ASCN UK Chairperson's Report 2026

Natasha Rolls

ASSOCIATION OF STOMA CARE NURSES UK

It has been another busy year for the ASCNUK and for stoma care in general, we know how hard you are all working for your patients and for the specialism so thank you. There have been various NHSE and DHSC reviews that we have been involved with, speaking on your behalf, making sure that your voice is heard and that services and products can be available for our patients. We believe this is a very large part of what ASCNUK should be doing, we need to make sure that those conducting reviews understand the complexity of the stoma care landscape and that any findings or recommendations reflect your and our patients' best interests.

Whilst we have a voice we should use it, we will provide information and opinion and are happy to do this, however we refrain from using the term 'in collaboration with' as we are careful to not align ourselves with any review prior to understanding the aims and objectives or recommendations; we will not ever align ourselves with decisions that compromise or damage the specialism or our patients, you may be reassured of that. We will continue to represent you and our patients and will of course update through our newsletters and at conference, often by special email, so please look out for communication from us and make sure you stay aware and informed, please always feel free to feedback to us any concerns or issues as they arise.

ASCNUK also has many projects ourselves which we continue to drive forward:

Advancing Stoma Care Services (ASCS)
As you are aware we devised 3 best-practice care pathways; elective, emergency and community care, these sit with a GIRFT fellow currently as they ensure the evidence produced is robust and appropriate. The pathways will provide a framework from which services can be protected, supported and commissioned to ensure there is no unwarranted variance and that all patients UK wide have access to expert stoma care. We know our expertise produces better outcomes and experience and can translate into much needed cost-efficiencies. This has felt like a very slow process, the working groups worked fast and effectively to gather the evidence, review what exists and decide by consensus what 'good' looks like. They were keen to ensure that all warranted variance was accounted for to make sure that all teams are reflected and not disadvantaged. The delay has been with the volume of work that GIRFT have to accommodate and the many changes that have been seen at governmental and departmental level, these changes can shift the focus and cause delays with current workload. Be assured we will continue to push this work forward and keep up momentum wherever possible.

Once adopted by GIRFT this work with help you to advocate for your role, the value of specialist stoma care nurses and your patients. As part of this work, we have also devised the most comprehensive workforce survey, which also sits with GIRFT, and this will provide a detailed view of roles, staffing and commissioning ever seen in stoma care. We will let you know as soon as this is going to be disseminated, we will need to make sure that it is completed by everyone to ensure we have a full picture. None of the best practice can be delivered without you, the safety critical, expert workforce, you matter.

Role descriptors and levels of practice.
Leading on form the ASCS work we have identified a need to define the role of specialist stoma care nurses- who instead of CNS in stoma care will be known as Nurses in a Specialist Role- stoma care as the RCN have updated their name descriptors. This is part of their work on defining roles, levels of practice and ultimately bandings. The new proposed changes to Annex 20 of the AfC will mean that band 5 nurses will automatically progress to band 6 with 12-24 months without having to apply for an available band 6. This of course has implications for us in specialist nursing, and we recognised that again we need to be at the forefront of this work to protect you and to ensure that the public can be reassured of clarity and standardisation across the piece.

We are working with the RCN and NCCNN to produce job descriptions that embed the 4 pillars of nursing and provide clarity regarding educational level, professional experience and clinical practice. These descriptors will ensure that the levels of practice used by the RCN, enhanced, advanced and consultant, are reflected in your role and that you will be able to use these to demonstrate your worth and produce effective job evaluations if your banding is not representative of your work. This is not meant to challenge or disadvantage you, this process is a robust, evidence-based process that will show your worth and more effectively allow you to progress. Please keep an ear out for this work, we are advocating for stoma care specialist practice but are hopeful that this work will be transferrable to other specialists and with the RCN we will be working to demonstrate the level at which you work; as expert, safety critical clinicians, service developers and custodians of a specialism that deserves to be recognised and valued.

EXPASS

The Exercise after stoma surgery project was presented last year, this has been a huge piece of work and will empower you to feel more confidence in getting patients back to activity and fitness, something that we know is often difficult for our patients. We listened to your feedback last year and know that we need to provide you with a working tool to guide and enhance your practice and to make using EXPASS more nurse centric and intuitive. This work is in progress now and we will update you as soon as it is completed. I know some of you have begun to us ethe recommendations which is great. In my team we have formed a working group with our physio team, and they are enthusiastically adopting the recommendations in their work, literature and processes. It has been great to work with them on this, it has certainly enhanced our understanding and appreciation of each other's work.

I will let my esteemed colleagues in the clinical development and education roles update you about their work, but I wanted to mention the updated and new guidelines, work on theses has been tireless and comprehensive. ASCNUK focus within all our work is ASSESSMENT and we construct all our work around this concept. You make complex assessments every day and it is the very essence of registered nursing; in fact, it is only RNs that can make assessments. This focus ensures that we are consistently demonstrating the complex, expert, safety critical nature of our work which is vital to prove our value and demonstrate our worth.

We are honoured to have been nominated in a BHTA award for conference 2025 in Wales, this was our first conference with our new secretariat, Delegant, and so the nomination is even more special. This nomination reflects all the hard work and commitment from all who work for ASCNUK, committee, trustees, area representatives, industry partners and you, the delegates who make every conference so educational and valuable - thank you.

Thank you too to my colleagues on committee without whom none of this would be possible and I would be a quivering wreck! Every role on committee is voluntary, and I know that we all fit this in around our 'day jobs'. We are all form slightly different places in the landscape and bring various perspectives which makes for diverse opinion and views and very lively meetings. But we are united in being practising stoma care nurses and in our passion for the specialism and our commitment to the association.

I look forward to conference and to the next year, working with you and for you, and whatever that may bring. I know that as a cohort of nurses you will continue to do your very best for patients and each other and we maintain our commitment to you and the specialism.

Natasha Rolls
Honorary Chair