

Opportunities for men in nursing administration

ANTHONY J. CARR

S.R.N., N.D.N.cert., (Queen's Nurse)

Midland area organiser, Royal College of Nursing

THE present position of the man in nursing is somewhat similar to that of the woman in medicine a few years ago. Even today it is rather unusual to see more than one woman consultant in general surgery or medicine in the normal non-teaching hospital in this country. In much the same way, the presence of the man within the senior administrative structure of nursing in hospital or in the public health field is more numbered in ones than anything else.

It is with this background that I wish to discuss the present position and opportunities of the man seeking a career in the various fields of nursing administration. I have divided this paper into two parts. The first part shows the part the man can play in administering the hospital service while the second part shows the progress that can be made in the administration of the local health services.

PART I—HOSPITAL ADMINISTRATION

General Hospitals

I have assumed that, very approximately, five per cent of all full-time State registered nurses in the general hospital are men. I say this because the annual report of the Ministry of Health does not divide the listed employed nurses into sex as is the case with the mental and mentally sub-normal hospitals.

If the General Nursing Council statistics for successful finalists are analysed for the last two full years the following information can be extracted: in 1962/3 of all nurses passing the State final examinations, 4.5 per cent were men; in 1963/4 the figure was 4.7 per cent. This shows that whatever ratio of men exist at present, the future based on the figures quoted will produce a small minority of men within a vast field of hospital nursing administration.

If this criterion only is taken into consideration then it could be assumed that the future for the man is rather bleak. In actual fact of course the man enters nursing with the idea of making it a lifelong career while the woman quite rightly hopes that she will marry within a few years of qualifying and raise a family. So that although the five per cent or so may remain for years the ratio of

men in the general field of nursing, this five per cent is steady and constant while the other ninety-five per cent may be constantly changing.

It can be agreed that there is a place, indeed an increasing place, for the man in the nursing administration of the hospital.

After completion of training and taking a post of staff nurse, the man will wish to see what other opportunities present themselves to him to develop his skills in nursing. The post-graduate courses offered to the State registered nurse are numerous. Possibly the most useful qualification today is that of a registered mental nurse. With both general and mental training accomplished, there is a wide field of opportunity in many branches of nursing.

The first avenue of promotion usually open is that of charge nurse. This gives the man every opportunity to administer a ward, to control staff and treat patients according to the skills he possesses. It is in this type of post that he will prove to himself and his senior nursing administrator that he has the ability to administer.

There are several courses available so that the man can be trained in administration at this level. The Rcn offers courses for the ward sister's certificate both in London and in other centres in the country, while the William Rathbone Staff College in Liverpool offers a suitable three months' course to charge nurses. Several regional hospital boards are planning courses of this nature for their own staff.

If a man wishes to progress further in this field then opportunities often present themselves in the form of departmental head for places such as operating theatres, casualty and out-patient departments. While at this stage of development, an approach can be made to the hospital management committee or board of governors for secondment for a suitable one-year course to obtain a certificate in hospital nursing administration. Again the Rcn offers a one-year course, as does the King's Fund Staff College.

It is possibly at this point when the man is most inconvenienced. He may have a small family and have to leave home for a period of time that could be the most critical in his married life. There are now allowances totalling £3. 15s. per week for a nurse having to maintain

Continued on page 294

two homes while on an approved course. Even with this allowance, sacrifice has to be made.

After obtaining this most valuable certificate, the man can then seek a post of assistant matron. Whichever way one looks at this title it is rather ridiculous to call a man "Matron". Let it be hoped that the "Salmon Committee" has solved this problem by completely changing this rather out-of-date name. It is at this point that the man reaches another critical time because to obtain promotion often involves moving to another part of the country. The more junior one is the more difficult it is financially.

At the same time to progress in the administrative field one must seek promotion. It is not for me to encourage my men colleagues to move; only sufficient to say that with a family of four children I have done this more than once and always this has been to the advantage of both the family and myself. These posts are not easy to find even today so it is very little good to have a "Chip on one's shoulder". The motto for the young aspiring man in administration is to try, try, and try again.

There are at this present time a few men holding deputy matron's posts in large geriatric hospitals and fewer in general hospitals. As yet no man has been appointed to a large general training hospital as the senior nursing administrator. This day is still in the future but it is advisable that men should be training for that day now so that a suitable man, adequately trained, may be able to hold with confidence the post offered to him.

If the man decides to make a career of teaching, then the top is open to him in general nursing. Nearly every week men are appointed as principal tutors of training schools and group training schools. Here, although being a tutor involves teaching, administrative skill plays an important part in administering this part of the service.

Psychiatric Hospitals

At the present time, 60 per cent of all full-time registered mental nurses are men. With the shortage of suitable women, men are taking posts both in the male and female sections of the hospital.

If the trained mental nurse is willing to seek posts over a wide area, then his future is bright. He may follow a career outlined for the general nurse but may find it hard to find a post of charge nurse because of more senior nurses above him. This is why, if financially possible, the man may have to move. It is of course at this stage of his career that he is least able to do so. This is especially so if married and already raising a family.

The last two years' figures of successful finalists show a temporary drop in newly trained men in the mental field. In 1962/3 sixty-five per cent of successful finalists were men. This dropped to 52 per cent in 1963/4.

With the high marriage rate, men are taking senior posts in women's departments and often a "male matron" can be seen with male deputies. With recent experiments of amalgamating both sides of the nursing administration under one principal nursing officer, most posts so far have gone to men. At the present time opportunities

for men are good but there may come a time when, because of the senior posts mentioned above, less places will be available in administration and this could mean a return to a position of waiting for dead men's shoes.

Mental Sub-normal Hospitals

In this field of nursing there is also scope for the man to advance to the highest ranks. Most hospitals have both a matron and a chief male nurse. The particular challenge here is to succeed in old buildings with far from good equipment and at times lack of money. It calls for people with a high sense of dedication and pioneering spirit. The more I meet nurses involved in this particular type of work the more I notice the extraordinary vocation they have. Of all full-time trained nurses for the mentally sub-normal, 61 per cent are men while in 1963/4, 46 per cent of successful finalists were men.

PART II—LOCAL HEALTH SERVICE ADMINISTRATION

Turning to the public health field, I feel the opportunities for men lie very much in the future. While with the passing of the Public Health Act of 1848 men found their niche as public health inspectors, it is only fairly recently that men have been accepted into certain spheres of the public health nursing field. Up to the present time the midwifery and health visitors' certificates have been the main qualification drawbacks. The Aberdeen scheme described elsewhere in this issue, prepares men for a very similar qualification to that of the health visitors' and with it future prospects of advancement into senior administration.

In the hospital men are finding more and more their vocation in teaching. This is barred to them in the public health field even in district nursing, as the necessary qualifications include midwifery. No doubt time will bring change here as it has done in other fields of nursing. Despite the foregoing remarks men have achieved some progress towards administrative opportunities in the public health field.

District Nursing

At the end of 1964 there were a total of 10,478 full-time district nurses. Three hundred and seventy-seven of these were men, representing 3.5 per cent of the total. This is a very small number of men but there are reasons for this. First, it is only comparatively recently that men have been able to train for the certificate of the Queen's Institute of District Nursing*. Compare this with the hospital service where men were accepted for registration in 1919. This leads on to the second point: because it is a new field of nursing for men, opportunities for progress are slower in the early stages. Even so, some men have progressed to assume administrative responsibilities.

* The first three male nurses to take district training in 1947 were:
John Beart, trained in Plymouth, remained on the staff until 1964 when he moved to Dorking, Surrey;

Lewis Hutchinson, trained in Manchester, moved to Lancashire in 1949 and is still there;

Thomas Scott, trained in Bolton, left in 1950 to take up ambulance driving.

The best place to seek promotion after district training is generally in a large industrial area where a senior nurse's post may be more easily obtained. This experience can be invaluable as a first step. The local health authority may well second a suitable man to the William Rathbone Staff College for a three-month course.

Although training as a district nurse tutor is not possible at this time, some opportunity may be given within a training home for the appointment of a man as an assistant superintendent. In this position, helping to administer a larger district and possibly obtaining teaching experience is invaluable. This would be a training ground for the ultimate post of superintendent. Although only a small handful of men have progressed this far, there is no reason not to expect that more men in the future will be appointed to posts of senior responsibility in the district nursing service.

Being superintendent of an area gives the man a rare opportunity to administer and control a sizeable staff. This is a different situation from that of the charge nurse or assistant matron in hospital; on the district most of the staff will be experienced trained nurses, while in the hospital many staff are pupils, students and auxiliaries. Excellent work can be undertaken in introducing new ideas and techniques in nursing, duty rotas and integrating other officers who offer a most valuable service to the patient and family. A man in this position can be of considerable help to the district nurse when confronted by an awkward patient or male relative.

Health Education

There are already men in senior posts in the departments of health education of the local health authority. A city such as Birmingham has male district nurses teaching a whole range of subjects under the general heading of "parentcraft"*. This kind of experience can lead a man to apply for the one-year course leading to the Diploma of Health Education (London University). After this course he can expect to take up a fairly senior post within the health education department. The only other course at present available is a one-year course for qualified teachers at the College of Education in Birmingham. Some trained nurses have taken their place with other

* see District Nursing, October 1964, page 162

continued from page 290

Another point to note, is that the top pulleys are screwed tight to prevent swivelling in any direction. The drum, including the ratchet was made of scrap metal and welded together. It need cost very little. Slings could also be made at home for much less than £3.

While suspended, Mr Norwood says that he is as comfortable as in bed although he might not look it, and with a webbing band to rest his head, can stay "in orbit" indefinitely. The head sling is not needed for normal short procedures, e.g. bed-bathing, treatment of pressure areas, etc.

This simple and efficient hoist has been in use for seven years and proved its worth.

colleagues within these departments.

An association has been formed for health education workers called the Institute of Health Education. It offers associate membership to part-time workers and full membership to full-time workers. The Royal Society of Health has a subject group in health education to which all of its 35,000 members can belong.

Nursery Service

Although I have only ever heard of one man being appointed as a nursery matron I am sure that in large residential nurseries there is a need for a man to be in the nursing establishment.

My own experience of establishing and running a day nursery within a hospital was most valuable. The need to develop skill in winning the confidence of the mother and father was most important and it was really most amazing how personal home problems came up for discussion. Working in a nursery and having this access to parents enabled one to give sound advice and helped the family back at home very considerably.

I have noticed in residential nurseries how over-excited the children become on seeing a man in the house. They fight to receive recognition very much more so than in a day nursery. A man's important task here is to re-form the broken family unit.

The Public Health Services

There is very little doubt that within the next few years a break-through will be made by a man in administering the health services of a borough. Although it can be argued that a man unqualified as a health visitor or midwife is unable to take charge of these services, I would contend that where you have superintendents in charge of each speciality, the principal nursing officer's job is to co-ordinate the service and plan for the future needs of the people. The ability to administer well demands use of organising ability not given to all nurses. A post of this kind, offering a whole range of services including health visiting, district nursing, day nurseries, school nursing and domiciliary midwifery, demands great resourcefulness, courage, personality and proven ability to handle people in order to get the best possible performance out of them.

Conclusion

The future of nursing administration for men in the hospital field is already assured. In the public health field it is a much slower progress but that is not to say that men with ambition should not make a most valuable contribution to this important field of preventive and curative medicine. It needs a pioneering spirit, as there are barriers still to break down.

It is also obvious that salaries at this present time tempt men to leave public health work for more lucrative posts in hospital especially men with a family to support.

I am still confident that the man can find a future and make a worthwhile contribution in administering the public health service.