CELEBRATE WITH SULLEY

RECOGNISING YOUR HEROES ON NURSES’ DAY P10
Progress stalls in NI
The RCN has expressed concern about the impact of the current political situation in Northern Ireland on health and nursing. Following the assembly election on 2 March, talks have continued in an attempt to reform the Northern Ireland Executive but these have not yet been successful. As a consequence, progress has stalled on implementing health and social care reform as outlined in Health and well-being 2026: delivering together, published by the Department of Health in October 2016. Furthermore, no response to the NHS Pay Review Body recommendation of a 1% pay award has yet been made in Northern Ireland.

General election called
A general election has been called on 8 June, and the RCN is urging voters to consider nursing priorities as they head to the polls.

RCN Chief Executive and General Secretary Janet Davies said: “This election isn’t just about Brexit. It’s an opportunity to choose who we want to represent the interests of nursing.”

Read the RCN election manifesto on page 8.

Workforce survey
A random sample of members has been selected to take part in this year’s RCN Employment Survey. The survey collects vital evidence which underpins the College’s campaigns and policies and is used to argue for better pay and conditions.

Members are urged to complete the survey.

Update your details
To ensure you receive important updates from the RCN and can participate in elections, ballots and surveys, please ensure we have your correct details. You can check and change contact details:

Online: www.rcn.org.uk/myrcn
Telephone: 0345 7726 100 (8.30am-8.30pm, Monday-Friday)
Email: membership@rcn.org.uk
Write to: RCN Membership Team, Copse Walk CF23 8XG

New education standards
The NMC is consulting on changes to the framework and educational standards for pre-registration nurses. This far-reaching consultation will shape the future of nurse education across the UK.

Members are encouraged to have their say at a series of workshops organised by the RCN, which will take place from June onwards. Attendance will count towards your revalidation portfolio. Find out more and register your interest at www.rcn.org.uk/education-workshops.
Members to make historic decision on pay

There are just a few days left to vote on how you want the RCN to respond to another below-inflation pay award for NHS nursing staff

However you choose to vote in the RCN pay poll, if you’re one of the 270,000 members eligible to take part, it’s important to share your view. Members are being asked if they want to strike; take “action short of a strike”, including working only contracted hours, demanding to be paid for overtime and not completing duties expected of a higher pay band; or take no further action.

RCN Chief Executive Janet Davies said: “The Government has already cut nursing pay by 14% in real-terms – leaving too many struggling and turning to foodbanks and hardship grants. Whatever nurses decide, it is becoming clear that their goodwill cannot be relied on indefinitely.”

The RCN believes low levels of pay are responsible in part for tens of thousands of unfilled nursing posts, and that unsafe staffing levels harm the quality of patient care.

Despite an RCN campaign for an above-inflation pay increase, the continuation of the 1% cap means pay will lag behind the cost of living for the sixth year in a row.

The RCN described the pay award as a “bitter blow to nursing staff across England”, but it’s a similar picture across the UK.

The Scottish Government announced a 1% pay increase for NHS staff and those on pay points currently at £22,000 or below will receive a flat rate increase of £400. RCN Associate Director Norman Provan said: “The Scottish Government has missed an opportunity to close the gap between nurses’ pay and inflation and nurses will continue to bear the brunt of austerity measures in the NHS in Scotland.”

In Wales the RCN said the 1% increase doesn’t reflect the dedication and hard work NHS staff provide but welcomed the decision to increase pay for the lowest paid to the living wage.

RCN influence forces u-turn on agency ban

A 1% pay award was also recommended in Northern Ireland where nurses already receive less than their counterparts in the rest of the UK.

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

How do I vote?

Members working in the NHS, or who are employed on NHS terms and conditions, are urged to have their say. It’s a very short questionnaire and it will take only a few minutes to complete. Visit www.rcn.org.uk/pay-poll before 11pm on Sunday 7 May.

The results will be announced later this month. RCN Council will then decide next steps.

Around the UK

The proposed change could have forced financially struggling NHS nursing staff into the private sector to avoid a drastic drop in their earnings.

The rule originally stated that trusts should ensure that staff employed through an agency are not substantively employed elsewhere. The RCN said this was unfair, punitive and damaging to high-quality patient care.

The College will now be involved in drafting the new rules around the use of staffing agencies.
Research nurses discuss influencing policy

The impact of nursing research on policy making was a central theme of the recent RCN International Nursing Research Conference in Oxford.

Over the course of the three-day conference, prominent keynote speakers debated nurses’ roles in influencing politicians and policy makers.

Trish Greenhalgh, professor of primary care health sciences at the University of Oxford (pictured), said the art of persuasion was as important as evidence when it comes to policy making.

“We need to study the arts to speak truth to power,” she said. “If we’re going to persuade policy makers of anything we’ve got to understand rhetoric.”

She added presenting evidence in the right way, and appealing to emotions, was also vital. “There’s a key difference between distorting facts and framing them in a certain way,” she said.

Jane Ball, from the faculty of health sciences at the University of Southampton, focused on the impact research has had on nursing policy in England.

She asked why nurses continued to do research when policy makers can ignore evidence for political or economic reasons. “We might not always see research having an impact on policy but that doesn’t make it any less valuable,” she said.

“The compass always points north, whether the walker is looking at it or not. Research has to keep showing the direction practice and policy need to travel in.”

No to short-termism

The RCN has welcomed a House of Lords committee report criticising successive governments for failure to plan for the long-term future of health and social care.

RCN Chief Executive Janet Davies said: “We have long argued for an honest, open dialogue between politicians and citizens about the long-term future of the NHS and social care. Short term approaches such as cuts in public health funding leave the underlying problems unresolved.”

Worst case scenario reveals 42,000 vacancies

Department of Health information leaked to the Health Service Journal shows that after Brexit the NHS could be hit by a shortage of more than 42,000 nurses by 2026.

The worst case scenario shows what would happen without EU and non-EU nurses and midwives if immigration rules changed.

The RCN has warned that such a shortage would leave the NHS “unsafe”.

Research has to keep showing the direction of travel
Collecting diversity

The RCN is collecting stories and objects for an upcoming diversity exhibition and events series – Hidden in Plain Sight. Members are being encouraged to contribute their stories, so that the lives and experiences of our members are recorded. In particular lesbian stories are practically invisible in the RCN’s collections, which does not reflect members’ experiences.

To find out more about donating or sharing your story visit www.rcn.org.uk/library/collections/diversity-collecting

Marathon effort

Inverness nurse Lorna Mackenzie has run the London Marathon in aid of the RCN Foundation and she isn’t stopping there.

It may have been a tough few months of training for Lorna, but in November she’ll hit the streets of New York as she tackles her second marathon and raises even more money.

To support Lorna you can visit her Just Giving Page: www.justgiving.com/fundraising/Lorna-Mackenzie07

The big picture

The RCN Library and Heritage Centre’s For Queen and Country: Nursing, Trauma and War exhibition examines the history of nursing during conflict and includes this photograph of soldiers wearing protective masks c.1915. The picture was taken at the Lady Hardinge Hospital for Indian Soldiers in Brockenhurst, New Forest.

Find out more about the exhibition in the next issue of RCN Bulletin or visit www.rcn.org.uk/libraries

FROM THE HEART

Sian Thomas
RCN Wales Nurse of the Year 2016

I was completely overwhelmed when I won Wales Nurse of the Year. It was so unexpected, but it made me feel proud personally and professionally as it shone a light on the work that all children’s nurses do.

Since winning the award, I’ve been able to raise the profile of children’s nursing on a number of occasions. I’ve met with the Children’s Commissioner for Wales, the Chief Nursing Officer for Wales and spoken at the recent RCN Wales leadership summit dinner. I’ve attended many events where networking opportunities have been beyond anything I ever expected. At the Florence Nightingale annual dinner I discussed nursing issues with people from across the UK.

I’ve really valued the opportunity to explain the diverse and complex work children’s nurses do. It’s been a huge opportunity to raise our profile, network and develop professionally and share best practice.

Until I won the award I didn’t fully appreciate its value. If you think a nurse you know in Wales is a worthy award winner, please nominate them as they could enjoy opportunities I’ve had this year. Right now it’s hard for nurses at the coal face but this is a chance to show off the fantastic work nurses across the country are doing.

Find out more about the exhibition in the next issue of RCN Bulletin or visit www.rcn.org.uk/libraries

Nominations for Wales Nurse of the Year are now open. Visit www.rcn.org.uk/wales
What you’ve been saying

Time to stand up

I joined the RCN in my first week as a student nurse over 30 years ago. The main reason I chose the RCN was because they had no strike policy. However, today I am working harder than ever, with more demands on services that can’t cope, with no recognition or pride in the role. On top of that there are staff shortages and lack of financial recognition. So RCN, it’s time to stand up and be counted and shout as one. It’s time to take the drastic action and tell the Government enough is enough.

Sam Pessoll, via Facebook

Strength in numbers

If all members complete the poll then that high percentage of return is a reflection of strength and upcoming action. There is a lot more interest on social media.

Louise Porritt, via Facebook

A patient’s view

I have just come out of Arrow Park hospital after a week’s stay. I have had the best care I could ever have...the Government has a damn cheek to offer 1%. How dare they insult nurses, when they work so hard.

Julia McGrath Steele, via Facebook

QUOTE OF THE MONTH

I didn’t read every line of the document and then eventually did read it and thought ‘oh poop, I wish I’d read that bit’

NHS Improvement’s Jim Mackey, talking to HSJ about making a u-turn on NHS staff and agency shifts

4 THINGS TO DO IN MAY

1. Fill in the RCN pay-poll. How should we respond to the continuation of the 1% public sector pay cap? If you work in the NHS, let us know at www.rcn.org.uk/pay-poll

2. Celebrate Nurses’ Day. Throw a party at work on 12 May and celebrate your inspirational colleagues online at www.rcn.org.uk/nurses-day or on social media using #nurseheroes

3. Follow RCN Congress on Twitter. For the first time, you can take part in Congress debates online, using #RCN17. Turn to page 9 to find out more about the interactive agenda items.

4. Shape the future of nurse education. The RCN is running workshops to develop its response to a consultation on the NMC’s new pre-registration standards. Register your interest at www.rcn.org.uk/education-workshops

GOT SOMETHING TO SAY?
The RCN Bulletin team is always looking for members to contribute to the opinion pages. If you’re keen to share your views, email bulletin@rcn.org.uk

Amandeep Bedi
Ophthalmic nurse practitioner

I learnt so much in the short time I worked in Nigeria on a Vision 2020 programme. I travelled alongside three doctors, and the University of Calabar Teaching Hospital provided us with food, accommodation and travel between the hospital and our hotel. We were also given armed protection throughout the week.

There’s no health education on any condition or procedure, so one of my tasks was to arrange leaflets on basic cataract surgery, dry eyes, glaucoma and after-surgery care.

When I mentioned that some of the nursing staff lacked strong leadership qualities, managers promised to start sending nurses on relevant courses. I was really pleased to receive a thank-you email from one of the senior nurses who has now completed a short course on leadership and management. We also introduced clinical governance, and staff have now finalised three audits and one survey around care management.

Looking back on my time in Nigeria makes me feel very emotional. We planned what we wanted to do and although we soon realised there was so much that was out of our control, it was an amazing experience. I would highly recommend it. By working in an unfamiliar area, I now see just how privileged we are. In Nigeria, if you can’t pay for your treatment you simply go blind. That made me appreciate the NHS so much.

www.vision2020uk.org.uk
A ‘good’ death

Amanda Cheesley, RCN Professional Lead for Long-Term Conditions and End of Life Care and Anna Crossley, RCN Professional Lead for Acute, Emergency and Critical Care on dignity in death.

A recent NMC ruling against a nurse who didn’t attempt CPR on someone she thought had died has led to uncertainty about nursing responsibilities and judgement.

Ultimately, it’s our role to co-ordinate open and sensitive discussions about our patients’ wishes, and to ensure their dignity is maintained in death. We must also protect our patients from invasive treatments which have little chance of success.

Nurses who regularly encounter death or cardiac arrest must ensure they have the necessary competence to recognise when CPR may be needed or when CPR would be of no benefit to the person.

If no explicit decision relating to CPR has been recorded in advance, we should presume initially that it is needed. However, indiscriminate CPR, without balancing the harms and benefits to the patient alongside their individual wishes is a concern. If death happens unexpectedly and nurses discover patients with features of irreversible death, their decision not to start CPR must be supported by senior colleagues, employers and professional bodies.

Each workplace should also have a robust policy in place to support decisions about CPR.

We owe it to our patients to try to give them a “good” death.
Patients first

The RCN is calling for all parties to put patients before politics as members head to the polls to vote in the general election.

No matter what members’ personal political views are, there is one thing that unites everyone who nurses in the UK. Providing high-quality care to patients is a priority that we can all sign up to. And it’s a sentiment that’s reflected in the RCN’s general election manifesto.

“All we need for the voice of nursing to be heard is to use our votes,” says Chief Executive Janet Davies. “This election isn’t just about Brexit. It’s important to read the RCN manifesto and look at what each party has promised for nursing before choosing who you want to elect.

“What we’re asking for isn’t rocket science. You don’t need to be an expert to know that well-staffed wards and happy workforces are essential to improving patient care. What we do need is your support to show party candidates how serious we are about getting a better deal for nursing.”

The manifesto

The RCN election manifesto asks politicians to commit to improving fundamental issues for nursing and patient care.

Unsurprisingly, familiar subjects such as safe staffing, access to specialist care and regulation of health care assistants are once again on the agenda. But the RCN also wants a commitment to valuing the nursing workforce with fair pay and a right to remain for EU colleagues. This needs to be backed up by investment and a stable health care environment free of constant recommissioning.

The manifesto ‘asks’ underpin the goal of improving patient experience and delivering high-quality care. Commitment is needed across the board to ensure a strong future for health care.

Read the manifesto in full at www.rcn.org.uk/nursingcounts

Take action

It’s an MP’s job to represent their constituents, so it’s up to us to understand what commitments local party candidates are prepared to make before we vote.

The RCN website has information about how you can talk to candidates in your area about the RCN manifesto, share your personal experiences and get answers about how they will stand up for nursing.

Visit www.rcn.org.uk/nursingcounts

Follow us on Twitter for regular updates and Twitter chats - @theRCN

Register to vote

You must be registered to vote by 22 May to take part in the general election.

If you are not already registered or have any questions about eligibility, how to vote or postal votes visit www.gov.uk/register-to-vote or contact your local council.

In Northern Ireland visit www.eoni.org.uk/Register-To-Vote or contact your area office.

Polls are open on 8 June, 7am-10pm.

All we need for the voice of nursing to be heard is to use our votes.
Virtual viewpoints

For the first time members outside of the Congress debating hall are able to take part in the discussion. Vice Chair of Congress BJ Waltho tells us how

I love Congress. The atmosphere, the people, but most of all the work we get done in the debating hall. It makes me proud to see members take to the microphone and articulate their point, whatever their view. And I always cheer along when we hear the immortal words ‘first time speaker’.

But this year, I’ll be looking out for a new phrase: ‘first-time tweeter’.

We know that it can sometimes be difficult to attend Congress, so in 2017, we’re inviting members to take part in two matters for discussion using Twitter.

Action from the main debating hall is already streamed live on the RCN website, but using Twitter will allow members watching from different locations to share their views too.

It’s going to be my job to monitor the conversation on Twitter. When our Chair of Congress Stuart McKenzie asks for an update, I’ll be able to add your thoughts to the discussion. I’m sure it will be a challenge to condense two minutes of speaking into 140 characters, but I know it’s one members are up for.

Congress has never been about sitting idly by and now there’s no excuse to stay quiet, wherever you are.

How do I get involved?
During the interactive agenda items, tweet using #RCN17 and BJ will be able to see your comment.

When should I tweet?
You can tweet about Congress using #RCN17 at any time and your message could appear on the live Twitter wall in the auditorium. To take part in the interactive discussions, keep an eye on the RCN Twitter feed (@theRCN). We’ll let you know when they’re about to start.

Which agenda items are included?
4. Mandatory training
14. Emergency departments
You can read background information for the discussions on the Congress website www.rcn.org.uk/congress

Help! I’m not on Twitter
Read the RCN guide Getting started on Twitter. You can download it free at www.rcn.org.uk/publications. Find it quickly using publication code 005031.
Ordinary heroes

Tom Metcalf goes behind the scenes of this year’s RCN Nurses’ Day film

For Sulayman Jallow, a staff nurse at Circle Nottingham NHS Treatment Centre, acting is not technically part of the job description. But when he was presented with the opportunity to appear in a short film celebrating Nurses’ Day he couldn’t say no.

“Nurses are doing great things, but often aren’t recognised,” says RCN member Sulayman, who works in the centre’s endoscopy department. “I volunteered to be in the film because I want to show the public who nurses are and what we do.”

The film compares the unsung actions of nursing staff to the celebrated work of superheroes, saving lives and dealing with life and death situations.

Sulayman – or Sulley as he’s known to colleagues – embodies the breadth of skills and experience in nursing. Before joining Circle in September 2014 he’d worked all over the country in surgical, ophthalmic and orthopaedic nursing, as well as at Moorland prison near Doncaster.

Nurses’ Day, held every year on 12 May, Florence Nightingale’s birthday, is a chance for patients and the public to thank nursing staff for the amazing work they do. It’s also an opportunity for staff to celebrate each other, with parties taking place in workplaces up and down the country.

Sulley believes taking some time out to celebrate is important for staff. “It’s easy for nurses to feel demotivated about pay and staffing levels, and some people don’t think we’re giving enough or aren’t doing our best,” he says. “But nursing is an honourable profession, which involves a lot of self-sacrifice and going out of your way for people. Nurses’ Day is really important because it’s a chance to educate people about the knowledge and skills we have and the impact we can make. It also shows the public nurses are human. We often suffer in silence and people don’t hear our voices.”

And as for his screen debut? Sulley doesn’t plan to appear in more films but, despite some initial nerves, was happy to be involved. “It’s one way of showing the job we do. I’m looking forward to seeing the finished product.”

Members wondering what exactly this year’s film involves can visit www.rcn.org.uk/nursesday on 12 May to find out.

“Nursing is an honourable profession

Take part in Nurses’ Day 2017

The RCN’s theme for Nurses’ Day this year is nursing staff as the superheroes of health care; there when they are needed most, changing lives with their unique set of skills.

With this in mind, we’re asking members to celebrate their own nurse hero. Do you have someone who springs to mind? Perhaps it’s a special colleague, or the person who inspired you to enter nursing?

If so, this is your chance to thank them for what they’ve done. You can tweet about your hero using #nurseheroes or fill in the form at www.rcn.org.uk/nurses-day

We’ll be sharing your stories in the run up to 12 May.
12 May
International Nurses’ Day

2267 years of caring – the first nursing school set up in 250BC in India

2267

197 years
how old Florence Nightingale would be on Nurses’ Day

36,000 potential party-goers using RCN Nurses’ Day celebration packs

36,000

179 the number of RCN Fellows doing excellent work for nursing

179

12 May
Nursing is the UK’s most trusted profession (Ipsos Mori)

1

435,000 Thank yous – one each for every RCN member

435,000

3000+ RCN reps working hard to support you

3000+

1965 the first Nurses’ Day is celebrated

1965

RCN Forums and Networks improving care in specialist areas

39
Reassessing risk

Can the past be relied on to predict the future? Tom Metcalf reports from the RCN International Research Conference

For RCN member and mental health nurse Jodie Alder, doing a PhD happened almost by accident.

“In my heart I’m a nurse who happens to be interested in research and evidence-based practice,” she explains. “Research has to be part of my career, to evidence my own beliefs, but if I could I would be on the wards every day.”

Having started her PhD full-time, Jodie found she was missing nursing so much she went part-time, and returned to her job as a senior staff nurse at the Hatherton Centre in Stafford, a medium secure unit for male mentally disordered offenders.

The centre’s aim is to help patients develop the knowledge and skills to enable them to return to the community and lead fulfilling lives but, as Jodie explains, this can be difficult to achieve.

“Risk assessment is defensive by nature, particularly when you’re dealing with people who have committed violent offences in the past. Assessments tend be based on the outdated idea that the past predicts the future.”

Because of this focus on past actions, Jodie says, patients are often kept in secure settings when they could in fact be ready to return to the community.

Protective factors

Her PhD research focuses on the use of what are known as “protective factors” when determining whether someone should be discharged.

“Protective factors are in a way the opposite of risk assessment,” she says. “Rather than only looking at what someone has done, you look at what they can do in the future to prevent it from happening again. It’s a more positive way of looking at things.

“Protective factors might include things like being employed, being part of a community group, or having a supportive network of family and friends. Our job as nurses is to identify where there might be a deficit of these sorts of things and work with the patient to build them up, for example by finding them volunteer work to make them more employable.”

While Department of Health risk assessment guidance says protective factors should be taken into account when managing risk, they are still not widely used.

Jodie hopes her research will help to change that, and she recently presented her findings at the RCN International Research Nursing Conference in Oxford.

The next stage of her work involves looking at nurses’ involvement in managing risk. “Nurses do assess risk informally on a day-to-day basis, but formal assessments are still managed by doctors and psychologists,” she says.

“I think that’s very wrong. We spend the most time with the patients and we know them best. My goal is to make nurses feel more empowered and show we can do it just as well, because I feel our voices aren’t being listened to as much as they should.”
Cheaper insurance for RCN members?

- **Car Insurance** 0800 756 8148
- **Home Insurance** 0800 756 8148
- **Travel Insurance** 0800 756 8143
- **Pet Insurance** 0800 022 3819
- **Life Insurance** 0800 756 8528
- **Motorcycle Insurance** 0800 022 3835
- **Caravan Insurance** 0800 022 3835
- **Classic Car Insurance** 0800 022 3835

And if you’ve already got Car or Home Insurance with us, **you can save up to 15%**

[www.rcn.org.uk/insurance](http://www.rcn.org.uk/insurance)


More information go to LV.com/rcn

For Text Phone first dial 18001. Mon–Fri 8am–8pm, Sat 9am–5pm, Sun 10am–4pm and Bank Holidays 9am–5pm. Pet: Mon–Fri 8am–8pm, Sat 9am–5pm. Life: Mon–Thu 9am–7pm, Fri 9am–5pm. Calls may be recorded.

The Royal College of Nursing acts as an Introducer Appointed Representative to the Liverpool Victoria group of companies for General Insurance and Life Insurance.
Empowered to fast

RCN Diabetes Forum member and community diabetes specialist nurse Ledwina Mutandwa explains how she’s helping Muslims to fast during Ramadan.

“As a Diabetes Specialist Nurse team it is our duty to provide inclusive care that takes into account different cultures and ethnicity. Many Muslims with diabetes are very passionate about fasting during Ramadan, this passion is a golden opportunity to empower this group of patients to better manage their diabetes, not only during Ramadan but also throughout the year.

“People need to understand the effects of fasting and diabetes, recognise the risks and the options to fast safely. We involve the nursing team, dieticians and Imams to provide patients with education that focuses on pre-Ramadan evaluation and a reminder about the generous religious exemptions available for individuals. We also run sessions to review and adjust all doses of medication.

“As health care professionals we should not focus on encouraging the person with diabetes to abstain from fasting, but promote safer fasting and thus avoid costly hospital admission due to preventable complications.”

Learn more:
The General Practice Nursing forum is hosting a Congress fringe event on staying healthy during Ramadan. Forum Chair, Marie Therese Massey, says: “This event will bust the myths around fasting during Ramadan and raise awareness of some of the issues associated with fasting such as hydration, diabetes control and advice on exemptions from fasting.” Full details at www.rcn.org.uk/congress

Children’s nursing at Congress

RCN Children and Young People’s Acute Care Forum member Coral Rees will launch updated guidance for monitoring vital signs in children at Congress.

Advanced paediatric nurse Coral has led a team of nursing professionals to update the RCN standards to monitor and assess vital signs in infants and children. The publication will be showcased during a fringe event looking at key skills for assessing sick children. Coral, said: “It’s important for nursing staff that these standards represent the most up-to-date information and assessment skills for recording vital signs in children and young people. This document provides a smart way to be using different equipment for different ages of children.”

The guidance is useful for health care professionals who work in acute settings, GP surgeries, walk-in clinics, telephone advice and triage services, schools and other community settings. Vital signs included are temperature, heart/pulse rate, respiratory rate and effort, blood pressure, pain assessment and level of consciousness. Important information gained by assessing and measuring these vital signs can be indicators of health and ill health.

RCN's standards for assessing, measuring and monitoring vital signs in infants, children and young people will be showcased at an RCN Congress fringe event. More details at www.rcn.org.uk/congress.

Join the RCN CYP forums at www.rcn.org.uk/forums

It’s a smart way to use different equipment

Muslims traditionally break their fast with dates
A new framework for nurses who want to be recognised as specialist menopause nurses has been launched by the RCN Women’s Health Forum.

Chair Debby Holloway who led the project, said: “There aren’t enough specialist menopause nurses. Working with the British Menopause Society, our aim is to make it easier for nurses to choose to specialise in this area. We want to increase the number of practitioners and ultimately improve access to specialist care, especially for more complex cases such as women under 40, women with cancer or other illnesses.”

Download Nurse Specialist in Menopause free at: www.rcn.org.uk/publications search 005 701.

I am a children’s nurse

Members of the RCN Children and Young People’s Professional Issues Forum have produced a film highlighting the value of children’s nurses.

Jess Higson, chair of the forum, said: “The film shows the significance, value and uniqueness of the children and young people’s nurse. We thought this would be a good way to recruit more children’s nurses and get people talking about us.”

Recognising pain

It is estimated that at least 50% of people living with dementia experience pain, however nurses find the recognition of pain for this vulnerable group a challenge.

Julie Gregory Pain and Palliative Care Forum committee member is inviting Congress delegates to learn more at a fringe session on Sunday 14 May (www.rcn.org.uk/congress).

“The event aims to explore pain assessment for people living with dementia, examining some of the factors that can make this challenging for nurses in all areas of practice,” she said.

Prepared for challenge

Chair of the Nurses in Management and Leadership Forum Sally Basset is encouraging Congress delegates to attend a mini-masterclass in personal resilience.

“Managing and leading yourself, teams, organisations and systems requires an intricate mix of knowledge, technical skills, experience and emotionally intelligent behaviours,” she says. “Our session will hear stories from successful managers and leaders and demystify the concept of ‘personal resilience’, arming participants with knowledge and tools to strengthen their own capability.”

More details www.rcn.org.uk/congress
EVENTS

Travel Health Competence: Pointing you in the right direction

RCN Public Health Forum and NaTHaC Travel Health Conference

24 June
Royal College of Nursing
20 Cavendish Square
London W1G 0RN

This joint event provides the latest news and developments for health care professionals involved in caring for and advising those travelling abroad. Delivering accurate and current advice to travellers is becoming more complex and anticipating individual needs can be challenging. Feeling confident and staying up to date with the latest information, guidance and resources has never been more important.

Sessions include advice and guidance on immunisations, malaria, sexual health and complex travel scenarios. With concurrent sessions split according to ability, whether new to travel health or more experienced, delegates will have the opportunity to tailor their experience to their own educational needs.

There is also an opportunity to network with colleagues in the field and gain confidence to deliver high quality advice and care for travellers.

To book onto this event please fill in and return the booking form, or the registrations team on 02920 546 460.

RCN Wales HCSW Conference

27 June
Wrexham Medical Institute
Croesnewydd Road, Wrexham
LL13 7YP

This free event for health care support workers and nursing students contributes to the learning, sharing good practice and networking opportunities available for health care support workers in Wales. Topics for discussion on the day include understanding and measuring good care, and protecting older people’s rights. There is also a talk from the RCN Wales Health Care Support Worker of the Year.

The closing date for booking is 6 June. Contact Rhona Workman on 02920 680 713 or email WalesCPD@rcn.org.uk

RCN Critical Care Workshop

8 July
Royal College of Nursing
20 Cavendish Square
London W1G 0RN

Are you a nurse, health care professional or student working in the field of in-flight nursing, patient repatriation and retrieval?

This one-day workshop is being delivered by the RCN Critical Care and In-Flight Nursing Forum and is essential for all nurses, health care professionals and students working in the field of critical care.

As well as being able to accrue up to seven hours of CPD time towards revalidation, you will also be able to benefit from:

- hearing evidence based scenarios
- networking with colleagues
- receiving updates on contemporary practice.

Book a place by calling 0292 054 6460.
Michael Brown sets out the RCN’s key achievements and challenges during 2016

Our centenary made 2016 a very significant and memorable year for the RCN. Many members got involved and organised events to celebrate our 100th year, attended Congress when we had a special opening ceremony, and joined us at our International Centenary Conference.

We are continuing to strengthen the organisation in order to meet the very real challenges facing our profession and to make sure we can continue to develop our services and improve how we support you. We are building on a strong present – we now have around 435,000 members, our largest membership to date, which was a real achievement during our centenary year.

At the 2016 Annual General Meeting members voted for the changes we need to make to our governance arrangements to enable the organisation to be more agile and flexible in the future.

This was also the year that our promises to support member-to-member communications became a reality. I am very pleased to see the successful trials of the Member Communication Centre, which is now being rolled out, allowing members to communicate directly with each other through a range of different channels.

We hosted our first governance webinar on ethical investment, which proved an effective way of obtaining members’ views on this important subject.

While our financial performance is strong, there are risks we need to address. We still have a significant pension deficit, and if we are to keep membership subscriptions low and affordable we need to generate income from other sources. So this year has been focused on developing a new commercial strategy to enable this and enhance our offer, and we will be rolling this out in 2017. We have also been looking at how the RCN, RCNi and RCN Foundation better work together for your benefit.

Professionally, it has been another year of challenges and unrelenting pressure.

I was particularly proud of our students for the way they joined together and campaigned against the changes to student bursaries in England. The Westminster Government still went ahead with its plans to replace bursaries with student loans and, as we predicted, there has already been a significant drop in applications to nursing courses in many areas. The Government also announced the introduction of the new nursing associate role and apprenticeships route into nursing in England and we’re working hard to shape these new roles.

There’s been success for our long-term campaign for safe staffing levels in law in Scotland. And we secured agreement in Northern Ireland to honour the Pay Review Body recommendations. And we continue to do everything we can to get improvements to your working conditions and pay across the UK. If you haven’t already joined our Nursing Counts campaign please do so, as your input is key to its success.

As always, each year we say goodbye and thank you to members who have given their time and expertise to the organisation. Our heartfelt thanks go to Brenda McDonald, who stepped down as a Council Member and Chair of the Health Practitioner Committee during the year, Sylvia Duval, one of our Student Members of Council and Students Committee Chair, and Jane Denton, the convenor of RCN Fellows. Thank you to all of you.
These summarised RCN Group financial statements are prepared for distribution to the full membership. As they are a summary only, members seeking a full understanding of the financial affairs of the organisation can refer to the full accounts including the Auditor’s Report and the Report of Council, copies of which are available from the Chief Executive & General Secretary, Royal College of Nursing, 20 Cavendish Square, London W1G 0RN or from the RCN website at www.rcn.org.uk.

The financial statements are presented in accordance with Financial Reporting Standard 102 (FRS 102), issued by the Financial Reporting Council and the Trade Union and Labour Relations (Consolidation) Act 1992. The RCN Group statements report the consolidation on a line-by-line basis of RCN UK, its trading subsidiary RCNi, the RCN Foundation and RCN Holdco Limited.

These summarised accounts include a consolidated statement of comprehensive income, statement of changes in equity and the statement of financial position.

The consolidated statement of comprehensive income shows that the RCN Group total income in the year to 31 December 2016 was £91,840,000. This compares to £89,377,000 in the previous year ended 31 December 2015. Total expenditure was £82,115,000 in the year to 31 December 2016 compared to £80,521,000 in the year ended 31 December 2015.

Membership income was £73,440,000 in the year to 31 December 2016 compared to £71,818,000 in the year ended 31 December 2015, in line with increased membership numbers.

The RCN Group defined benefit pension scheme liability at 31 December 2016 was £14.6m (31 December 2015: £40.4m). This reduction is partly due to our continued deficit payment plan and incorporation of an allowance for commutation of pension for cash at retirement. Council continue to be committed to reducing the deficit. The valuation based on the position at 30 September 2016 will be finalised in December 2017, after which the payment plan will be reviewed.

In the period to 31 December 2016 the RCN UK investment portfolio generated gross investment income of £1.4m (31 December 2015: £1.2m), net realised losses of £1.7m including foreign exchange losses (31 December 2015: £1m) and unrealised gains in the market value of the investments of £5.7m during the year. Investments stand at £57.5m at 31 December 2016.

The RCN Foundation Investments in the period to 31 December 2016 reported investment income of £1m (31 December 2015: £0.9m), net realised gains of £0.6m (31 December 2015: £0.6m) and unrealised gains of £2.2m (31 December 2015: losses of £0.7m).

In the year ended 31 December 2016 the RCN Foundation reported a positive net movement of funds of £2.4m (31 December 2015: £0.1m deficit).

Risk management

Council has a formal risk management process assessing the risks to which the RCN Group is exposed. This involves identifying the types of risk the RCN faces, prioritising them in terms of potential impact and the likelihood of occurrence, and identifying means of mitigating those risks.

Council members’ responsibilities

In approving the full financial statements, Council are confirming they are satisfied these statements give a true and fair view of the state of affairs of the group and the surplus in the period.

Council are responsible for keeping adequate accounting records, for safeguarding the assets of the group and for taking reasonable steps for the prevention and detection of fraud and other irregularities.

So far as each Council member is aware, there is no relevant audit information of which the organisation’s auditor is unaware.

The full financial statements, from which these summarised financial statements are derived and on which the auditors gave an unqualified opinion, were approved by Council on 4 April 2017.

Michael Brown
Chair of Council
Summary financial statements and graphs for the RCN Group

Consolidated statement of comprehensive income for the year ended 31 December 2016 (£’000)

<table>
<thead>
<tr>
<th></th>
<th>31 December 2016</th>
<th>31 December 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total income</td>
<td>91,840</td>
<td>89,377</td>
</tr>
<tr>
<td>Total costs</td>
<td>82,115</td>
<td>80,521</td>
</tr>
<tr>
<td><strong>Operating surplus</strong></td>
<td><strong>9,725</strong></td>
<td><strong>8,856</strong></td>
</tr>
<tr>
<td>Investment income</td>
<td>2,399</td>
<td>2,171</td>
</tr>
<tr>
<td>Net realised gains</td>
<td>1,965</td>
<td>1,621</td>
</tr>
<tr>
<td>Foreign exchange (losses)/gains on investments</td>
<td>(3,831)</td>
<td>206</td>
</tr>
<tr>
<td>Taxation</td>
<td>(67)</td>
<td>(61)</td>
</tr>
<tr>
<td><strong>Surplus on ordinary activity after taxation</strong> and surplus for the financial period</td>
<td><strong>10,191</strong></td>
<td><strong>12,793</strong></td>
</tr>
<tr>
<td>Actuarial gains/(losses) on defined benefit scheme</td>
<td>23,949</td>
<td>8,598</td>
</tr>
<tr>
<td>Revaluation reserve adjustment</td>
<td>(64)</td>
<td>(64)</td>
</tr>
<tr>
<td>Net unrealised gains/(losses) on fixed asset investments</td>
<td>7,884</td>
<td>(1,273)</td>
</tr>
<tr>
<td><strong>Total comprehensive income for the period</strong></td>
<td><strong>41,961</strong></td>
<td><strong>20,054</strong></td>
</tr>
</tbody>
</table>

Reconciliation of changes in equity for the year ended 31 December 2016 (£’000s)

<table>
<thead>
<tr>
<th></th>
<th>31 December 2016</th>
<th>31 December 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surplus in period</td>
<td>10,191</td>
<td>12,793</td>
</tr>
<tr>
<td>Total comprehensive income</td>
<td>31,770</td>
<td>7,261</td>
</tr>
<tr>
<td><strong>Net changes in funds</strong></td>
<td><strong>41,961</strong></td>
<td><strong>20,054</strong></td>
</tr>
<tr>
<td>Accumulated funds at beginning period</td>
<td>65,776</td>
<td>45,722</td>
</tr>
<tr>
<td><strong>Accumulated funds at period end</strong></td>
<td><strong>107,737</strong></td>
<td><strong>65,776</strong></td>
</tr>
</tbody>
</table>

Consolidated statement of financial position as at 31 December 2016 (£’000s)

<table>
<thead>
<tr>
<th></th>
<th>31 December 2016</th>
<th>31 December 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Property, plant and equipment</td>
<td>23,306</td>
<td>22,940</td>
</tr>
<tr>
<td>Intangible assets</td>
<td>8</td>
<td>–</td>
</tr>
<tr>
<td>Investments</td>
<td>87,260</td>
<td>78,225</td>
</tr>
<tr>
<td>Current assets</td>
<td>27,410</td>
<td>22,152</td>
</tr>
<tr>
<td>Creditors falling due within one year</td>
<td>(10,712)</td>
<td>(10,114)</td>
</tr>
<tr>
<td>Provision</td>
<td>(4,950)</td>
<td>(7,060)</td>
</tr>
<tr>
<td>Defined benefit pension scheme liability</td>
<td>(14,585)</td>
<td>(40,367)</td>
</tr>
<tr>
<td><strong>Total net assets</strong></td>
<td><strong>107,737</strong></td>
<td><strong>65,776</strong></td>
</tr>
</tbody>
</table>

Consolidated statement of comprehensive income

- **Membership income**: 5 per cent
- **Trading income**: 15 per cent
- **Other income**: 80 per cent

Information breakdown of RCN Group Income sources

Information for breakdown of expenditure by activity

- **Representation activities**
- **Other College activities**

Staff costs

- Premises and estate costs
- Travel and accommodation
- Other service delivery costs
Independent auditor’s statement to the members of the Royal College of Nursing of the United Kingdom (RCN)

We have examined the summary financial statements contained within the Summary of Accounts for the year ended 31 December 2016 which comprise the Summary Consolidated Statement of Comprehensive Income, Summary Consolidated Statement of Financial Position and Statement of Changes in Equity. The Summary of Accounts are not required to be produced under the Trade Union and Labour Relations (Consolidation) Act 1992 (the “Act”), and regulations under the Act, and have been voluntarily produced by the Council members.

This report is made solely to the College’s members, as a body, in accordance with the terms of our letter of engagement with the College. Our work has been undertaken so that we might state to the College’s members those matters we are required to state to them in an auditor’s report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the College and the College’s members as a body, for our audit work, for this report, for our audit report, or for the opinions we have formed.

Respective responsibilities of Council members and auditor

The Council members are responsible for preparing the Summary of Accounts (which includes the summary financial statements) and the supplementary material in accordance with applicable United Kingdom law.

Our responsibility is to report to you our opinion on the consistency of the summary financial statements contained within the Summary of Accounts with the full annual financial statements.

We also read the other information contained in the Summary of Accounts and the supplementary material as described in the contents section, and consider the implications for our report if we become aware of any apparent misstatements or material inconsistencies with the summary financial statements.

We conducted our work in accordance with Bulletin 2008/3 issued by the Auditing Practices Board. Our report on the College’s full annual financial statements describes the basis of our opinion on those financial statements and the Report of Council.

Opinion

In our opinion, the summary financial statements contained within the Strategic Report are consistent with the full annual financial statements for the year ended 31 December 2016.

Deloitte LLP
Chartered Accountants and Statutory Auditors, London United Kingdom
4 April 2017

Notes: The directors are responsible for the maintenance and integrity of the corporate and financial information included on the company’s website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.