The past few weeks have been a turbulent time for the health-care system. With the coming election it has been the centre of debate, promises and conjecture. For each of us it can be difficult to respond, wondering what is our view and, in the light of such confusion, it is understandable that we often don’t respond at all.

But all nurses have a critical role to play in the next few weeks. As outlined in the new Nursing and Midwifery Council Code, to ensure professionalism and trust we need to “provide leadership to make sure people’s wellbeing is protected” and that we improve people’s experience of the healthcare system. That means as leaders we all need to ask questions and actively engage in the political process.

The theme of this year’s International Nurses Day – Nurses: A force for change, care effective and cost effective – is timely and spells out the important contribution nurses make globally to physical, mental and emotional health but also importantly to economic health. Healthy populations live longer and are more productive. Health is an indicator and outcome of sustainable development.

The economic crisis, which started in 2008 and continues to this day, has had a significant impact on the nurse workforce through government cutbacks on expenditure and in particular on nursing. Shortages of skilled staff have now become a common feature as short-term decisions have long-term consequences far beyond the single term of a government, with a documented impact on patient safety and quality of care.

Why, when nurses are at the core of healthcare delivery, is their contribution to policy development and decision-making marginalised at best and often ignored? The evidence for this in relation to workforce availability is all too apparent. Long-term planning and recognition of the unique needs of nurses, as described by nurses themselves, is a prerequisite to developing positive practice environments, which in turn improve health outcomes.

So we should be asking difficult questions such as why do politicians always describe nursing as a cost, a cost to be managed, and why do we let them do? Why do they not describe nursing as a vital investment, a portfolio of skilled individuals to be managed well for future generations?

Where are the nurses in the decision-making processes of government and policy? Where is the evidence that they are being listened to? Why are there so few nurses visible in this arena?

Mobilising a UK nursing and midwifery workforce of around 680,000 to help generate new and different solutions to the challenges we face requires a real and articulated commitment. We do have a role to play but so too does government.

So, rather than be weary of the conversations, use the media and forums available to you to pose direct questions of relevance to protecting patient care and pursue these vigorously until you get authentic answers. It is our professional duty.

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Caring for people with dementia requires empathy and skill. Many staff would find it difficult to know what to say to a patient with dementia who insists he needs to get ready for work or believes his deceased wife is still alive. Experts from the Newcastle Challenging Behaviour Team describe on p18 a “time machine” approach with techniques to manage deteriorating memory. As memory loss progresses, people believe themselves to be back in an earlier period of their life. The timeline approach can increase your confidence and competence in communicating with those with dementia. If you want to consolidate your knowledge, take our recently launched learning unit on dementia, delirium and depression at nursingtimes.net/dementia