Applications for the Queen’s Nurse Title

Guidance Information and Frequently Asked Questions

The QNI supports leadership, innovation and best practice in order to improve care for patients. We believe that one way to do this is to bring together community nurses who share common values with a shared title. The QNI is proud to be developing and supporting a growing network of Queen’s Nurses across England, Wales and Northern Ireland. We believe this will not only benefit patients, families and carers and the quality of care they receive, but also promote the development and recognition of community practice.

About the Queen’s Nurse title

What is a Queen’s Nurse?

A Queen’s Nurse is someone who is committed to high standards of practice and patient-centred care. They are trusted and valued by the people they serve and respected and admired by their peers. They are enthusiastic and passionate about the care they provide.

The Queen’s Nurse title is not a qualification, and it is not a requirement to help you to take on a particular role. It is a commitment to quality care, advocacy for patients, families and carers, and to leadership, learning and development.

A Queen’s Nurse:

- demonstrates integrity, honesty and compassion whilst delivering the highest quality care to the benefit of individuals, carers, families, communities and peers
- communicates in a manner which engenders the trust of individuals
- offers holistic, personalised care which acknowledges, and is tailored to, the needs of the client
- acts as an inspiring role model to peers and professional colleagues
- is committed to learning and the development of community nursing.
What are the benefits of becoming a Queen’s Nurse?

The title gives special recognition of your commitment to your profession and:

- demonstrates your enduring commitment to serving communities, to providing and promoting best care for individuals, families and carers in the home and in the community, and being an excellent role model for colleagues
- enables you to join a network of Queen’s Nurses committed to the same values for leadership, learning, development and support
- links you to a community nursing organisation with 133-year history of inspiring, involving and investing in nurses, giving you opportunities to influence policy and practice
- links you to regional Queen’s Nurse meetings in your area
- provides access to our Queen’s Nurse annual conference and other networking events

What are the criteria required for the Queen’s Nurse title?

- Currently registered with the Nursing and Midwifery Council (please make sure your NMC record and revalidation is up to date)

- Minimum of five years’ recent experience working in a community or primary care setting (in the UK)

- Currently working in England, Wales or Northern Ireland to support people to receive the best possible care in their own homes or other community-based settings

- Must not be under investigation by the NMC or employing organisation

- Must not be the subject of any disciplinary proceedings

- Must have support from patients/clients, direct line manager and additional contributors (see forms for additional guidance).

Please note that submitting the application does not result in automatic award of the title of Queen’s Nurse.

There is a rigorous assessment process of the application and the supporting statements, and some applicants will be disappointed.
Is the Queen’s Nurse title a substitute a community nursing qualification?

No. It is not an educational course, and does not give the nurse a qualification. Instead, it brings together nurses who can show evidence that they are committed to person-centred care, and to continually improving practice.

Is the QN title only for district nurses?

No. The title is open to registered nurses and specialist community public health nurses working in community or primary care in England, Wales or Northern Ireland. These include district nurses, general practice nurses, community children’s nurses, community learning disability nurses, care home nurses, community mental health nurses, occupational health nurses, nurse educators and lecturers, managers, prison nurses, school nurses, health visitors, nursing home nurses, homeless health nurses and many more. This list is not exhaustive.

Can I nominate someone else for the title of Queen’s Nurse?

No. Individuals need to apply personally for the title. However, if you think a colleague would make a good Queen’s Nurse, please do encourage them to apply. All the details and forms are on our website at www.qni.org.uk/nursing-in-the-community/queens-nurses/apply-become-queens-nurse.

I’m a midwife – can I apply?

Midwives who also have a valid registration as a nurse on the NMC register and who work in the community are welcome to apply.

I am a nurse in Scotland – can I apply?

The QNI can only award the title to nurses in England, Wales or Northern Ireland. A separate charity, QNI Scotland, supports Scottish community nurses and has recently re-introduced the title of Queen’s Nurse. Contact QNIS by telephoning 0131 229 2333, or visit their website www.qnis.org.uk/the-new-queens-nurse-title.

I have a colleague who has given many years’ service to community nursing. Should I encourage him/her to apply?

The Queen’s Nurse title marks the start of a process of learning and leadership for nurses with a minimum of five years’ experience in the community; it is not a reward for long service.

Your colleague may wish to apply for the Long Service Award. www.qni.org.uk/explore-qni/qni-awards/long-service-award.
How is the Queen’s Nurse title different from the Outstanding Service Award?

Nurses can only be nominated for the Outstanding Service Award by their colleagues, for exceptional achievement in their careers.

The Queen’s Nurse title marks the beginning of a process of shared learning and leadership, in a community of other nurses with the same values. Nurses must apply for the QN title themselves.

If I was successful in receiving the title of Queen’s Nurse, could I accept it on behalf of my team?

No. The title of Queen’s Nurse is given to an individual. Therefore, it cannot be accepted on behalf of a team.

I want to apply for the title of Queen’s Nurse but I no longer have direct patient contact; can I still apply?

- If you are in a managerial position – please ask the colleagues that you line manage for feedback
- If you are in an educational position – please ask your students for feedback
- If you are working independently – please ask colleagues in your team/organisation that you have provided mentorship or guidance

Please contact a member of the Practice Development Team at queensnurse@qnj.org.uk to request the appropriate ‘additional contributor feedback form’.

I want to apply for the title of Queen’s Nurse but I work with young children/people with learning disability/older people who may not be able to complete the form. What should I do?

You could invite a carer or family member to complete the patient contribution form on behalf of your client. Please ensure this is clearly stated on the form.

I want to apply for the title of Queen’s Nurse but work in a self-employed capacity/own my own business so do not have a direct line manager. Can I still apply?

No. You must be able to provide a contribution from a direct line manager. If this is not possible, you will need to receive support from the person that you are directly accountable to for your work, such as your trustee chair.

I’m a nurse doing my job – the title Queen’s Nurse sounds elitist - is it for me?

If you are committed to high standards of care, learning and leadership and want to join community nurses with the same values, then the Queen’s Nurse title is for you. Please note you will need to have five years’ experience working as a community nurse to be able to apply.
I am under disciplinary measures at work; can I apply while these are in force?

No. You must wait until the issue has been resolved.

I have been reported to the NMC can I apply whilst the investigation is ongoing?

No. You must wait until the outcome of the investigation is known.

Am I able to re-apply if my previous application has been unsuccessful?

Yes, although reapplication does not guarantee success. Please take account of the feedback received from the previous application when making a future application.

I have run a successful project which has had a major impact on patient care. Can I enter that for the Queen’s Nurse title?

You can cite your project in your application, demonstrating a personal achievement and how you have reflected on and learned from the experience, but the Queen’s Nurse title depends on the whole of your practice as a nurse, not one project or any specific achievement. The assessors look for a more rounded picture of your work and your sustained commitment to improving nursing care and nursing services.

About the application process

How do I apply?

You can apply to become a Queen’s Nurse by following these simple steps. Full guidance can be found on our website at www.qni.org.uk/nursing-in-the-community/queens-nurses/apply-become-queens-nurse

Step 1

➢ CHECK you are eligible to apply, using the above criteria.

Step 2


We will not be issuing any URNs after the closing date specified on the QNI website.

You will receive confirmation of your URN together with the specific submission date applicable to your application. Your URN must be included on all paperwork submitted.
Step 3

➢ **REQUEST** evidence in support of your application, using the appropriate template forms available on our website:
  - Patient/client/colleague/student (depending on your current role) contributor forms **X 2**
  - Direct line manager contributor form **X 1** (we require contribution from your current direct line manager who has been managing you for a minimum of 1 year).

Step 4

➢ Please ensure you stay within the stated word limits and submit your application electronically in Word document format to queensnurse@qni.org.uk.

Step 5

➢ Our assessors will make their decision based on the content of your application and contributions only so please make sure you include as much information about your work as possible. Please do not include links to other documents or articles, etc. The applications submitted for assessment will be anonymised.

Is there a closing date for applications?

Yes, there are two closing dates each year. This information will be provided to you when your URN is issued. The date can also be found on the QNI website. If we do not receive all the required documentation by the submission date and time, your application cannot proceed.

How much does it cost?

There is no charge to apply for the title of Queen’s Nurse.

I’m a busy community nurse, why would I put myself through all this work? What’s in it for me?

The title gives special recognition of your commitment to your profession. You will also be able to join the Queen’s Nurse Network, benefiting from professional development, joining a network of like-minded people and helping to meet your re-validation requirements.

Am I guaranteed to get the title if I apply?

No. Submitting the application does not result in automatic acceptance. There is a rigorous application and assessment process and some applicants will be disappointed.

How many Queen’s Nurses do you accept each year?

This depends entirely on the number and the quality of the applications received. We do not set a target number.
Is it fair to expect my patients/clients to comment on me – won’t this put undue pressure on them?

We have spoken to several organisations that represent patients, including the Patients Association, and they have assured us that it is good practice to involve patients/clients in assessing the quality of healthcare that they receive. Nurses also commonly seek feedback from the people they care for. If patients/clients agree to give feedback, they are given a form to return in confidence to the QNI. No patient/client has to provide information if they don’t want to.

Will I need to attend an interview?

No. Applications for the title of Queen’s Nurse are assessed by a panel, from the evidence provided in your application and feedback provided by your direct line manager and patients/clients. However, you, your manager, peer contributors or patients/clients may be contacted by the QNI to clarify an element of your application.

How will I know if my application and all supporting papers have been received?

You will receive an email from the QNI confirming receipt of your application and additional feedback forms in support of your application once all documents have been submitted.

Please note that your application cannot progress for assessment by the panel if the supporting papers are not submitted by the deadline. In such circumstances, your application will be designated an incomplete submission.

It is your responsibility to check and ensure that your application and all supporting documents have been received by the QNI.

I have received my URN but I’m too busy to apply this year, can I do it next year?

The URN is only valid for the year in which it is issued, if you do not apply, the URN will be cancelled and you will have to request another one for the following year.

How will I find out if I have been successful?

All applicants will receive a letter approximately 10 weeks after the submission date informing them of the decision of the assessment panel which is final. The QNI reserves the right to extend this period where there are large numbers of applicants.

SUCCESSFUL APPLICATIONS

Will I be known as a ‘Queen’s Nurse’ instead of District Nurse, Health Visitor or other job title?

No. The title of Queen’s Nurse is an honorary one, not a day-to-day job title or a qualification. The title is for individual nurses who have demonstrated a high level of commitment to person-centred values and continually improving practice.
Is there a time limit on the use of the Queen’s Nurse title?

We think it is important that Queen’s Nurses have an opportunity to renew their commitment. You will be invited to confirm your commitment on an annual basis and the title of Queen’s Nurse can only be retained if you engage with this annual process.

Queen’s Nurses may not be able to renew their title, for example if they no longer work in community nursing.

What commitment is expected of me as a Queen’s Nurse?

You will be expected to demonstrate at all times the standards of a Queen’s Nurse, as described in the guidance. In addition, you will be asked to sign an agreement which sets out the obligations of a Queen’s Nurse to the QNI.

The Queen’s Nurse title is the start of a process of learning, networking and leadership. We ask our Queen’s Nurses to attend at least one workshop/meeting a year; we also encourage Queen’s Nurses to keep in touch with us and inform us of developments.

UNSUCCESSFUL APPLICATIONS

What happens if I am unsuccessful?

You will be informed by email approximately 10 weeks after the submission date informing you of the outcome. The decision of the assessment panel is final. Only email feedback can be requested from the practice development team.

Can I appeal the decision?

No, the decision of the assessment panel is final. There is a rigorous process of assessment and moderation.

PRIVACY POLICY

Would my contact details be shared with others?

If your application is successful, we will ask your permission before sharing your contact details with the Queen’s Nurse Network to ensure that you are invited to the regional Queen’s Nurse meetings and receive regular updates about QNI activities.

If you are unsuccessful, we will, with your permission, hold your details for 3 years but will not contact you or share your details with any third party.

You can view our Privacy Policy at www.qni.org.uk/privacy.
APPLICATION FORM - SECTION II

Personal statement in support of your Queen’s Nurse application: This section gives you the opportunity to write about and provide examples of what you do that illustrates the values you have as a nurse; the principles that are central to being a nurse and upholding the profession (requirement of maximum 1000 words).

How do you see yourself as a Queen’s Nurse and what does the title mean to you: This is your opportunity to write about and provide examples of what you do that aligns itself with the values of a Queen’s Nurse as outlined earlier in this guidance (requirement of maximum 1000 words).

Please explain your vision for the development of community nursing in the future. This section allows you to consider where community nursing is now and where it might be in five- or ten-years’ time. What would you personally and professionally want to see for patients, families, carers’ and communities in the future (1000 words maximum).

APPLICATION FORM - SECTION III – REFLECTION

(Please make sure you adhere to the 1500-word limit for this section).

I am not very confident when it comes to reflection – can I just describe what I did?

No. Reflection is very much part of the nursing process, it is a requirement in a Nurse’s Professional Code of Conduct and can be very beneficial. It is also a requirement for NMC re-validation.

In all professional roles it is important to reflect upon a situation whether it is deemed as positive or negative. Reflection is seen as a theory of critical thinking and is a process of reviewing an experience of practice in order to describe, analyse, evaluate and so inform learning about practice (Boud et al 1985). Invariably it is human nature to reflect upon an occurrence when ‘something has gone wrong’ (Taylor, 2006). Reflective practice advocates that we should also reflect upon good practice as a way of enhancing and reinforcing this practice and also as a quality control mechanism.

Here is an example of a reflective model that may assist you:
In the ‘reflective cycle’ (Graham Gibbs, 1992), there are six steps to aid reflective practice:

- **Description:** First you describe what happened in an event or situation
- **Feelings:** Then you identify your responses to the experience, for example “What did I think and feel?”
- **Evaluation:** You can also identify what was good and bad about the event or situation.
- **Analysis:** The ‘Feelings’ and ‘Evaluation’ steps help you to make sense of the experience.
- **Conclusions:** With all this information you are now in a position to ask “What have I learned from the experience?”
- **Action plan:** Finally, you can plan for the future, modifying your actions, on the basis of your reflections.

Here is a practice example of short reflective writing using Gibbs:

- **Description:** First you describe what happened in an event or situation

  I went to visit a patient to administer an insulin injection. We have access to her home as she is unable to come to the front door. Upon arrival I found her lying on the floor in a semi-conscious state. I had to perform an initial assessment to work out whether she would need to go to hospital. I had to rouse her and work out whether this was a collapse as a result of a diabetic coma. She was able to respond to my questions and it soon became apparent that her blood sugar levels were low.

- **Feelings:** Then you identify your responses to the experience, for example “What did I think and feel?”

  I felt scared as I was alone with the patient with no one to call. I was worried about whether or not I would know what to do and how to treat her. I felt an initial panic come over me and my heart was pounding in my chest as I frantically searched for her glucose.

- **Evaluation:** You can also identify what was good and bad about the event or situation
The good aspect was that I made the right judgment about her condition and felt in control medically. I acted quickly and gave her some glucose that she had in the cupboard and stayed with her until she felt strong enough to get up from the floor and I could assess her condition further.

The worrying aspect was the amount of time it took me to find her glucose tablets as I had no prior knowledge of where they were and she was unable to tell me fully.

- **Analysis**: The ‘Feelings’ and ‘Evaluation’ steps help you to make sense of the experience.

I felt happy that I had the ability to rely on my knowledge of diabetes at that moment and also that the patient trusted me to do the right thing. I also felt empowered as I had prevented her from going into hospital for something that was manageable in this instance. I was very mindful of the amount of time I was spending with this patient and that I needed to be getting on with my list, especially as I had another patient with diabetes to see.

- **Conclusions**: With all this information you are now in a position to ask “What have I learned from the experience?”

I have learnt to trust my clinical judgements more and to realise that I can rely on my own ability in this type of situation.

- **Action plan**: Finally, you can plan for the future, modifying your actions, on the basis of your reflections.

In the future I will always make sure that I know where all the patients with diabetes keep their emergency glucose tablets and share the learning with my team.