How many nurses and midwives in the UK are professors? Who knows and does it matter? Well, we know because we've monitored them for the past 13 years – and it does matter, because the number of nursing professors is indicative of the development of academic leadership in nursing.

We undertook a survey across the UK higher education system and have repeated it five times now. For the purposes of the survey, we were interested in professors who hold established and personal chairs.

The results make for interesting reading. There are 260 nurse and midwife professors in the UK – almost double the number in 2003 – and it does matter, because the number of nursing professors is indicative of the development of academic leadership in nursing.

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The revised Code reflects the needs of a modern, patient-led health service. The new standards in the Code enhance safe practice for both patients and professionals. They include a duty to raise concerns if a patient is at risk, to be honest with and apologise to patients if something goes wrong, and to use social media responsibly.

The Code is also at the centre of revalidation, which asks nurses and midwives to use their professional standards as a reference point for meeting the requirements.

With thousands of nurses and midwives already revalidating, there is a huge opportunity for the Code to improve practice and public protection for years to come.

Janet Finch is chair of the Nursing and Midwifery Council @nmcnews

The revised Code presents a huge opportunity, says NMC chair Janet Finch

Janet Finch is chair of the Nursing and Midwifery Council in January 2015, one of the organisation’s most significant achievements was realised when we introduced a revised Code.

This updates the professional standards for each of the 685,000 nurses and midwives on our register. The Code is fundamental to protecting the public; it sets out what patients want from nurses and midwives, and places public expectations at the centre of professional practice.

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Numbers don’t add up

There are more nursing professors than ever, but is it enough to inspire the next generation of nurses?

How many nurses and midwives in the UK are professors? Who knows and does it matter? Well, we know because we’ve monitored them for the past 13 years – and it does matter, because the number of nursing professors is indicative of the development of academic leadership in nursing.

We undertook a survey across the UK higher education system and have repeated it five times now. For the purposes of the survey, we were interested in professors who hold established and personal chairs.

The results make for interesting reading. There are 260 nurse and midwife professors in the UK – almost double the number in 2003 – in a range of specialties, including, for example, dermatology, genetics and dementia.

There’s evidence of a growing critical mass within specific institutions (14 universities have more than six chairs). However, of the 83 universities offering some form of pre- or post-registration nursing course, 32 have either no or only one chair. About 10% are joint posts funded by a university and an NHS trust, and 36 professors identified themselves as clinical academics engaging both in clinical practice and research.

Women outnumber men three to one but in fact are under-represented.

The NHS may be our employer – it’s most certainly our help in times of illness and affliction – but it’s not always our friend when it comes to pensions.

When I took a career break to have my children, I was told that I could not carry my pension forward. I had a simple choice: either take out the pot of money I had accrued from 11 years of full-time nursing, or lose the lot.

Of course I took it. And very useful it was too – with two little tots and

Friend or foe?
Beware pension changes, warns Jane Bates

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when compared with the workforce as a whole (73% compared with 90%), as are members of the black and minority ethnic population (5% compared with 12%). Things get really interesting when you compare the nursing and midwifery professoriate with other disciplines, such as medicine. In terms of absolute and relative numbers, medical professors outnumber nursing professors six to one. Academic leadership

Compared with medicine, nursing research is a relatively young discipline, but the need to base our practice on sound evidence is the same. This is not only a question of doing research. The role of a professor is providing leadership in an academic subject – it’s about empowering others to reach their potential.

In the 2015 survey we identified 24 nursing and midwifery professors who have reached the dizzy heights of academic leadership as deans or pro-vice chancellors. These nurses are well placed to create the culture in their organisation and beyond whereby many more people can fulfil their research potential. We need to foster a critical mass of academic leaders to inspire, support and mentor the next generation of nurses.

Add into the mix that 75% of the nursing and midwifery professoriate are over 50 and roughly one third hold personal chairs (the position disappears when the holder retires), and you begin to see why a focus on the numbers and make-up of the nursing and midwifery professoriate is so vital.

All this must be seen in perspective, though. Last November, at a nursing research conference in Spain, one of us spoke about the survey we’d just completed. After the talk, a director of nursing at a Spanish hospital came over and said she felt the UK is way ahead in terms of professor numbers and the opportunities given to nurses to develop their research careers.

As we are glass half-full kind of people, we want to finish by celebrating and commending all our nurses and midwives who have achieved professorial status and the impact they make in ensuring that the nursing contribution to patient experience and the effectiveness of care is felt in health and social care research across the UK.

By Dave O’Carroll and Ann MacMahon, programme manager and research and innovation manager respectively, both at the RCN

The views expressed here are those of the authors and not necessarily the views of the RCN.

The nurse is gentle with me and tells me I perhaps need to drink more water. But ‘Dr Google’ does not pull his punches. Blood in the urine? I have cancer without a doubt and likely as not will be dead within a year.

Naturally, I mention this to the boys in a moment of anger. Why? The usual reasons. Tom has stolen the batteries from the TV remote to use in his Xbox. Alex has pinched my phone charger for the third time in a week. That sort of thing.

This would teach them not to take their old dad for granted. Sure, when the lab tested my urine sample, they would almost certainly find the abnormality was caused by nothing worse than a mild bladder infection. Just like the nurse said. But by then, it would all be forgotten.

And six weeks later, I had all but forgotten it, when Alex asked in a concerned tone that made me regret my whistling-in-the-dark, cavalier attitude to the possibility of my demise: ‘Did you ever get those test results?’

Test results? Well, of course not. No one is ever told when they are in the clear; are they? As long as I can remember, the system has worked on a ‘no news is good news’ basis.

But Alex was incredulous. ‘You mean you just don’t tell you if everything’s OK? That’s ridiculous. Why don’t you pick up the phone and ask them?’

Well, I seem to recall doing just that, 40 years ago after some minor blood letting. The receptionist seemed surprised, and I felt silly when, after five minutes of searching through files, she came back and said everything was fine and was there anything else? By which she meant – was there anything important?

Sure, I could make that call. But do I really want to know? Better the anxious glancing at letters on the doormat. Better the slowly fading fear as, once again, I allow myself to realise that I have been spared. For now.

David Newnham is a freelance journalist.