OUR NEW PRESIDENT
CECILIA ANIM  P8
NEWS DIGEST

Nursing rewarded

RCN Wales Director Tina Donnelly was awarded a CBE in the New Year Honours. Others recognised included Matthew Hodson, Nursing Standard Nurse of the Year 2013 and a member of the RCN London Board, who was awarded an MBE, and RCN Fellows Professor Eileen Sills, DBE, and Professor Udauk Archibong, OBE. Congratulations to all.

Congress countdown

RCN Congress 2015 in Bournemouth is only six months away so make sure the dates – 21 to 25 June – are in your diary. And don’t forget that the 23 January deadline for agenda items to be submitted is fast approaching. If you have a good idea for a Congress item and would like your branch, forum committee or board to consider it, email congressagenda@rcn.org.uk to be put in touch. Find out more at www.rcn.org.uk/congress

Pharma fees go public

From 2016, monies paid to health professionals will be disclosed by pharmaceutical companies in a public database. The first data will cover payments received in the calendar year 2015. Members should keep a careful note of any fees or funding received, for example for attending or speaking at a conference. You will be asked to confirm the payments before they go public. You can read more about the reasons for this move and how it could affect you at www.rcn.org.uk/pharmafees

Making a choice

All eligible members in England and Wales should have received their Choice 2 letter from NHS Pensions via their employer. It offers a second opportunity to move the 1995 section pension benefits into the 2008 section of the scheme if you complete the online form (or return a paper version) by 16 March. NHS pension scheme members in Scotland and Northern Ireland will be offered Choice 2 retrospectively later in the year. Visit www.nhsbsa.nhs.uk/pensions

Leading student

First-year nursing student Bradley Sewell has been elected as a student member of RCN Council until 31 December 2016. Bradley received the highest number of votes and will join fellow student Brendan Garry on Council. “I’m really looking forward to representing nursing students and giving them a voice,” said Bradley. For full results visit www.rcn.org.uk/studentcouncilelections

Sign for staffing

RCN member Richard Jones has set up an online petition, via the National Assembly for Wales website, in support of the Safe Nurse Staffing Levels (Wales) Bill. Richard said: “I’d urge anyone who feels passionately about high standards of health care to sign this e-petition, making it known to Assembly Members that this bill is fully supported.” Find out more at www.rcn.org.uk/wales

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

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Front cover image by Duncan Soar

Exclusive offers, just for you

Not visited RCNXtra for a while? We have put together a number of new offers, exclusive to RCN members, to help save you time and money when you’re shopping for everyday essentials and special treats. Visit www.rcn.org.uk/xtra to find out more.
What if...you get what you’re owed?

Election priorities
The RCN has been compiling its general election manifesto of priorities based on member feedback. More than 10,000 members responded to a survey asking them to select their favourite three statements from six under three separate themes: Improve Patient Care, Value Nursing, and Invest in Health and Care. Look out for more information in the next issue of RCN Bulletin.

‘System in crisis’
The RCN has called for a long-term strategy and significant ongoing investment in the NHS to put an end to the current crisis in A&E. Figures released last week showed that the performance of English trusts in meeting waiting time targets had dropped to its lowest level in a decade with a number of hospitals across the UK declaring "major incidents".

RCN Chief Executive Dr Peter Carter said that patients and hardworking staff are being let down by a system in crisis. “Hospital trusts trying to recruit more staff have been hamstrung by the short-sighted cuts to nurse training places, meaning there simply aren’t enough nurses in the system,” he stressed. “This is made worse by chronic under resourcing of community services and social care, which means more people end up in A&E who could be better treated elsewhere. The Government needs to stop burying its head in the sand on this.”

Day in and day out, nursing staff go above and beyond for their patients

The RCN has launched a new phase of its campaign for fair pay, supporting members to claim for the actual hours they work in accordance with their contractual rights.

East and North Hertfordshire NHS Trust is the first of a number of employers across the nine regions in England where nursing staff are being encouraged and assisted to seek time off in lieu or payment for excess hours worked.

RCN Chief Executive Dr Peter Carter said: “The Government regularly says how much it values NHS staff but the failure to give nurses a cost of living increase, coupled with the failure to pay them for the extra work they do, sends out a very different message.”

The move comes against a backdrop of five years of pay restraint with nurses and health care assistants caring for record numbers of patients during the most disruptive reorganisation in NHS history and in the face of huge workforce cuts.

Myrtle Munro, a senior nurse at the Lister Hospital where the initiative was launched last week, said: “Nurses are used to going over their contracted hours to make sure patients get the care they need, and that’s part and parcel of the job. That said, the demands of the service are ever more intense at a time when the Government has refused to award us just a one per cent pay rise.”

“I think a lot of nurses here will welcome the RCN’s campaign to make sure overtime is actually claimed for. Those overtime costs will also be a lot more affordable to the NHS than using agency nurses to fill the gaps in staffing.”

To find out more about the RCN’s What if...? campaign visit www.rcn.org.uk/whatif
London calling for shortages to be addressed

RCN demands more strategic approach to workforce planning

Significant gaps remain in London’s nursing workforce even though the number of NHS posts in the capital increased during 2014.

In a new report on safe staffing, RCN London says there are 8,000 nursing posts currently vacant in the city. And the shortage is getting worse: a year ago 11 per cent of nursing posts were unfilled; the figure now is 14 per cent.

The report says that the contribution of overseas nurses is welcome but should not be seen as a sustainable, long-term solution to the city’s shortage of nursing staff. Much more must be done by employers to help new staff settle and build long-term careers in local health services. RCN London is calling for better workforce planning to overcome the existing “piecemeal” approach and says the ongoing pay freeze that has continued for four years must end.

The region found that 60 per cent of new nursing posts created in 2014 remain unfilled. Seven London trusts have nursing vacancy rates of 19 per cent or more and, although only four cut posts last year, in fact nine trusts employ fewer nurses than a year ago.

Bernell Bussue, RCN London Director, said: “An inescapable link is now established between staffing levels, skill mix and patient safety, and the number of nursing posts across London has increased sharply this year. However, only 40 per cent of the new posts have been filled. RCN London is calling for a more strategic approach to workforce planning to ease staffing challenges right across the region.”

He added: “Much more needs to be done, right across the system, to make sure London remains an attractive and affordable place for nurses to work.”

Making a case for nursing innovation

New programme will help members demonstrate the value of nurse-led innovation

The deadline is fast approaching for places on a new RCN and Office for Public Management programme available in a number of English regions.

To be eligible for the programme, members must currently lead a service innovation but do not need any formal experience of economic assessment.

Jacqui Prieto, Nurse Specialist in Infection Prevention at University Hospital Southampton NHS Foundation Trust, leads a trust-wide project aiming to reduce catheter-associated urinary tract infection. Jacqui attended her first session on the programme last month.

She said: “As part of my trust’s work we are exploring additional investment in bladder ultrasound scanners to avoid the unnecessary use of indwelling urinary catheters and are required to justify the costs and benefits. The session helped me to understand the different approaches to economic assessment and the factors we will need to consider to build our business case.”

Vicky Queen, Interim Head of Nursing at Torbay and Southern Devon Health and Care NHS Trust, is focusing her economic assessment on her peripatetic nursing team. “I applied to gain a better understanding of financial assessment in practice,” she said. “My aim is to reduce agency spend while improving quality and at the end of the programme I hope to put forward a robust business case with financial implications.”

There is no charge to take part in the programme but participants must be sponsored by their employer. Upon completion of a monetised case study, they will receive a leadership and management certificate.

The first group involving nurses from the South East and South West is underway. Nurses leading service innovations in Eastern, West Midlands and East Midlands regions looking to learn about economic assessment should enquire immediately to find out if there are any places still available. Those in the North West, Yorkshire & The Humber, Northern and London regions have until 28 January to apply.

The programme is sponsored by the Burdett Trust for Nursing.

More details at www.rcn.org.uk/economicassessment
A sharp reminder

Risk of exposure to bloodborne viruses is on the rise

The RCN has repeated warnings to members about sharps injuries as a new Public Heath England report states that health care workers continue to be at risk of exposure to bloodborne viruses (BBVs) despite the availability of safety-engineered devices.

The *Eye of the Needle* report reveals that occupational exposures to a BBV among health care staff increased from 373 in 2004 to 496 in 2013. Over this ten-year period, approximately 30 per cent of exposures involved a source patient infected with HIV, 54 per cent involved hepatitis C and nine per cent hepatitis B.

Kim Sunley, RCN Senior Employment Relations Adviser, said: “It is vital nursing staff are vigilant and aware of the risks of injury from sharps or mucotaneous exposures in all care settings. Managers and occupational health services must work together to ensure the safety of all staff.”

“Employers not only have a moral duty to protect their staff, but thanks to campaigning by the RCN and others they have a legal duty too,” said Dr Peter Carter, RCN Chief Executive. “The EU directive of 2010, which became part of UK regulations last year, is very clear about what needs to happen, but it needs to be implemented fully and quickly and by all health care employers before staff and patients will be safe from these needless injuries.”

RCN members can access *Sharp Thinking – Reducing the Risk of Sharps Injuries* via the RCN Learning Zone. Visit www.rcn.org.uk/learningzone

“‘It is vital nursing staff are vigilant’

Revalidation pilots underway

Model to be tested across UK countries

Pilot projects get underway across the UK this month to trial the Nursing and Midwifery Council’s new revalidation model. Revalidation will require registrants to demonstrate that they remain fit to practise. A third party such as an employee or manager will have to confirm that a registrant is complying with the revised code of conduct, due to be introduced in March.

The pilots will help refine the proposed revalidation model before it is approved in the autumn and NHS Tayside is one of the organisations taking part.

RCN Senior Officer Bob McGlashan said: “The RCN will be working closely with NHS Tayside to help ensure that the revalidation process is efficient and effective. In particular, we want to be certain that registrants have the time and resources to undertake revalidation properly.”

Read more at www.nmc-uk.org/revalidation

In my in-tray

Janice Smyth
Director of the RCN in Northern Ireland

What a year it’s been for nurses in Northern Ireland – facing staff shortages and increasing numbers of patients. Nursing staff have been coping with growing pressures in our emergency departments, medical and surgical wards, in district nursing and health visiting, and their reward? A decision by Health Minister Jim Wells not to uphold our independent pay review body’s recommendation for a one per cent pay increase.

Our campaign, *What if ... Nurses were Treated Fairly?*, is on the top of my in-tray and we will continue to campaign to ensure that nursing staff are properly supported to care for patients.

Ensuring that nurses are recognised for the work they do is also high on my agenda. We will be starting the year by launching our annual RCN Northern Ireland Nurse of the Year Awards. During these difficult times, it is more important than ever to celebrate the excellence and innovation of nursing staff across Northern Ireland who remain committed to improving services and caring for patients.

Janice Smyth
Director of the RCN in Northern Ireland

www.rcn.org.uk/northernireland
What you’ve been saying

Help protect NHS staff

Patients who are not aware of what they are doing – for example, those with dementia – are very different from patients who have full capacity and are verbally and physically abusive to NHS staff. Senior managers need to support us. For example, if a patient is abusive, all but life-saving treatment will be withdrawn and the patient discharged. Perhaps then those with capacity who are abusive will begin to see that it is not acceptable.

Lorna Phillips, via Facebook

Great interview on @BBCBreakfast with Dr Peter Carter @theRCN on lack of student nursing places. Not good enough DoH

Mark Collins, via Twitter

Legal thanks

I wrote to the RCN legal team so many times. I was worried and scared and was seeking reassurance. Now I just want to say thanks. You give your time to help and support the hardworking nursing staff in this country.

Elena Ionita, by email

Speak up!

Something to shout about? We want to hear it. We are looking for more members to join our readers’ panel.

All you need to do is answer a few straightforward questions about topical nursing issues. We won’t contact you more than once a month and we’ll use your answers to help reflect members’ views in RCN Bulletin.

If you’re interested, please email bulletin@rcn.org.uk telling us your name, membership number, email address, daytime phone number, where you work in the UK and the top three nursing issues that you’re interested in. Or you can write, using the address on page 2.

Hot topic

Is it a good or bad thing that complaints to the Nursing and Midwifery Council about registrants are rising?

Jo Hulme, a senior staff nurse in acute medicine, says she feels that an increase in complaints is a double-edged sword. “On the one hand it is good that people feel confident raising concerns about care but on the other, my fear is that, as nurses are the face of health care, they are also blamed for any failings in the service whatever the root cause.”

“When poor nursing care is highlighted, it is crucial that the individuals involved are investigated. However, the reasons for the lapse in standards are central to the process of identifying the reasons why,” says Marie Therese Massey, RCN Practice Nurse Association Committee member. “While some nurses do fall short of the standards required in our code of professional conduct and deserve to have their registration suspended, for many others a complex series of events has resulted in the complaint being made against them. In these situations only by exploring the bigger picture can any progress be made towards resolving the issues to prevent future problems and provide a supportive environment in which to practise.”
From the heart

Christopher Kember
Nursing student

In the second year of my nursing education I spent 15 weeks on a clinical placement in Oulu, Finland. Temperatures of minus 26 degrees were initially a shock to the system but the thick snow created some spectacular and magical landscapes which will remain in my memories for years to come.

As a nursing student in Finland, I was treated as a well-respected member of the team; no hierarchy appeared to exist between health professionals at different levels.

Having demonstrated an eagerness to learn, I felt I was given more opportunities and greater responsibilities than on placements in the UK. This has improved my confidence and made me feel better prepared for the role of a registered nurse.

It was an amazing experience that I believe has increased employment prospects by providing me with a range of transferable, professional and life skills, which I can further develop during my remaining education and future career.

www.rcn.org.uk/students

What I’ve been reading

Before Christmas I read a lot about Phillip Hughes, the Australian cricketer fatally felled on the pitch. It put in perspective all the daft or dishonest politicians, dubious bankers and dysfunctional “celebrities” in the newspapers. I also read about 47,000 assaults on staff and 3,330 nursing posts axed in mental health services. For respite I read Lamentation by CJ Sansom, derring-do in Tudor times – marvellous.

Cris Allen, Outgoing Chair of the RCN Mental Health Forum

What quality defines a good nurse?
“Kindness” Nicola Meredith
“Non-judgemental” Louise Goodyear
“Knowledgeable” Anthony Linklater

Quote of the month
“I’m passionate about member engagement” Cecilia Anim, new RCN President

1 word answers

United we stand

A powerful force for good

Happy new year to you, wherever you work and whatever your specialty. I really hope 2015 brings each of you happiness and fulfilment and that collectively we can make this a really special 12 months for the RCN and for the profession.

This year begins as last year ended with the RCN firmly on the front foot in our continuing campaign to highlight the value of nursing and the impact of continuing pay restraint in the NHS.

Our national What if...? campaign is moving into a new phase and we will be working with members, initially in a number of trusts in England, to support them in claiming payment for the actual hours they have worked.

We all know that nursing staff are totally committed to their patients but for far too long employers have relied on the goodwill of people like you to keep services running. Your work is tough and the days are long and we say that enough is enough: it’s time to claim for all those excess hours.

Our approach to this continuing assault on pay and conditions is paying dividends. Not only are parliamentarians heeding our message, but we can now claim record membership figures. You are one of more than 420,000 nurses, midwives and health care assistants united under the RCN banner, all pushing for the highest quality care and to uphold the values and integrity of the profession.

Together we are a powerful force. Let’s ensure that in 2015 we continue to use our influence for the good of patients and of nursing.

www.rcn.org.uk/whatif

Dr Peter Carter
RCN Chief Executive

Convince me

I’ve had the pleasure of working in mental health for a number of years. This has included all age groups. Nursing care has continued to evolve and the pioneering work of research and evidence-based practice has been essential in promoting nursing practice. I would like to see a change in the promotion of the honour of just talking to patients and building relationships. Without this, other areas of nursing would be difficult to achieve.

Rob Clarke, Deputy Ward Manager

3 things I believe

1. We can enable members to turn negative experiences into positive learning opportunities.
2. Effective learning and development underpins all aspects of good patient care.
3. We can work with members to highlight the challenges to professional development and seek solutions.

Karen Dutton, RCN learning representative

www.rcn.org.uk/students

www.rcn.org.uk/whatif

www.rcn.org.uk/mentalhealth

www.rcn.org.uk/students
Reclaiming the profession

As new RCN President Cecilia Anim starts her term of office, she speaks to Kim Scott about her passions, priorities and perseverance

Sitting in the sexual health clinic where she works in central London, Cecilia Anim shows no sign of nerves at undertaking one of the most prominent roles in the RCN. “I’m so excited,” she beams. “Now is a time for action, a time to reclaim the profession and a time to get our members engaged.”

She’s come a long way since first qualifying as a midwife in her native Ghana in the late sixties. Inspired by her aunt, who trained as a nurse in Manchester, Cecilia came to the UK in 1972, taking on roles in paediatrics, orthopaedics and cardiac surgery upon qualification, before finding her true passion working within family planning and sexual health.

She now works as a clinical nurse specialist. “I love my nursing career,” she says. “It’s very important to me that I continue to nurse on the frontline. I need to make a difference. There’s nothing quite like that feeling of helping a client and hearing them say thank you.”

Supported by her family, Cecilia, a carer for her daughter who has learning disabilities, has long experience of juggling her clinical duties and RCN responsibilities. She’s been involved with the College for more than 30 years, providing advice to members informally at first before training to become a steward and safety representative then becoming branch secretary, branch chair and latterly RCN Deputy President.

“The last four years have prepared me well,” she says. “I had a great mentor and role model in former RCN President Andrea Spyropoulos. Now it’s my turn to make my mark.”

Fighting for change

Much of what drove Cecilia to take action initially continues to inspire her today. Through her involvement with clinical grading and the implementation of Agenda for Change, she saw members disillusioned with the profession, downbeat about a situation they felt was out of their control and resigned to keeping their heads down. Upon getting involved with the RCN, Cecilia found that things could be different and that fighting could bring about positive change.

“I saw that the work of the RCN, both as a trade union and professional organisation, is ultimately about improving patient care. By supporting members and making their working lives better, we can have an impact on how a nurse feels about their profession and the quality of care they deliver. That remains my motto: patients first, always patients first.”

But it was attending RCN Congress for the first time that really ignited the fire in her. “It was such a buzz,” Cecilia reflects. “It was just overwhelming. Everyone wanted the same thing and they were prepared to fight for it. I saw the RCN truly in action and I thought to myself, I could do something here. I could really do something.”

Did she ever believe she could become RCN President? Cecilia
I'm proud and grateful to have been elected as your Deputy President and look forward to campaigning with members across the UK on behalf of nursing and high quality patient care and public health.

As an RCN activist since 1986 the College has helped me grow as a nurse, influencing my professional development and representing me when things were tough. Whether as a safety representative, branch officer or forum chair, being an activist for nursing has always been important to me. Paying back the support I have received and working for my colleagues is important too.

For 2015 there are, in my view, two key priorities for nursing. The first is campaigning for raised standards of nursing care in community and hospital settings. To achieve this, we must have safe staffing levels. The second priority is fair pay and conditions for nurses and health care assistants wherever they are employed. Working together we will achieve these objectives.

I want members to feel engaged with what we do and speak out against injustice. Don't just sit back and pay your subs. Be a part of making change happen.

Her resolve and resilience paid dividends. In 2010 she was elected RCN Deputy President at her first attempt. Now, after four years in the role, she becomes the first person of black or minority ethnic (BME) origin to become RCN President. "I don't see myself as a BME president," she stresses. "I see myself as somebody for everybody. My race is not significant. If I can inspire a few people who might not see the RCN as being their natural home, then all the better. But I want to be known for who I am as a person, not for the colour of my skin."

So what does Cecilia want to achieve during her term of office? What does she want to be remembered for when the two years are up? She laughs at this question, keen to get cracking first, before pondering the end of her tenure. But she quickly regains her sense of seriousness.

"There are so many challenges that need overcoming," she says sombly. "Nursing staff are working in tough times. Morale is low, pressure is high and members are not being rewarded as they should be. There's such negative press for nursing right now. We need to claim the profession back, restore the integrity and respect the public have for nursing and maintain the confidence of those who use our services. Managers need to be held to account and carve out a culture that is nurturing, supportive and which encourages innovation."

But there is a bigger bee in Cecilia’s bonnet, one that she’s determined to tackle during her time in the role. "I’m passionate about improving member engagement. I’m going to get out there and find out what it would take to get people involved. The RCN offers so much more than workplace support when a rough patch is hit. I want members to feel engaged with what we do and speak out against injustice. Don't just sit back and pay your subs. Be a part of making change happen.”

Cecilia’s key priorities

- **Campaign** against unfair and unjust government decisions on pay.
- **Fight** for better terms and conditions for all health care workers.
- **Strengthen** the functions of the RCN so it better meets the needs of members.
- **Speak out** against damaging cuts in frontline staffing and nurse education and expose their impact on patient care.
- **Celebrate** the successes of nursing through supporting research and innovation.
- **Extend** the influence of the RCN both nationally and abroad by working in partnership with organisations beyond the NHS.

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www.rcn.org.uk
Modern history

The RCN has joined forces with UK and US partners to increase online access to a fascinating and extensive collection of Florence Nightingale’s letters

Historical figures can split opinion. The name of Florence Nightingale engenders feelings of deep pride for many nursing staff. Others, however, seem tired of “the lady with the lamp”, asking what relevance her work has for the modern nursing professional.

Whatever your view, Florence was a prolific letter-writer. As a result, there is a large body of primary evidence to draw upon. Now a new digital database of her letters has widened access to these precious documents.

No longer solely the domain of historians and archivists, they are now available, free of charge, to nursing staff and the public.

With her views so clearly documented, on subjects ranging from hospital design to rural health services, individuals can form their own opinions and decide whether her ideas are still relevant.

Collaboration

The Florence Nightingale Digitisation Project is a collaboration between the RCN, the Florence Nightingale Museum, the Boston University Howard Gotlieb Archival Research Center and the Wellcome Library. The correspondence held by all four institutions was compiled into a database currently consisting of almost 1,900 letters handwritten or dictated by Florence.

Fiona Bourne, RCN Archives Manager, says it was important for the RCN to get involved. “It was an opportunity we couldn’t miss,” she says. “Our collection of letters is relatively small but now the work has developed into an international collaboration. Anyone searching for the letters we hold will be directed to the RCN website.”

Fiona adds: “Not only is it an easy to use and accessible service, but it also provides an excellent opportunity to promote the RCN’s archive. We hope to work in collaboration on similar projects in the future.”

Search the database at http://tiny.cc/FlorenceDatabase

Work without boundaries

Natasha McEnroe, Director of the Florence Nightingale Museum

Why build a digital database?
We made our letters available on the internet but we were aware of several being digitised elsewhere. We thought it would be a good idea to bring them together.

Will more letters be added to the database?
Yes. The letters are scattered across the world in collections of various sizes so we initially focused on what was held by the four founding partners for the launch. We will soon have many more significant partners including the University of Birmingham Alabama and Harvard Medical School.

What’s interesting about the letters?
They’re so relevant to nursing today and they demonstrate how a nurse can influence. Florence Nightingale was skilled at advocacy and negotiation; you can see how she would change her style of writing depending on who she was writing to. Her letters will also be of interest to anyone who wants to read about the perception of care and compassion, infection control and many other issues.

What part of the project are you most proud of?
I’ve seen, first-hand, the international commitment to this work. As soon as we launched it as an idea, people got on board and it has since snowballed.

Who will benefit from the work?
Everyone from researchers, nursing staff, very senior academics, family historians to students. Wouldn’t it be great for a school child to print out a copy of a letter and put it into their school book as part of their research into the life of this important historical figure?
A good job too

Cathy Taylor, RCN Careers Adviser, says that whatever your stance on social media, you can make it work for you if you are looking for a new job in 2015.

With shortages of nursing staff across the board, why not put yourself in the driving seat when it comes to securing a new job in 2015? Using social media can save you much-needed time and energy in your job search, and offers a growing number of tools to help you on your way.

LinkedIn

The largest online professional network, LinkedIn has more than 161 million members worldwide. Many organisations, particularly in the private sector, scan LinkedIn profiles to search for skilled workers in a particular location. A good profile can highlight your skills, experience and education to potential employers. Make sure you keep your page up to date and use keywords that reflect the skills you would like to use in your next job.

LinkedIn can also help you connect with people in nursing and health care. So it’s not just about employers looking for you, but you identifying people who might help you in your career – to organise work-based shadowing, for example.

When you target professional contacts on LinkedIn, it’s best to keep your approach specific, showing an interest in that particular organisation or individual. Be friendly and professional. You can also join professional discussion groups to broaden your connections and knowledge, or even set one up yourself.

Twitter

Twitter enables you to follow potential employers and set up a customised feed (called a ‘list’) of relevant accounts. You can also post comments about professional issues and use relevant hashtags, such as those of major health care organisations.

RSS feeds

These are newsfeeds and blogs that you can subscribe to through organisations’ websites. The advantage of them is that you can automatically receive new content as soon as it is updated. Look out for RSS feeds on recruitment sites so that vacancies are fed directly to your computer.

A word of caution

Such are the pitfalls of social media that the Nursing and Midwifery Council (NMC) plans to introduce a clause to the new version of the code. This is expected to be published in the spring. You can access guidance by visiting the NMC website and searching for ‘social networking’.

Remember

- Always make sure employers can only access the information you want them to.
- Ensure your use of social media for job hunting is professional. Consider setting up separate Twitter accounts for professional and personal use.
- Check privacy settings on Facebook so you’re only sharing information with your friends.
- Think of yourself as a “brand” – what are the key messages about you that you would like to get across? How can you make sure that information about you in the public domain conveys that message?
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*10% of new RCN customers with 5 years NCD paid £159 or less between 01/08/2014 - 31/10/2014. †10% of new RCN customers paid £107 for buildings and contents between 01/08/2014 - 31/10/2014.

For TextDirect: first dial 18001. Calls may be recorded.
Mon-Fri 8am-9pm, Sat 8am-5pm, Sun 9am-5pm.

The Royal College of Nursing acts as an Introducer Appointed Representative to the Liverpool Victoria group of companies for General Insurance.
From the heart

A Newport nurse has shown how passion and expertise can be harnessed to help save lives. John Hoddinott reports on how it’s done

Phil's passion paid off. His proposal has now been passed to Assembly members for consideration and a draft report is being shaped to inform the debate. The legislation, if agreed, would state that public places are required to display an AED device.

Phil says: “This could be another example of Wales leading the way, with a vital piece of law that is not only a public health concern, but a life-saving issue. If we can do this in Jack's memory, it would be brilliant.”

When RCN member Phil Hill discovered that automated external defibrillators (AEDs) were available in public areas in places as far apart as Florida and Monaco, he wondered why there wasn't similar provision in Wales. “The fact that a piece of potentially life-saving technology is made available to the public in other parts of the world made me question why it isn’t happening here,” he says.

Phil set out to gather support for a new law in Wales on the mandatory provision of AEDs in public places. He started by creating an online petition via the National Assembly for Wales website.

Politicians began to listen and he was invited to provide evidence to the Assembly’s petitions committee on his proposal. He then became aware of Jack’s Appeal, a campaign created by the mother of local schoolboy Jack Thomas, who died suddenly of an underlying heart defect. Jack’s mother, June, had set up an appeal to raise awareness of the need to screen young people for similar heart defects.

Phil invited June and a senior officer from the Welsh Ambulance Services NHS Trust to join him in providing evidence to the committee. And with June's agreement, Phil renamed his proposed legislation "Jack's Law".

**Survival rates**

“In my evidence I wanted to highlight international data which attested that with simple, co-ordinated public awareness and training campaigns, reinforced with public access defibrillator legislation, survival rates can be more than tripled,” he says. Every minute defibrillator use is delayed following cardiac failure, a person's chance of survival falls by 10 per cent, even if CPR is employed.

Got an idea?

Steph McMeeken, RCN Parliamentary Officer, has this advice on getting messages heard.

• Contact your local elected representative – MPs prioritise constituent queries and building a relationship first makes them more likely to help you. Write a letter or, even better, visit them at their surgery. Let them know what you want and ask for a clear commitment.

• Start an e-petition. Those with more than 100,000 signatures can be considered for debate in the House of Commons. There are many petitions on the go at once and the number that secure a debate is relatively small, so consider the wording carefully.

• Use social media. Whether it’s tweeting the meeting with your MP or sharing your e-petition, use these free channels to drum up support for free. Facebook and Twitter are great places to start.
Improving continence care services

The Continence Care Forum had a busy and productive year in 2014. The forum organises an annual continence conference with the help of the RCN. In previous years this has been held in York, Manchester, Birmingham and Liverpool. The 2014 conference, Continence – Let’s Make It Everyone’s Business, took place in Brighton in November and featured a keynote speech from June Rogers, Director of PromoCon.

Forum Chair Anthony Brooks is part of the Patients, Industry and Professionals Forum for Stoma and Continence Care. The forum was responsible for writing guidance for GPs on prescribing for continence and stoma products, which was launched in 2014. Anthony is also chairing a group that is reviewing the collaborative standards for the industry involved in stoma and continence care.

Meanwhile, committee member Liz Bonner had the opportunity to attend the 5th Global Forum on Incontinence in Madrid in April. More than 300 participants from 30-plus countries came together to learn more about the impact of incontinence on patients, carers and society, and to discuss solutions.

Last year also saw the publication of a new handbook for the commissioning and running of paediatric continence services. The Paediatric Continence Commissioning Guide is endorsed by the RCN. It will assist commissioners, clinicians and managers in delivering integrated and evidence-based community paediatric continence services that meet the needs of children and young people with continence difficulties across England.

The current forum committee members are Anthony Brooks (Chair), Ronalda Agnew, Liz Bonner, Stephen Miles, Karen Tomlin and Alison Wileman. They are united in their passion for improving continence service provision and education and welcome new members who are interested in joining the forum.

First steps for forum on world stage

The RCN is continuing to raise the profile of midwifery, both within and beyond the organisation.

Five new committee members have been appointed to a revitalised RCN Midwifery Forum.

They will take up their positions this month and come with extensive experience in midwifery practice, management, education and research.

The new committee will harness the talents and experience of the RCN’s midwife members, who work across the full range of services in the NHS and independent maternity care, as well as student midwives and maternity care assistants.

Carmel Bagness, RCN Professional Lead for Midwifery and Women’s Health, said: “The midwifery committee will be welcomed by our midwife members and will ensure wider representation of the RCN midwifery voice where it matters.

“Midwifery is a different profession from nursing, and although midwife members can already access the full range of RCN services, it’s appropriate that they are given the opportunity to have a voice within the College.

“As a forum they will be able to share and explore their particular needs and expectations as a different professional group.”

As the RCN is a member of the International Confederation of Midwives Council (ICM), the forum will also be involved in representing the College in the global midwifery arena.

“Having a midwifery committee will also help us to further enhance our relationship with the ICM and engage with global midwifery issues,” Carmel added.

To find out more about the forum, contact the committee and contribute to ongoing discussions, visit the midwifery forum pages via the RCN website. Visit www.rcn.org.uk/midwifery or www.rcn.org.uk/myrcn to join.
FGM conference

The RCN is holding a conference on female genital mutilation (FGM) next month. *FGM: Zero Tolerance and Maximum Action* will take place at RCN HQ in London on 6 February.

The conference aims to enhance knowledge and understanding of FGM and will mark the launch of the updated RCN publication, *Female Genital Mutilation: An RCN Resource for Nursing and Midwifery Practice*.

The RCN has also paid tribute to Efua Dorkenoo OBE, a leading figure in the fight to end FGM, who died late last year. Carmel Bagness, RCN Professional Lead for Midwifery and Women's Health, said: “We’re all very saddened to hear of the loss of such a strong and charismatic woman who strove to eradicate FGM internationally.”

NI CYP consultation

RCN members in Northern Ireland are encouraged to share their views on how to improve the health and wellbeing of children and young people, their carers and families.

The Department of Health, Social Services and Public Safety is consulting on a draft service framework for children and young people.

Please email john.knape@rcn.org.uk if you would like to help influence the RCN’s response. The closing date for responses is 30 January.

TB module

The RCN has accredited an online module on the molecular diagnosis of tuberculosis.

The three-hour module has been developed by Public Health England’s National Knowledge Service – TB, and is targeted at all nurses with an interest in TB.

Anyone can complete the module and you do not need to be registered with the RCN to do so. To access the module visit http://tinyurl.com/k4tfmz

ENT success

The RCN ENT/Maxillofacial Forum held a conference at RCN headquarters in London in November.

Highlights included a talk by Chris Bem, an ENT consultant from Bradford, on his role as a visiting surgeon at the Malawi College of Medicine.

The event also featured talks on ENT, hearing and balance care research, advances in maxillofacial surgery and rebuilding after surgery.

Forum Chair Andrew Hill, who also chaired the conference, said: “It’s encouraging to see that we’ve got some really good programmes for improving patients’ quality of life. That’s what nursing is all about.”

What I’m thinking

**Anthony Linklater**
RCN Neurosciences Forum Committee Member

Former New Zealand MP Tau Henare had no idea he would create a media storm when he recently tweeted: “Just wondering if #Lorde has epilepsy”, which was intended to be a light-hearted comment on the singer-songwriter’s dancing abilities.

The ensuing media coverage was broadly critical of Henare’s tweet. Even though there was no malicious intent, jokes such as this only serve to perpetuate the negative way in which epilepsy is perceived.

Like many others, I decided to take to Twitter to register my disapproval. As a nurse who spends his working life supporting people with epilepsy, I see first-hand how damaging negative comments can be.

Hopefully, the storm created by his joke will have a positive outcome by helping to reinforce the message that it is not acceptable to have a laugh at the expense of others unfortunate enough to have a serious medical condition.

*This is an edited version of a longer blog post. To read the full version visit www.rcn.org.uk/neurosciences*
Northern Ireland
www.rcn.org.uk/northernireland
Belfast
Friday 23 January
RCN Northern Ireland HQ, 17 Windsor Avenue, Belfast BT9 6EE
RCN Northern Ireland Outpatients Network workshop.
For more information email cst@rcn.org.uk

Scotland
www.rcn.org.uk/scotland
Glasgow
Thursday 29 January, 1.30-4.30pm
Carlton Heritage and Learning Centre, 423 London Road, Glasgow G40 1AG
Delegation and accountability seminar. PREP/CPD event on important issues for nurses and HCAs.
Opportunity to meet new RCN Deputy President Rod Thomson. Email greg.usrey@ggc.scot.nhs.uk

Wales
www.rcn.org.uk/wales
Llandudno Junction
Friday 27 February
Conwy Business Centre, Junction Way, Llandudno Junction, Conwy LL31 9XX
Two RCN Wales seminars.
In the morning, the Mental Capacity Act 2005 and deprivation of liberty safeguards and in the afternoon, safeguarding vulnerable adults. Call 02920 680713 or email rhona.workman@rcn.org.uk

East Midlands
www.rcn.org.uk/eastmidlands
Kettering
Tuesday 3 February, 9.30am
St Mary’s Hospital, 77 London Road, Kettering NN15 7PW
RCN Northamptonshire members’ meeting and free learning event.
All RCN Northamptonshire members are invited.

Europe
www.rcn.org.uk/european
Bury St Edmunds
Thursday 5 March
Venue TBC
The role of the RCN learning representative in raising concerns about nursing and health care.
This event will help you understand your representative role in terms of the context for speaking out and supporting others to raise concerns. Email sue.wilton@rcn.org.uk

Western
www.rcn.org.uk/western
Stafford
Wednesday 21 January, 12 noon
Learning Centre, St George’s Hospital, Corporation Street, Stafford ST16 3SR
RCN South Staffordshire Local Learning Event: NMC code of conduct and safe staffing. Presented by Howard Catton, the RCN’s Head of Policy and International, this event will update you on the work taking place nationally to establish safe staffing levels and the NMC’s new revalidation system.

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Yorkshire & The Humber
www.rcn.org.uk/yorkshireandhumber
Leeds
Wednesday 18 February, 2-4pm
RCN Leeds Office, 9 Bond Court, Leeds LS1 2JZ
West Yorkshire Branch meeting. All West Yorkshire members are welcome.