Representing you

The election of two new health practitioner members of RCN’s governing Council means health care assistants and assistant practitioners (HCAs and APs) will be formally represented in the College’s governance structure for the very first time.

The next step will be the new, formal Health Practitioner Committee, which was due to be agreed by RCN Council in July. It will have its own terms of reference and will take over the role of the existing HCA and AP Committee – which was set up to raise the profile of HCAs and APs within the RCN and tackle the issues which affect them.

The new committee will still represent all the College’s HCAs and APs and include members from each of the English regions and Scotland, Wales and Northern Ireland. Elections are due to take place in the autumn, with committee members due to begin their terms of office in January 2013. Voting in the committee election will be taking place online. So it is vital for the RCN to have your up-to-date email address. Check your details at www.rcn.org.uk/myrcn

In addition to putting across the HCA and AP perspective within the RCN and influencing policy, the committee will also play a large part in the HCA and AP programme for Congress each year. To find out more about HCA and AP activity within the RCN visit www.rcn.org.uk/hca or email hca@rcn.org.uk

Your RCN HCA and AP Committee

Brenda McIlmurray
Northern Ireland

Maive Coley
East Midlands

Lorraine Hicking-Woodison
South East

Jean Marshall
Scotland

James Hellard
London

Steve Dunne-Howells
South West

Laura Macken
Wales

Sue Harkness
Northern

Derek Broderick
West Midlands

David Herring
Eastern

Richard Holtby
North West

Position vacant
Yorkshire & The Humber
Welcome to our election issue of RCN HCAs&APs magazine! We had great feedback for the special issue earlier this year and I hope you will find this one equally useful and interesting.

There is a lot going on in the world of support workers at the moment. The RCN is currently heavily involved in the work by Skills for Health and Skills for Care on developing a code of conduct, minimum induction standards and competences for health care and adult social care support workers in England. This is a huge project and already the College has been instrumental in ensuring that more of you, the people who will be affected by this work, could have your say in the consultation process. Check out the progress at www.skillsforhealth.org.uk

The RCN position remains the same – we strongly believe that mandatory regulation of all HCAs and APs is the best way forward and in the interest of public protection. Read more at www.rcn.org.uk/hcaregulation

For RCN members, this magazine comes with your voting papers for the first health practitioner seats for HCAs and APs on RCN Council. We want you to have your voice heard loud and clear and to be involved in the important decisions that are made by Council members. So please make sure you vote to ensure that you are represented by your colleagues.

Please share this magazine with your fellow HCAs and APs. For only just over £4 a month for the first year of membership they too can be part of the organisation that cares for you as much as you care for your patients. Let us know what you think of our magazine and if you would like to write something for a future issue please email hca@rcn.org.uk

Tanis Hand
RCN HCA and AP Adviser

RCN membership costs less than you think

Did you know that RCN membership for an HCA or AP costs just £4.06 per month for the first year, and only £8.12 per month after that?

You can also claim tax relief on your subscription to reduce the cost. Visit www.rcn.org.uk/taxrelief

And as well as RCN membership being great value for money, it also gives a wide range of membership benefits, including:

• discounts on shopping and other services through RCNXtra

• access to the largest specialist nursing library in the world with more than 64,000 books, key nursing databases, 1,000 e-journals and 600 e-books

• the help of 4,000 accredited representatives in workplaces across the country.

Make sure you encourage your colleagues to join and become valued members of the UK’s only dedicated nursing union.

To sign up, visit www.rcn.org.uk/join and select the “health practitioner” membership category.
HCAs and APs make an impact at RCN Congress 2012

The RCN’s health care assistant and assistant practitioner (HCA and AP) members were out in force at this year’s Congress, held in May at the Harrogate International Centre.

Wearing red t-shirts, HCAs and APs were prominent when they were in the auditorium listening to the keynote speakers and taking part in debates, as well as participating in seminars covering issues such as dementia and the inclusion of people with learning disabilities in health services.

Members of the RCN’s HCA and AP Committee ran an acclaimed session on the RCN Principles of Nursing Practice, which used patient stories to help delegates to apply the principles in the workplace. Delegates discussed a scenario featuring an older person and another featuring a health care colleague and examined how they accessed treatment and whether they were treated with dignity.

Tanis Hand, RCN HCA and AP Adviser, said: “This was the best year yet for HCAs and APs at Congress. I’m looking forward to our HCA and AP members making an even bigger impact at Congress 2013.”

RCN Congress is the centrepiece of the College’s year, with a range of agenda-setting debates, speakers and seminars.

To look back at Congress 2012, visit www.rcn.org.uk/congress

RCN Congress 2013 will be held from 21-25 April in the Arena and Convention Centre in Liverpool.

RCN elections 2012

This year, the RCN’s HCA and AP members can elect their own representatives onto RCN Council for the first time. The voting papers were sent to members with this copy of the magazine, and should be returned by 14 September.

Go to www.rcn.org.uk/elections and look under “health practitioner members of Council” for more details.

RCN elections – see page 7.

New CYP guidance available for APs

New guidance, called The Assistant Practitioner Role in Children and Young People’s Services, has been launched by the RCN.

It contains a report on how APs work in CYP services as well as guidance for practice. Among its recommendations are calls for core standards to address the specific needs of children and young people to complement the Skills for Health AP core standards, as well as evaluation of the role.

To read the guidance, go to www.rcn.org.uk/publications

Award winner

Congratulations to Stephanie McConville, from the Northern Ireland Children’s Hospice community service, for winning the Health Care Support Worker Award in the RCN Northern Ireland Nurse of the Year awards.

RCN Wales’s Nurse of the Year Awards, also including a HCSW category, will be announced in November.
March against government cuts

HCAs and APs will be joining fellow nursing staff and other public sector colleagues in a march against continuing government cuts.

The RCN is supporting the Trades Union Congress (TUC) march, called “A Future That Works”, taking place on 20 October in London.

RCN members from across the UK are taking part after the College’s Frontline First campaign identified that more than 61,000 NHS posts are earmarked to be lost across the UK. Members are also reporting widespread cuts to services as the NHS in England seeks to save £20 billion in efficiency savings by 2015.

Dr Peter Carter, RCN Chief Executive & General Secretary, said: “Nursing staff showed the strength of feeling when they marched last year and the fact that they are coming together again demonstrates the depth of their concern about these cuts.”

The RCN is liaising with the TUC around logistics for the march and will advise members of how to get involved in due course.

For the latest updates, keep visiting www.rcn.org.uk, and for more on the march, visit www.afuturethatworks.org

Let’s talk about pain

HCAs and APs are invited to attend the RCN’s national conference on the experience and management of patient pain, taking place in London on 12 October.

The conference is being produced by the RCN Pain and Palliative Care Forum, with sessions led by nurse specialists in pain management.

Forum Chair Felicia Cox said: “Managing pain is the responsibility of the whole nursing team. HCAs and APs play an important role in delivering effective pain management and this is a fantastic opportunity for them to develop their role by improving their understanding of why patients experience acute and chronic pain.”

For more information, visit www.rcn.org.uk/pain2012

Interact with the RCN on social networks

There are various different ways to interact with the RCN and fellow members using social networking.

Facebook

Join the 15,500 members who “like” the RCN; to be informed of the latest breaking news, have the chance to discuss the issues that matter and learn more about the work of the College.

Go to www.facebook.com/royalcollegeofnursing

Twitter

Follow the RCN on Twitter for breaking news from the RCN and the world of nursing and health care.

Go to www.twitter.com/theRCN

RCN Discussion Zone

The RCN Discussion Zone is a members-only forum, where everything from nursing and employment relations issues, to current affairs, social issues and popular culture are discussed.

Members share their advice, insight and good practice. There is a dedicated section for HCAs and APs, and also for a wide range of nursing specialties.

To access the Discussion Zone, go to www.rcn.org.uk/discussionzone

Members are advised to read the RCN’s Legal Advice for Using the Internet, which gives information about safely interacting online in a way that will not cause problems at work. Read the advice at www.rcn.org.uk/publications
A uniform approach

Martin Semple, RCN Wales Assistant Director (Professional Practice), explains how a national uniform helped reinforce health care support workers’ position in the nursing team.

Going green

A group of HCSWs first started wearing the green uniforms in April 2010 in North Wales. Ward sisters wear navy blue, clinical specialist nurses wear royal blue and staff nurses wear sky blue.

There was a lot of evidence considered about what style of uniform would minimise the risk of spreading infection from one person to another. There are short-sleeved versions which help to ensure effective hand washing and minimise the spread of infection.

There are a few exceptions. It was thought that some clients with learning disabilities may get a little bit overwhelmed by people in uniform. Some nursing staff working in mental health, nurse specialists and paediatric health care staff do not wear them either. But the vast majority of HCSWs are wearing the green uniform as all seven of the health boards have now fully implemented the all-Wales uniform.

Making HCSWs easily identifiable

I think that the principle that people need to be easily identifiable is important for patients – we have all heard patients ask about who is a nurse, a doctor, a student, a social worker or an HCSW.

The staff uniforms make it easy to identify who is who. It is important from a patient perspective, and I would recommend that it should be considered in the parts of the UK who don’t have national uniforms.

From a staff member’s perspective, it gives a sense that each of these groups is an important part of the workforce; a common identification and a common purpose.

I think the uniforms achieved what they intended and the feedback from HCSWs has been positive – the uniforms show they are an important part of the health care team and recognise the contribution they make to health care in Wales.

For more on the RCN in Wales, go to www.rcn.org.uk/wales

The HCSW uniform is worn in hospital and community settings

The decision to introduce a national uniform in Wales goes back to a former health minister who made unannounced visits to NHS hospitals. She noticed there were variations in the quality and style of uniform that staff at the same grades were wearing and she was concerned that patients would not know who was who. So it was decided that staff of the same grade would wear the same type of uniform in the NHS in Wales.

The uniform is more than an item of protective clothing. A clean, tidy uniform is symbolic of the individual who wears it, representing an organised person who has understood the impact their appearance has on the patients and clients they care for. Health care support workers (HCSWs) make a valuable contribution to health care and it was agreed that they should be given their own uniform.
Election fever

Find out more about this year’s RCN elections and why you should have your say

This summer, the RCN’s health care assistant and assistant practitioner (HCA and AP) members will be voting for two dedicated seats for HCAs and APs on RCN Council for the very first time.

Health practitioner seats for HCAs and APs on RCN Council

**Role:** The new seats will give HCA and AP members a voice at the top table of the RCN and ensure issues relevant to HCAs and APs are at the forefront of the College’s agenda. It means HCAs and APs will work with the rest of RCN Council on matters affecting the whole nursing team.

**Term of office:** One seat’s term of office is until 31 December 2013, and the other is until 31 December 2015. Those elected will take up office after the annual general meeting (AGM) on 17 October.

**Candidates and voting papers:** RCN HCA and AP members will have received the candidates’ names and their statements along with the voting papers in the post with this magazine.

**Voting papers must be returned by 14 September.** For more information on the elections and the candidates, visit [www.rcn.org.uk/elections](http://www.rcn.org.uk/elections)

Other elections

The **President** and **Deputy President** represent the RCN and nursing to the membership and the wider public, as well as influencing health care practice and policy across the UK and internationally. The elections were unopposed, and Andrea Spyropoulos and Cecilia Anim will serve as President and Deputy President respectively for a second two-year term.

RCN student members will also be casting their votes for two new **student members of RCN Council**.

**Elections: why they matter to you**

Hamish Kemp

**Council Member for the North West**

I am the RCN Council lead for HCA and AP regulation. We have recently been responding to consultations over minimum standards and competences for HCAs and APs, while maintaining that mandatory regulation is the best way forward. I am extremely aware that it is important to have your vital role in health care recognised and developed appropriately.

Therefore it is fitting that the RCN has decided to reflect this by giving you the chance to vote for two members to represent you as HCAs and APs on RCN Council. This is so important because it gives you:

- the chance to vote for the people who you want to represent you
- the chance to have your voice heard on Council
- the chance to make a difference to the RCN and help us make it a truly membership-led organisation.

For those of us already on Council, it is really important to hear your voice because we want to speak for the whole of the nursing team – of which HCAs and APs are such a vital part.

So please read the election papers now and select the candidates who you feel will best represent you as an HCA or AP – please do not put the papers to one side and forget them as those few minutes can and will make real difference to the RCN’s future.

So it is over to you. The RCN is waiting for your decision.
A quarter of adults admitted to hospital, more than a third of adults admitted to care homes and up to one in five adults admitted to mental health units in the UK last year were shown to have medium or high risk levels of malnutrition, according to a survey by malnutrition charity BAPEN.

While protected mealtimes are designed to ensure people have the time and space to eat properly, it requires commitment and resources. Ailsa Grant is a clinical support worker in a medicine for older people unit and she has long recognised the importance of effective nutritional care.

“Staff in our unit make sure patients are not disturbed during mealtimes, and get the support to overcome any limits on their ability to eat properly,” says Ailsa. “Each day we have a mealtime co-ordinator, a role that staff – including HCAs – take turns to carry out. It is the co-ordinator’s responsibility to see that everybody gets a meal and those who need help eating get that help. All staff pitch in and help.”

Ailsa values what she learned about nutrition on the RCN Supporting Better Care programme. The programme is available to all HCSWs and APs in Scotland and demonstrates how good nutrition is integral to all aspects of care. “I learned how good nutrition is part of respecting a patient’s dignity. It is a vital part of a holistic approach to caring for and supporting patients,” she says.

What Ailsa learned on the programme also changed her perspective on her wider practice, as it also covered topics like patient dignity, infection control, sensory impairment, dementia and diabetes. “So many aspects of the programme helped me to see things from the patient’s point of view,” she says. “It’s all about being approachable, giving time to patients, and listening when they are concerned.”

For more information about Supporting Better Care email sbc@rcn.org.uk or telephone 0131 662 6152.

Tips for assisting patients while they are eating

- Ensure you are in a comfortable position to help the patient eat because you may be standing or sitting for a long time.
- Make sure everything you and the patient need is positioned close at hand to avoid overstretching and strain.
- Encourage independence by getting patients to do as much for themselves as they possibly can.
- Be at the patient’s eye level when supporting them to eat.
- Make sure the patient is in a comfortable feeding position.
- Help the patient to eat at their own pace taking into account any physical limitations and clues from body language.
Good nutrition is vital for patients’ wellbeing

**Nutrition now**

A series of RCN resources on nutrition and hydration, designed to raise standards in both hospitals and in the community, are available from [www.rcn.org.uk/nutritionnow](http://www.rcn.org.uk/nutritionnow)

The resources were designed to provide nursing staff with the practical tools, support and evidence they need to make nutrition a priority in the area where they work.

There are also case studies from a variety of care settings examining how nutrition and hydration have been improved.

**Making protected mealtimes work**

One London care home decided to change its mealtimes after looking at residents’ nutritional health and its catering service.

The choice of meals was limited, there was no formal menu or any systematic nutritional screening of residents. Food was pre-cooked and frozen, and received many complaints; while medication rounds also took place at mealtimes.

But working with the local primary care trust and staff, including the care assistants, the care home decided to implement protected mealtimes – where residents can eat without disturbance and receive any help they need.

Residents and their families were involved from the outset, with letters and meetings to help keep them up to date.

The changes included:

- cooking meals on the premises from fresh produce
- printing a menu with a choice of meals, made available in advance
- residents sitting with friends or alone if they wish
- staff altering breaks to be present at mealtimes
- clinical procedures and medication rounds no longer disrupting mealtimes
- designating specific areas for residents who need help with their meals
- improving the environment by decorating the dining room, replacing the curtains and table cloths, providing fresh flowers and giving residents the opportunity to choose music.

Read more about this case study, and other best practice examples, at [www.rcn.org.uk/nutritionnow](http://www.rcn.org.uk/nutritionnow)
LEARNING REPRESENTATIVES

Develop your knowledge and skills

Having more HCAs and APs as learning representatives helps everyone to develop and improve their practice

The RCN’s learning representatives play a vital role in supporting members to access the best opportunities to learn, develop and improve their practice.

It could be highlighting the latest opportunities on offer from the RCN, or encouraging managers to provide more opportunities for staff to learn.

The responsibilities include:

• supporting and providing information for members on the planning and managing of learning and development
• contributing to the development of colleagues through negotiating and supporting continuing development
• keeping up to date with learning opportunities and promoting information, resources and support for members to meet their learning needs.

As a learning representative you would receive training and support from the RCN, and an opportunity to develop your own transferable skills in the workplace.

In Northern Ireland, a project has been taking place to increase the number of learning representatives, and to find out more about the needs of health care assistants (HCAs) working in the independent sector.

Marie McAteer, from the RCN in Northern Ireland, said: “One of the benefits for HCAs and APs is being able to tap into the fantastic resources the RCN has to help them develop. We want HCAs and APs to access learning and development and get their colleagues on board.”

RCN members can find out about becoming a learning representative or other activist roles – anywhere in the UK – at www.rcn.org.uk/becomearep

For more information about the RCN in Northern Ireland, visit www.rcn.org.uk/northernireland

Jackie McCaughey: I help others to learn

A learning representative from Northern Ireland outlines her journey

Seven years ago, I became a part-time care assistant in a nursing home. Within a year I completed my NVQ2. I became an RCN member as I knew there was plenty of additional training available that would help me.

Six months later I completed my NVQ3 and secured a senior care assistant post in a residential unit.

I became the team leader shortly after completing the Level 4 Registered Managers Award, and then the RCN offered to support me undertaking the K100 Open University course.

In 2010 I was asked to become an RCN learning representative. This has proved to be both interesting and rewarding as I help others to access learning opportunities. I am now an area manager for a charity and lead of the local HCA network.

A lot to pack into seven years but all of it worth the time and effort.
Getting under the skin

Helping patients with skin conditions needs more than cosmetic help

The sun may not have come out much this year, but summer would usually be the time to break out the shorts and flip flops. But for people with skin conditions, it can be the most difficult time of the year. It is believed that eight million people in the UK – about 12 per cent of the population – have some kind of skin disease.

Two per cent of the population are believed to have psoriasis, one per cent are believed to have vitiligo (pictured below), and around 80 per cent of teenagers have some form of acne.

Closer to home, it is believed that the cocktail of solvents, soaps and detergents nursing staff are exposed to can cause dermatitis. International research shows that up to half of health care workers experience some kind of dermatitis each year.

A key factor to consider is that for many patients, the issues are not just skin deep. Earlier this year, the British Skin Foundation (BSF) surveyed 729 people about their skin complaints. Seventy per cent of respondents said it had reduced their confidence, and 42 per cent said it had impacted on their work. One in five said their skin condition was the driving factor in the breakdown of a relationship, while 46 per cent had been verbally abused.

Katie Croisdale, an AP who works in a dermatology clinic, said: “I find working in dermatology is fascinating, I really enjoy it – we do not know what’s coming through the door next.

“Once someone is told they have a melanoma or any form of skin cancer it can affect the rest of their life. It is satisfying to know you are involved in the more visible side of their treatment, but we all strive to give the best possible cosmetic appearance after surgery.”

Some common skin conditions

Psoriasis causes flaky, red patches on the skin. They can look shiny and cause itching or burning. Eczema can occur when you come into contact with a particular substance. It can cause red, itchy and scaly skin.

Source: www.nhs.uk

RCN Long Term Conditions Adviser
Amanda Cheesley says...

People who have skin conditions, especially children and young people, can be subject to unkind remarks, unwanted attention and indeed bullying. The effect on people can be devastating and leads to some withdrawing from society and becoming isolated, lonely and depressed.

Because of the visibility of many skin disorders, people can have poor body image and often feel unable to wear swimming costumes or clothes that reveal affected parts of the body so adding to the feeling of being different.

Health care assistants and assistant practitioners may well have to care for people with skin conditions and may be involved in applying treatment or supporting registered nurses in clinics. So it is important to be aware of the potential psychological impact that living with skin disorders can have.

A number of organisations provide support and information to people with skin disorders and specialist cosmetics are available that can provide some coverage, so signposting people to them is important.

Online resources

British Skin Foundation
www.britishskinfoundation.org.uk

Read Tools of the Trade: An RCN Guide for Health Care Staff on Glove Use and the Prevention of Contact Dermatitis – www.rcn.org.uk/dermatitis
Let the RCN help you learn

The RCN has a whole host of opportunities to support your learning, development and practice. Here are some of the ways the RCN can help HCAs and APs across the UK

First steps to support

New to an HCA post? Make sure you check out the online First Steps guidance, created especially for HCAs to ensure you have a solid base of knowledge about patient care. Visit www.rcn.org.uk/hcafirststeps to find out more.

Keep on learning with the RCN library services

Did you know you can search for books, request loans via the postal service, have literature searches carried out on your behalf, and access articles through the RCN e-library, archives and information service?

An HCA who used the service said: “I have just started a college course and had never had to search for articles before. My colleague told me about the e-library and I joined a webinar to find out about searches. It was amazing! It helped so much with my first assignment – I had been dreading it, but once I found out what to do I was away.”

Find out more at www.rcn.org.uk/elibrary or to get in touch with the team by phone or email, visit www.rcn.org.uk/librarycontact for details.

Advice via a live web chat

A live virtual enquiry service can put RCN members in touch with the College’s experts on:

- sources of information
- searching strategies and techniques
- evaluating information
- using library services
- accessing resources in the RCN e-library.

Find out more at www.rcn.org.uk/library

Can you trust your information?

While there is a wealth of valuable nursing and health care information available from reliable resources, there is also a lot of misinformation on the internet that cannot be verified.

It is essential to learn how to ensure you’re accessing the right information at the right time. You’ll need to know the right questions to ask, where to look, and how to use the information once you’ve found it.

The RCN Learning Zone has an online module – called How Trustworthy is your Information? – which helps you work through a number of issues surrounding quality information, including how to search for information, and how to use information inclusively, legally and ethically.

Visit www.rcn.org.uk/development for full details and to take advantage of the course.
Legally advice
Giving you protection
Find out how RCN indemnity gives members protection if the worst happens at work

What is RCN indemnity?
The RCN indemnity scheme covers, to a limit of £3 million, all of your legal and compensation costs if a claim is brought against you for clinical negligence.

It includes:
• any bodily or mental injury or death caused to any person in your professional care
• any harm caused to someone other than a client or patient while you are carrying out any health and social care service acceptable to the RCN
• any damage caused to the property of a patient or third party while you are carrying out any health and social care service acceptable to the RCN.

Are HCA and AP members covered by the RCN indemnity scheme?
HCA and AP members will be covered if their work is routinely delegated by a registered practitioner, or they:
• have completed appropriate training/education for the service to be delivered (as approved by relevant body/bodies) and have demonstrated their competence by assessment of their performance and
• confirm that they are competent to perform the service and maintain this competence throughout the period of indemnity and
• are providing a health or social care service that is acceptable within the terms of the RCN indemnity scheme.

An HCA or AP should not be making stand-alone clinical judgements. They should be working within clear protocols and guidelines at all times.

How might I use the RCN indemnity scheme?
Members can use the RCN indemnity scheme if allegations are made which suggest you may have carelessly caused harm to someone in your professional care. Nursing staff are legally accountable for their professional actions. If you face allegations of professional negligence, you can be sued. In practice, your employer will also have liability for your actions (called ‘vicarious’ liability), and will have appropriate insurance to cover such claims. However, if you are self-employed, or in other unusual circumstances, you may need to defend yourself personally against such a claim.

You should report any incident that may result in a claim against you personally to the RCN. Contact RCN Direct who will put you in touch with your regional office. Your local RCN representative will help you prepare a clear and objective statement about the incident and will support you further.

Does the RCN indemnity scheme cover HCA and AP members to work as phlebotomists?
HCA and AP members are indemnified to work as phlebotomists, subject to the general rules of RCN indemnity cover.

Will the RCN indemnity scheme cover HCA and AP members for voluntary work?
You will be covered provided you are fully trained and competent to undertake the voluntary work, and you fulfil the general rules of RCN indemnity cover.

Find out more at [www.rcn.org.uk/indemnity](http://www.rcn.org.uk/indemnity) or call RCN Direct on 0345 772 6100.

RCN indemnity helps bring peace of mind
Q&A: Katie May

A member working in an endoscopy unit explains her journey to becoming a newly qualified assistant practitioner

Why did you become an AP?

I was working in endoscopy for two and a half years as a clinical support worker. But when we received bowel screening accreditation I was no longer allowed to be in charge of certain aspects of our work – like monitoring patient airways. A sister suggested I do a health and social care foundation degree and qualify as an AP, so I could maintain a fuller role in the team.

What was the foundation degree like?

It was two years of hard work, trying to fit in work and study, as well as my family and everything in between, but the course was really valuable. I’ve now got a thirst to pick up knowledge.

The most important thing was the clinical competences. There were core competences which everybody completes, with two or three based on our own specialist areas.

What is good is that we are not just treating patients in a certain way simply because it is the way it has been done before. We look at the skills and the knowledge behind it.

What do your team think?

My team has always been really supportive. They have allowed me the time I need to learn and the opportunity to progress.

What’s it like being an AP?

The AP role in Oxfordshire is not well heard of yet. I have had to explain it to colleagues a few times, but it does give me a chance to develop my own role.

Why did you decide to work in endoscopy?

I was working in a care home, but I was interested in working in a hospital setting. The unit’s hours are a lot more flexible than on the wards – we are only there Monday to Friday so it fits in well with my family commitments.

It is really interesting and there is always something new to learn – even more so since becoming an AP!

What do you do in a typical day?

We have an early start, and we have a specific role to do each day. It could be admitting patients, helping with recovering patients or assisting doctors with tasks like taking biopsies. Because we’re a small team we spend a lot of time together and help each other out.

What’s next for you?

Once I’ve graduated in September, I’m going to stay in endoscopy as I find it challenging. I’m going to carry on with my portfolio, keep filling in my competences and do more and more in my department.
What do you think of this magazine?

You could win £25 of shopping vouchers by filling out the survey below or online at http://tiny.cc/hcasurvey2

All completed surveys will be entered into a prize draw for the shopping vouchers. Please think carefully about your answers as they could shape future HCA and AP communications from the RCN.

Did you like receiving the magazine?
Strongly disagree 1 – 2 – 3 – 4 – 5 strongly agree

Did you learn more about the RCN and its services?
Strongly disagree 1 – 2 – 3 – 4 – 5 strongly agree

Do you think it will help improve your practice?
Strongly disagree 1 – 2 – 3 – 4 – 5 strongly agree

What did you like about this magazine?
News  □  comment  □ clinical features  □ articles on RCN services  □ details of the HCA committee  □

Have you shared it with colleagues?
Yes  □  no  □

How did you receive it?
Post  □  an event  □ RCN office  □ in workplace  □ from colleague  □

Are there any subjects you would like to see covered?

Any other comments

If you would like to be entered into the draw, please supply:

Name:  Telephone no:
Email address:
Address:  RCN membership no:

Not a member  □
Please send me details of RCN membership  □

Please cut out and return to HCA magazine evaluation, Communications, Royal College of Nursing, 20 Cavendish Square, London W1G 0RN, or complete online, by 30 September 2012.
RCN Council health practitioner elections – HCAs/APs use your vote, make your voice heard

Voting paper and candidate statements enclosed