



**One year on – caring in partnership:  
older people and nursing staff working  
towards the future**

## Acknowledgements

This review of the first year of the RCN Strategy for Nursing Older People has been written by Eileen Waddington and is based on material generated at a workshop for members of the RCN Forum for Nurses Working with Older People and the RCN Mental Health and Older People Forum.

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# **One year on – caring in partnership: older people and nursing staff working towards the future**

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## 1. Introduction

In May 2004, the Royal College of Nursing (RCN) produced its first ever strategy to promote the contribution that nurses can make to meeting the needs of older people and ensuring their health and wellbeing. *Caring in partnership: older people and nursing staff working towards the future* <sup>(1)</sup> was developed by the Forum for Nurses Working with Older People and the RCN Mental Health and Older People Forum together with the RCN gerontological nursing staff and other key RCN stakeholders. The strategy was also developed in partnership with older people and their representative organisations.

In developing the strategy, the RCN wanted to ensure that the document would inform good nursing practice and equip nurses to contribute more effectively to the changing pattern of services delivered to meet the needs of older people in hospital, residential and nursing homes, and in people's own homes.

This report describes the progress that has been made in the first year since the strategy was launched. It reviews progress in achieving the milestones detailed in the strategy and prioritises actions for 2005/06. It also includes a number of short examples of how RCN members have used the strategy in their work and how the RCN is working with partners to further the aims of the strategy.

### **“Working with older people is everyone's business”.**

Val has been using the strategy material in her work with students on several Masters Degrees and with some Doctoral Students. She has particularly highlighted the need for partnership working with older people and how this has been put into practice in the way the strategy has been developed.

*“Policy implementation is possible if we all follow the view of Confucius; it is better for 100 people to take one step, than one person to take 100!”*

## 2. Principles to underpin practice

*Caring in partnership* identifies five key principles which must underpin the work of nursing older people. These principles are central to the strategy and to the development of the milestones identified within it. They are:

### ***Valuing older people***

Nurses will demonstrate that they value older people by challenging discrimination; recognising and responding to diversity; preserving the dignity of older people; listening and responding to their views and facilitating older people and their advocates to contribute to decision-making processes.

### **Involving older people in service design**

Nursing older people is about emphasising the social model of health by focusing on our relationships with older people who may receive our professional support. One of our members recently joined a strategy group, which had been set up to develop a new integrated intermediate care service. There were no older people or carers involved in the steering group.

She used the strategy to illustrate to the steering group how committed efforts needed to be made to involve older people in a meaningful way, and used the example of how the RCN Strategy was developed and is now being monitored. She also linked the RCN Strategy to the Welsh Assembly Government's Older People Strategy principles. A carer has now joined the group and discussions are taking place about how to best involve service users.

### ***Maximising potential***

Nurses will maximise the potential of older people by working with people to help them recognise their potential, regain and maintain their confidence, family links and social networks and manage risks appropriately. Nurses need to maximise their own potential through: developing an understanding of the ageing process; having the knowledge and understanding of the research and evidence base; helping to break down the stigma attached to nursing older people and working effectively in partnership with others, respecting their expertise and accessing their skills where appropriate.

### ***Ensuring good quality physical, mental and emotional care***

The emphasis here is on meeting the needs of the whole person; understanding and responding to the special needs of people with dementia and other long-term conditions; recognising that older people will need help and encouragement to discuss their feelings about their illness, and may often need help and encouragement to eat, drink and maintain their personal hygiene.

### ***Enabling through information***

Information is particularly important in helping older people to understand their condition and its treatment. Nurses are particularly well-placed to help people understand the range of options that are available if they are being asked to make major life changing decisions. Nurses can also ensure that older people have access to suitable advocacy and support services. Similarly, nurses will have a key role in enabling the early diagnosis of some conditions such as dementia and depression and directing individuals to appropriate support services.

### ***Working in partnership***

Nurses will promote effectiveness by forming alliances with older people to ensure they are true partners in their own care; working with relatives and carers to ensure

they are fully informed and working with other professionals in a truly multi-disciplinary way to enhance the care that is offered to older people and their carers.

**“Working with the RCN on their strategy and conference planning has been a very positive experience”**

Patricia, a member of Better Government for Older People, has been working with the RCN to help us develop our strategy for nursing older people. She was asked to present at the forthcoming RCN conference but, at the time, felt unable to do this due to a lack of confidence. However, recent experience of presenting at another conference enabled her to reflect on her potential to contribute formally to the RCN conference and because of her experience of working with the RCN on their strategy she decided that; *“I have overcome the barrier of sharing my experiences and learnt that people can, and will, use my experiences in their day to day work. I have decided therefore that I would like to present at the RCN's nursing older people conference. In this way I can help ensure that older people are seen as citizens of our society”*.

These principles have underpinned the RCN approach to implementing the strategy and the organisation will continue to seek ways to promote these principles through good nursing practice.

### **3. The developing policy context**

Section 2 of *Caring in partnership* identified that the population in Britain is changing; the population is getting older, more ethnically diverse and *“increasingly older people want to express their needs and aspirations, particularly in the areas of choice and individual control”*.

In the year since the strategy was launched, we have seen a range of new policy guidance and publications which have reinforced the need to put older people at the centre of decision-making, a continued emphasis on maximising independence and creating community rather than institutional alternatives for older people. We have also seen an increasing emphasis on prevention and the promotion of well-being. Many of the documents have also highlighted how nursing is central to good quality care.

In his three-year review of the implementation of the National Service Framework (NSF), Professor Ian Philip, National Director for Older People's Health commented:

*“Older people are at least as likely as younger people to look after their health. Investment in community services is providing care closer to home. Services have been redesigned to meet the needs of an ageing population and attitudes are changing: people are being treated on the basis of their needs rather than their age.”*  
(2)

In the same report, Beverly Malone, General Secretary of the RCN, commented on the key contribution of nurses:

*“Nurses know how important it is for patients to feel they are being treated with respect. Older people especially need to experience care which supports their dignity and reassures them that their opinions and wishes are being responded to”.*<sup>(3)</sup>

In Wales, the Strategy for Older People, the first of its kind in the UK *“provides a structured basis for the Assembly and other public bodies in Wales to develop future policies and plans which better reflect the needs of older people...”*<sup>(4)</sup>. When it was reviewed in April 2004, the report identified that *“overall the strategy implementation has got off to a good start in the first 12 months of funding and promises much for the future”.*<sup>(5)</sup>

There are plans to build on the Welsh strategy work by developing the *“Age Positive Cymru”* initiative to prepare for the introduction in 2006 of new legislation to make it illegal to discriminate in employment and vocational training on the grounds of age. In addition, there is a manifesto commitment to establish an Older People’s Commissioner for Wales and a series of health gain targets have been announced. In Wales there has also been a strong emphasis on health and well-being since 2003 when the requirement to produce local health, social care and well-being strategies was first introduced.<sup>(6)</sup>

In July 2004 the Joint Futures Unit at the Scottish Executive issued *“Better Outcomes for Older People”* which emphasised the opportunities for developing and mainstreaming joint services across health and social care.

*“Joint services offer many advantages in helping older people cope better. They combine the strengths and skills of staff from many different professions and agencies so they can respond more effectively, and they can be more cost effective.”*<sup>(7)</sup>

Earlier this year, Northern Ireland in its strategy *“Ageing in a more inclusive society”* announced that they would appoint a champion for older people, a senior civil servant to have strategic responsibility for co-ordinating actions to improve the lives of older people<sup>(8)</sup>. The document also highlights the importance of the promotion of active ageing;

*“Maintaining independent living is a priority for many older people and we will be working to increase the percentage of older people who receive the care they need in a domiciliary setting. In tandem there will be a greater focus on intermediate care services which are designed to reduce unnecessary admissions to hospital, promote faster recovery from illness, support timely discharge and maximise independent living.”*<sup>(9)</sup>

2004 saw the publication of the Public Health White Paper, *Choosing Health: making healthier options easier.*<sup>(10)</sup> The delivery plan to support implementation published in March 2005 highlights the importance of promoting healthy and active life amongst older people. It stresses the contribution of local physical activity programmes, new technologies, preventing falls and fractures and the key role of intermediate health care.<sup>(11)</sup>

The role of nurses in supporting people with the most complex needs, many of whom will be older, has been further reinforced by the publication in February 2005 of the Department of Health document *“Supporting people with long-term conditions”*. The report identifies current weaknesses in the system:

*“Typically patients receive intermittent, ad hoc care in response to a crisis or untoward event, but have little preventive interventions in between. Though many professionals are involved in their care, no one has responsibility for considering all of their health and social care needs together or to ensure they are met.”* <sup>(12)</sup>

The introduction in England of the new role of community matrons, a key community nursing role, is seen as offering an opportunity to bring *“...the benefits of care management to a new category of patient hitherto outside its remit.”* <sup>(13)</sup>

In welcoming the publication, Beverly Malone commented:

*“Community nurses are working in a challenging climate as the demands to improve care through the redesign of services and role developments are constant. [This document] will prove to be a helpful guide for nurses, encouraging them to have confidence to make essential changes in nursing care and service provision.”* <sup>(14)</sup>

The role, payment and organisation of continuing health care has also had a high profile in 2004/05. In her report, *“Continuing health care: review revision and restitution”*, published in December 2004, Melanie Henwood identifies the difficulties in delivering clarity and consistency of policy and practice. She comments that whilst the restitution process has resulted in a tremendous volume of work for some nurses, *“...it has also (resulted) in promoting greater understanding of continuing care”*, <sup>(15)</sup> but she identifies that the difficulties associated with its funding and delivery have also become increasingly evident.

The Health Select Committee Enquiry into NHS Continuing Care concludes that whilst there has been considerable investment by Government in recent years in:

*“researching, reviewing and charging systems for the funding of long term care .... It seems we are no closer to a fair and transparent system that ensures security and dignity for people who need long term care, and which promotes their independence.”* <sup>(16)</sup>

It goes on to identify that:

*“The artificial barriers between health and social care lie at the heart of the problems surrounding access to continuing care funding, and we believe that it will be impossible to resolve these problems without first establishing a fully integrated health and social care system.”* <sup>(17)</sup>

In the shorter term, it recommends the adoption of national eligibility criteria which take account of psychological as well as physical needs, and an integration of the two parallel systems for funding continuing care and nursing care.



In March 2005, the Government published *Opportunity age - meeting the challenges of ageing in the 21<sup>st</sup> century*. This cross government strategy developed in partnership with the National Assembly for Wales, Northern Ireland Office and Scottish Executive, reviews progress in developing public services to meet the needs of older people and starts to chart a way forward for the UK over the next 10 to 15 years. In his introduction, Tony Blair comments:

*“Longer lives are something to celebrate – seizing the positive opportunities they present will make sustainable solutions possible. Developing a comprehensive strategy for ageing enables these differing issues to be seen in a truer perspective.”*<sup>(18)</sup>

In England, two related policy documents were published soon after *Opportunity age*, *excluded older people, the social exclusion interim report* and the Green Paper, *Independence, well-being and choice – our vision for the future of social care in England*. The Green Paper sets out “an ambitious programme for the next 10-15 years of services which will be person centred, proactive and seamless”.<sup>(19)</sup> Furthermore, the vision which is articulated describes “Services with an emphasis on preventing problems and (ensuring) that social care and NHS work on a shared agenda to help maintain the independence of individuals”.<sup>(20)</sup> The Green Papers offers nursing tremendous scope for new ways of working and new roles.

Social inclusion and anti-discriminatory approaches are also a key theme of recent policy guidance. The social exclusion report detailing the results of its recent consultation on the needs of excluded older people highlights “that there are many people with chronic ill health in later life and poor health is a key factor leading to exclusion, affecting many aspects of everyday life”.<sup>(21)</sup> The consultation concludes that, “improved **access** to health care is important and bringing services to places older people use is a good way of making contact”.<sup>(22)</sup>

The document also identified the large number of older people who suffer from depression and mental health problems, a theme echoed in the Audit Commission Wales document *Developing mental health services for older people in Wales*. The emphasis here is on integrated approaches to care and help in the early stages of illness:

*“Agencies need to integrate their contributions at key points so that services are co-ordinated from users’ and carers’ points of view.”*<sup>(23)</sup>

This brief review of the developing policy environment over the last year confirms the appropriateness of the RCN strategy in providing a robust framework for meeting the nursing needs of older people. The review also highlights the challenges for nurses in ensuring that they respond appropriately to the agenda of modernising services for older people and work in partnership with other key stakeholders. The challenge for nurses will be to build on current good practice and ensure a key role for high quality nursing interventions in the future.

### **Working in partnership**

Lorraine works for the Open University in Wales and used the opportunity to include the strategy themes in her work with other care disciplines and at a large Housing Association Tenant conference. Here she talked with older people about the involvement of older people organisations in our strategy and their continued involvement in monitoring the implementation and action within the strategy work. The strategy has also been presented formerly at RCN Wales, at Glan Clwyd Hospital in North Wales and at a Gwent Healthcare Trust conference. It has been also shared at the S E Wales Social Care Partnership Council meeting.

#### **4. What have we accomplished so far?**

In developing *Caring in partnership*, the RCN was anxious to set itself some challenging tasks and Section 5 of the document identified a set of strategic objectives and milestones. In order to review progress, members of the RCN Forum for Nurses Working with Older People and the RCN Mental Health and Older People Forum came together in a workshop with RCN gerontological staff and older people who had contributed to the development of the strategy. The purpose of the workshop was to review what had been accomplished in 2004/05 and to prioritise the remaining work to be accomplished up to April 2007 focusing particularly on key tasks for 2005/06.

Table 1 shows what has been achieved in 2004/05.

**TABLE 1**

**STRATEGIC OBJECTIVES and MILESTONES  
ACHIEVEMENTS IN 2004/05**

<b>AIMS</b>	<b>OBJECTIVES</b>	<b>MILESTONES</b>	<b>PROGRESS/OUTCOME</b>
<b>To ensure that older people are valued.</b>	A. RCN will actively root out discrimination in its own organisation.	A2. Work with older people to examine publicity material for negative stereotypes of older people.	RCN has collaborated in England with the NHS, Help the Aged, Department of Health and others in the production and launch of the “See the person” campaign to encourage positive relationships between hospital staff and older people.
		A3. Examine the language and internal workings of the RCN to ensure no stereotypes of older people are explicit or implied.	Work has been undertaken with the RCN publications team to review and amend RCN literature.
	D. RCN will work with older people to develop its range of services for nurses working with older people.	D2. Involve older people in the development of conferences and workshops.	Better Government for Older People (BGOP) and National Pensioner Convention (NPC) are working with the RCN forums to plan and deliver a national conference in November 2005. Strategy dissemination events have also been held.
<b>To maximise the potential of older people and nurses.</b>	E. RCN will support nurses in developing person-centred assessment processes that recognise the need to develop a holistic view of older peoples’ needs.	E1. Develop a new addition of the RCN older people assessment tool to reflect contemporary policy on assessment and ensure it is linked with the single/unified assessment process.	New toolkit produced and disseminated in 2004.

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AIMS	OBJECTIVES	MILESTONES	PROGRESS/OUTCOME
		E2. Develop paper and electronic version for wide dissemination.	Hard copy available and electronic copy available on the RCN website.
		E3. Provide guidance, advice and training on its use.	Ongoing advice provided through workshops and telephone support from RCN headquarters.
	F. RCN will work with its forums and older people to develop a more positive approach to risk management.	F1. In partnership with older people, the RCN will explore ways that they can promote practice that maximises potential.	RCN has contributed to NHS Estates consultation on inpatient facilities for older people. RCN has contributed to Dept of Health work on Information for Choice. RCN is contributing to the Age Care Awards research RCN has contributed to the NICE review on Dementia medication RCN has contributed to the NICE work on Falls RCN is a specialist advisor to NICE work on older people.
		F2. Prepare new material on rights, risks and the use of restraint.	New edition of the RCN guidance has been produced and RCN has also contributed to the National Patient Safety Agency work.
	G. RCN will influence the learning and practice development of nurses so that they can maximise the potential of older people.	G2. Develop a new edition of outcome indicators for nursing in continuing care.	New edition published in 2004 and also available online through the RCN website.

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			Exploratory discussions have taken place with Age Concern England about student nurses education.
<b>AIMS</b>	<b>OBJECTIVES</b>	<b>MILESTONES</b>	<b>PROGRESS/OUTCOME</b>
		G5. Collaborate with Help the Aged to promote the newly established Bursaries and Awards (RCN BSc in Gerontological Nursing) for person centred practice.	The Help the Aged Bursaries have been launched and approximately 50 nurses have benefited from this. New publicity material is being developed and a new sponsor being sought to follow on from Help the Aged.
		G6. Develop Dementia Nursing Bursary for person-centred practice in community care.	Scholarships have been established for nurses working with older people who have dementia. The work has been developed in partnership with the Alzheimer's Society.

Work during this first year of the strategy has focused particularly on:

- disseminating the strategy through workshops and conferences
- building more effective partnerships with older people so that they are more involved in helping to promote the strategy and the achievements of the milestones
- developing and disseminating practical tools and material to support nurses in working more effectively to meet the needs of older people
- promoting a positive image of nursing older people through increased specialist training opportunities.

**“Nursing older people is exciting, vibrant and full of challenges”.**

Julie has worked in a nursing home for the past 15 years. She is interested in raising standards of clinical practice and bringing recognition to nurses who work in her busy sector. Julie applied for a Margaret Parkinson Scholarship to do her DipHe and then progressed to the RCN Institute BSc (Hons) in Gerontological Nursing programme.

*“I was rather anxious as I am not naturally academic but have lots of passion and motivation. I was looking for top learning not top marks! The RCN have supported me and given me the learning experience that has changed my life and the way I nurse”.*

Julie received a Help the Aged award for achieving her BSc (Hons) in Gerontological Nursing and was thrilled as it made her feel valued. She used the money with the nursing team in her home to extend education opportunities. Julie has now got a new job in Intermediate Care and hopes to start a Masters Degree in 2006.

In 2004 RCN members began to address the milestones identified in the strategy, much of this work will be ongoing during the three-year period covered by the strategy. With 350,000 members, the ongoing challenge for the RCN is to communicate what the strategy is trying to achieve and how individual nurses can contribute.

**“The strategy is no use to anyone if it is not disseminated”**

Pauline was asked by the forums to write an article which presented an overview of the strategy and how it was developed. This was submitted to the RCN Journal, *Nursing Older People*. Another article was also written for Ian Philips newsletter.

*“It generated a lot of interest and reached nurses who would not have been aware of our work otherwise. It was great to hear from nurses about the work they were doing and how they found the strategy supported them in their work”*

### ***The Gerontological Practitioner's Network***

In Wales, GPN was established in 2001 by a group of committed RCN members who also involved older and retired nurses as core members of the network. The new RCN strategy aptly fitted with the Network's Statement of Purpose and the e-members have used the opportunity to map, highlight and share the strategy with members of the multidisciplinary network who belong to other professions.

## **5. What are our next priorities?**

The RCN, through the work of its Forum for Nurses Working with Older People and the Mental Health and Older People Forum together with its gerontological nursing staff, is committed to ensuring that *Caring in Partnership* is a real force for improving practice in nursing older people. The following priorities have been identified for 2005/06:

AIMS	OBJECTIVES	MILESTONES	FOCUS OF EFFORT
<b>To ensure that older people are valued.</b>	A. RCN will root out age discrimination in its own organisation.	A1. Review RCN human resources strategy to ensure it is not age discriminatory.	<ul style="list-style-type: none"> <li>• RCN Diversity Forum will be asked to undertake this work.</li> <li>• RCN is undertaking a pension's review for its members.</li> </ul>
		A2. Work with older people to examine publicity material for negative stereotypes of older people.	<ul style="list-style-type: none"> <li>• Publications Team will be working with representatives of Better Government for Older People (BGOP) &amp; National Pensioners Convention (NPC) on this task.</li> </ul>
	B. RCN will work together with other key stakeholders to portray positive images of older people.	B1. Work with older people and others to disseminate positive images of ageing.	<ul style="list-style-type: none"> <li>• As above.</li> </ul>
	C. RCN will raise the profile of older person abuse to ensure members are alert to its detection and respond appropriately.	<p>C1. Review existing RCN older people abuse guidance with other interested parties to identify gaps and priorities for nursing practice.</p> <p>C2. Build on the review to develop a framework for wider dissemination.</p>	<ul style="list-style-type: none"> <li>• Review and update RCN publication.</li> <li>• Contact Nursing and Midwifery Council to explore opportunities for collaboration.</li> <li>• Produce short draft leaflet for members to sign post advice and consult members on the usefulness of this approach.</li> </ul>



AIMS	OBJECTIVES	MILESTONES	PROGRESS/OUTCOME
	D. RCN will work with older people to develop its range of services for nurses working with older people.	D1. Work in Partnership with older people to review RCN nursing older people strategy and progress reports.	<ul style="list-style-type: none"> <li>• BGOP &amp; NPC have contributed to the review.</li> <li>• Publicise strategy and progress report on the RCN website and reports in Newsletter and at RCN Congress.</li> </ul>
		D3. Work with older people in the development of RCN publications.	<ul style="list-style-type: none"> <li>• We will involve a larger constituency of older people in the process.</li> <li>• Use the expertise of Plain English Society.</li> </ul>
	F. RCN will work with its forums and older people to develop a more positive approach to risk management.	F1. In partnership with older people, the RCN will explore ways that they can promote practice that maximises potential.	<ul style="list-style-type: none"> <li>• Will review/update RCN publication <i>Nursing homes, nursing values</i> to promote maximising potential.</li> <li>• Produce new publication on <i>“Risk balance and management”</i> for mental health clients.</li> </ul>
AIMS	OBJECTIVES	MILESTONES	PROGRESS/OUTCOME

	G. RCN will influence learning and practice development of nurses so they can maximise the potential of older people.	G1. Promote RCN Institute BSc (Hons) in Gerontological nursing to increase take up.	<ul style="list-style-type: none"> <li>• Build on the take up which increased in 2004/05.</li> <li>• Find a new sponsor.</li> <li>• Undertake a small research project to evaluate the programme impact on practice.</li> </ul>
		G3. In partnership with Government nurses and the RCN leadership programme explore the potential for providing older person specific clinical and political leadership programmes.	<ul style="list-style-type: none"> <li>• Clinical leadership programme sponsored by Dept of Health starts in February 2005.</li> <li>• Campaign for equal access to mental health services based on need not age.</li> <li>• In 2005 discussions will be commenced with RCN Northern Ireland and RCN Wales regarding the clinical leadership programme.</li> </ul>

AIMS	OBJECTIVES	MILESTONES	PROGRESS/OUTCOME
		G7. Work in partnership with other agencies to continue lobbying and influencing UK policies on the funding of nursing and long term care.	<ul style="list-style-type: none"> <li>• In England RCN will continue its collaboration with Age Concern; Help the Aged, Alzheimer's Society.</li> <li>• Lobbying and media work will be undertaken to inform the election manifesto.</li> <li>• Gather information from members to inform policy discussions with the Department of Health (England). A specific piece of research has been commissioned to be completed in the spring of 2005.</li> <li>• Collaborate with Department of Health to develop a learning course on continuing health care.</li> <li>• Present evidence to Health Select Committee Enquiry.</li> </ul>

AIMS	OBJECTIVES	MILESTONES	PROGRESS/OUTCOME
<p><b>To ensure the delivery of good quality, physical, mental and emotional care.</b></p>	<p>H. RCN will encourage its members to contribute to the development of high quality models of nursing.</p>	<p>H2. Contribute actively to developing creative ways of anticipating and responding to needs of older people through the promotion of good practice.</p>	<ul style="list-style-type: none"> <li>• RCN is a member of the Age Concern/Mental Health Foundation Board of Enquiry.</li> <li>• Continue to contribute to the development of core competencies skills for health.</li> <li>• Continue to support research project on teaching nursing home in NE London. Help with dissemination of findings.</li> </ul>
	<p>I. RCN will develop and promote the concept of person-centred practice.</p>	<p>I1. Utilise opportunities such as conference presentations, guidance and advice to promote person-centred ways of working.</p>	<ul style="list-style-type: none"> <li>• Forums will organise fringe sessions at RCN Congress.</li> <li>• Place articles in Nursing Older People's Journal</li> <li>• Production of Ageing Matters Newsletter as a way of disseminating Forum news</li> </ul>

AIMS	OBJECTIVES	MILESTONES	PROGRESS/OUTCOME
		I2. Influence the education curriculum and practice placements for student nurses working with older people.	<ul style="list-style-type: none"> <li>• RCN will contribute to Nursing and Midwifery Council's work on standards for nursing older people and will, with Age Concern hold a seminar to explore ways of influencing the educational and clinical preparation of nurses to work with older people.</li> </ul>
		I3. Gather evidence of the impact of contemporary policies that influence the delivery of person-centred care.	<ul style="list-style-type: none"> <li>• Disseminate in the UK, in collaboration with Dept of Health, the findings from RCN research with Warwick University and University of West of England.</li> <li>• Appoint an RCN Associate Fellow Gerontological Nursing to support research work across the UK.</li> </ul>

AIMS	OBJECTIVES	MILESTONES	PROGRESS/OUTCOME
		I5. Explore with Government how RCN can promote best practice work with older people.	<ul style="list-style-type: none"> <li>Identify the future source of nursing advice to the chief nurse in England, develop closer relationships with Government nurses in Wales, Scotland and Northern Ireland and develop a lobbying strategy to ensure that such advice is contemporary credible, evidence based and reflects best practice.</li> </ul>
	J. RCN will promote the role of nurses in securing health and wellbeing in older age.	J1. Develop an information toolkit for nurses and older people on sex and sexuality.	<ul style="list-style-type: none"> <li>Secure funding to develop and disseminate the material.</li> </ul>

AIMS	OBJECTIVES	MILESTONES	PROGRESS/OUTCOME
		J2. Develop an RCN position statement on the nurse's role in promoting health and wellbeing in older age by working with older people and partner nursing organisations.	<ul style="list-style-type: none"> <li>Promote Mental Health and wellbeing in older age by contributing to:                             <ul style="list-style-type: none"> <li>BGS Delirium Guidelines</li> <li>NICE Guidelines</li> <li>-</li> </ul> </li> </ul>
<b>To Promote Effective Partnership Working</b>	L. RCN will work in partnership with older people to develop its policies and priorities.	L1. Develop arrangements to involve older people in RCN forums to contribute to shaping priorities.	Work is underway to involve BGOP/NPC in: <ul style="list-style-type: none"> <li>Chairing and presenting at the 2005 RCN conference</li> <li>Reviewing the strategy.</li> <li>Working with us on improving image of older people.</li> </ul>
	M. RCN will develop confident practitioners who can work in partnership with older people.	M1. Review course modules on RCN Institute BSc (Hons) in Gerontological Nursing with older people.	Review each module on a rolling basis in 2005 and 2006 in line with the re-validation process.
AIMS	OBJECTIVES	MILESTONES	PROGRESS/OUTCOME
	N. RCN will develop confident practitioners who can work as members of multi-agency and multi-professional teams.	N1. Promote the roles of consultant nurses and older people specialist nurses (OPSN).  N2. Provide support and	<ul style="list-style-type: none"> <li>A project on OPSN is in the development phase and may be linked to Green paper on Adult Social Care.</li> </ul>

		<p>network opportunities for consultant nurses and older people specialist nurses.</p> <p>N3. In Partnership with Help the Aged and local providers, RCN will seek funding to undertake evaluation study on the outcome of OPSN roles.</p>	<ul style="list-style-type: none"> <li>• Contribute to thinking in Scotland as part of the Glasgow Caledonian Virtual College Advisory Group.</li> <li>• Mentoring being offered to aspiring consultant nurses.</li> <li>• Contribute to Department of Health (England) work on consultant nurses.</li> </ul>
	<p>O. RCN will promote the role of older people as active partners in the single or unified assessment process.</p>	<p>O1. RCN forums to disseminate examples of good practice.</p>	<p>Prepare articles for the RCN newsletter and journal Nursing Older People, possibly exploring opportunities for a regular column/article in NOP.</p>



## 6. Taking the agenda forward

In the forthcoming year the Royal College of Nursing will be seeking ways to publicise its strategy for nursing older people and the priorities identified for 2005/6. It will also be looking at ways of developing its partnership with older people and their representative organisations to combat ageism and to promote the voice of older people.

The work of the Forum for Nurses Working with Older people and the RCN Mental Health and Older People Forum are important vehicles in taking the messages out to the wider RCN membership and securing a broader base of engagement. The work programme of the two forums has been developed to reflect the priorities for 2005/6. The agenda is demanding but offers opportunities for engaging members in driving up the standards of nursing practice with older people and can support nurses in reshaping their roles as the pattern of older people's services changes.

In her introduction to the strategy in 2004, the General Secretary of the RCN, Beverly Malone, commented that the strategy:

*“helps us locate our work within the context of what older people tell us they want from nursing. It will ensure that the RCN achieves an integrated, consistent and inclusive way of working that focuses on maximising the potential of the RCN, nursing staff and the older people with whom we work”.*<sup>(24)</sup>

In 2004/5 we made a start in translating our aims and objectives into action, our work in 2005/6 will need to build on the foundations that have been laid down to ensure that our review in 2006 identifies further progress and achievements.

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