex to speak at the conference as his story is so powerful and yet he is so grateful for the care he's received. It's good to hear things from the patient's perspective,” she says.

The 30th SOTN conference took place in Chester in November. To find out more about the work of the society and to join, visit www.rcn.org.uk/forums

“

I don't think I would have pulled through if it hadn't been for nursing staff

End of an era

Mary Shaw reflects on her long tenure as Chair of the RCN Ophthalmic Nursing Forum as she passes on the baton to colleague Penelope Stanford

“There have been many highlights during my time with the forum but I think my greatest achievement is putting together a committee full of fantastic individuals, each with their own strengths, who have worked



together tirelessly to forward the voice of ophthalmic nursing.

“We have created a valuable relationship with the Department of Health and strengthened existing connections with other professional bodies.

We have also succeeded in making important ophthalmic nursing resources widely available. “There is a certain squeamishness when

it comes to working with the eyes – even among some health care staff. So it has been particularly rewarding to see our forum produce materials to help break down these barriers and improve the level of ophthalmic care in all settings, not just in the UK but worldwide.”

To get involved, visit www.rcn.org.uk/forums or visit the forum's Facebook page.

IN THE SPOTLIGHT



General Practice Nursing Forum

Who's the Chair?

Marie Therese Massey, a senior lecturer and general practice nurse. Marie Therese has been Chair of the forum since 2014 and a member of the steering committee for two years before that.

Recent highlights?

Lots of successful work over the last few years raising the profile of general practice nursing, with some well-received events at RCN Congress. One particularly popular event was held in collaboration with the Older People's Forum on supporting nurses in facilitating the transition of older people into long-term care. The forum's Facebook page was launched at the end of 2016 and has proved a valuable resource for members.

What's coming up?

The forum is hoping to produce a concise resource for supporting general practice nurses in running baby vaccination and immunisation

clinics. It will also be looking at the Ten Point Plan and Five Year Forward View to find ways to support general practice nurses nationwide.

Why join?

Marie Therese says: "Joining the forum offers a wonderful opportunity to become involved in strategies and policies supporting general practice nursing in education and practice. It's a great way to network and contribute to your specialty with the support of the RCN."

Find out more about the General Practice Nursing Forum at www.rcn.org.uk/forums or visit its Facebook page.



WHAT I'M THINKING



Helen Donovan RCN Professional Lead for Public Health

Having the occasional alcoholic drink is recognised as part of most people's social lives and, in moderation, can be beneficial. But what is "moderation"? Certainly drinking every day and drinking over the recommended 14 units per week is too much.

Nursing staff have a huge role to play in supporting people to understand this, and wider health initiatives such as Dry January provide a valuable platform to help motivate people to avoid alcohol for periods of time, particularly after Christmas and New Year celebrations.

The Government also has a role to play. Increasing the price so alcohol becomes a treat is one measure. However, the duty on alcohol has become increasingly low so in relative terms alcohol is cheap.

In November the European Supreme Court ruled in favour of the Scottish Government's long-held plans for introducing a minimum unit price (MUP) for alcohol, overturning a previous ruling. This is a victory for public health campaigners and has opened the way for other countries to introduce an MUP.

Disappointingly, the Chancellor missed an opportunity in the Autumn Budget. The freeze on alcohol duty was seen by many as a tax giveaway to the alcohol industry, which has already benefitted from successive duty cuts. This will do very little to improve alcohol-related health issues.

<https://tinyurl.com/yahdv4q2>



Early pregnancy care

The skills and knowledge needed to become a clinical nurse specialist in early pregnancy care have been laid out for the first time in new guidance designed by the RCN and the Association of Early Pregnancy Care Units (AEPUC) to help nurses carve out a career in the field. The role is intended to enhance the care for women who may be concerned about a complication in early pregnancy.

Carmel Bagness, RCN Professional Lead for Midwifery and Women's Health, said: "The RCN and AEPUC recognised the need to provide educational support for nurses working in these essential services and this standard will guide them through their career and revalidation process."

Search for publication code 006 394 at www.rcn.org.uk/publications to download the guidance.

Helping men with cancer

New guidance to help support men with cancer who continue to work has been released. The RCN has been very involved in the initiative, led by the European Men's Health Forum (EMHF), and held a workshop earlier this year to define the focus, content and target audience for the advice.

Helen Kirk, RCN Public Health Forum committee member, said: "More people than ever are living with cancer and that means many are having to deal with continuing to work after diagnosis and through treatment. Men tend to engage less with health support and so this guidance is a valuable resource for all nursing staff who are supporting men in the workplace."

Download the guidance from emhf.org/new-guide-working-with-cancer

16 EVENTS

For details of more events visit the region and country pages of the RCN website or go to www.rcn.org.uk/events

London

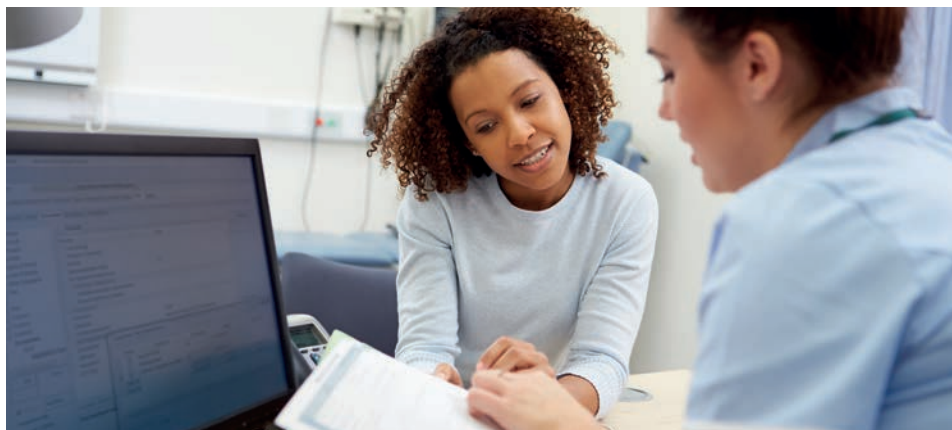
Women's health conference

22 March

RCN HQ
20 Cavendish Square
London W1G 0RN

Gain six hours of CPD for revalidation and get the latest information, news and developments in women's health with this one-day conference. Topics covered will include psychosexual issues, fertility preservation, incontinence, menopause, endometriosis, intervention radiology and fibroid treatment.

Whatever your speciality in women's health nursing, this event offers a packed



itinerary with an opportunity to meet and share information with members working in the same field.

Debby Holloway, Chair of the RCN Women's Health Forum, says: "This popular conference is invaluable for nursing professionals from students

through to specialist gynaecology nurses. We have a high calibre of expert speakers covering the latest news and updates in women's health nursing."

🕒 Places are going fast. Book online at www.rcn.org.uk/WH18 or call Rebecca Hoole on 020 7647 3785.

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