The disappointment felt by many nurses underlines the need for action in other crucial areas, such as affordable childcare

Over the holiday period I was approached by a nurse I didn’t know who described this year’s pay award as her ‘best Christmas present’. She was an H grade in the south of England who, I presume, was at the top of her grade and so was set to reap the benefit of the government’s decision to give an extra boost to experienced nurses.

The fact that many of you reading this will not feel quite so enthusiastic about your pay prospects reflects the complexity of this year’s award. Some experienced nurses, who also qualify for a cost-of-living supplement, will receive an increase of more than 9 per cent, whereas most nurses are left facing a basic uplift of only 3.7 per cent.

We’ll find out over the coming months whether or not this modest increase is enough to relieve the retention problem and keep nurses in nursing. We’ll also watch closely to see how the independent sector responds to the complexity of the award.

Busy agenda
The disturbing images of bodies left in a hospital chapel and the publication by a national newspaper of hospital league tables gives a foretaste of the intensity of the health debate over the coming months.

On the agenda too for nurses will be the arrival later this year of a new regulatory body, the Nursing and Midwifery Council, which will take over the UKCC’s responsibilities.

At the RCN we’ll be experiencing our own significant change when we welcome healthcare assistants and nurse cadets into our organisation as associate members.

So we can look forward to a lively and important year for both health care and nursing.

On a personal front, I’ll be preparing for a new chapter in my life when I step down as general secretary this summer.

We may not know yet who my successor is – though we shouldn’t have too long to wait – but he or she couldn’t be taking over at a more exciting or pivotal time for nursing. And that goes for all of us involved in the profession, from staff nurse to the leader of the UK’s largest professional organisation for nurses.

Christine Hancock is RCN General Secretary

Where pay has failed, affordable childcare could make a difference

But the disappointment felt by many nurses underlines the need for real and effective action in other crucial areas, such as affordable childcare and flexible hours, that make such a difference to working lives and, indeed, to the success or otherwise of the current healthcare reforms.

Making modernisation happen
Last year we got the blueprint for NHS modernisation: this year the challenge is to make it happen. The stakes are high as ever with a general election looming. The bill containing legislation required for elements of NHS modernisation is now making its way through parliament.

We’re lobbying on a range of issues including the status of the nurses who lead general practices and extending prescribing rights to specialist nurses. Long-term care for older people will also be an RCN priority as pressure on government increases with calls for a rethink of its decision not to fund the total cost of their care.

ask the experts

I am an EN and after talking with my manager we agreed I should do a conversion course. I can’t afford to leave my job and become a full-time student, but I discovered an EN conversion distance learning course at a local university, which runs with my employing trust. But despite the fact that it will cost the trust nothing, and that I will spend most of the course in my own area with a maximum of 12 weeks over two years at another placement, my manager says the trust will not let me do it because of ‘financial’ problems. She also says that the EN development course the trust is running should take priority over an ‘individual’s choice’.

I feel the trust is not being supportive and at the end of the day it will benefit from having a first level nurse. Can you give me any advice on my next course of action if there is any?

Stephen Griffin, RCN director of employment relations, replies: There is no ‘entitlement’ to undertake a conversion course of your choice, so this makes what to do a bit problematic.

Clearly, there would be benefits for the trust if you converted to registered status, so I suggest you do some more work on the comparative cost to your employer of doing the course that you would prefer.

Work out the maximum cost of 12 weeks’ replacement over two years, the difference between your salary and the cost of an agency/bank replacement, as well as the replacement costs for the duration of the in-house course.

Then put some of your arguments down on paper and have another chat with your employer.

If you can’t do the in-house course, then you should also make the argument that your employer needs to think about the lost opportunity of training a registered nurse relatively cheaply by denying you the chance of doing the distance learning course.

Because there is no entitlement, it really comes down to negotiation and persuasion, and you need to put some compelling arguments to your employer. If you really aren’t getting anywhere, you might also think about roping in your RCN steward to help with the chat with your manager.