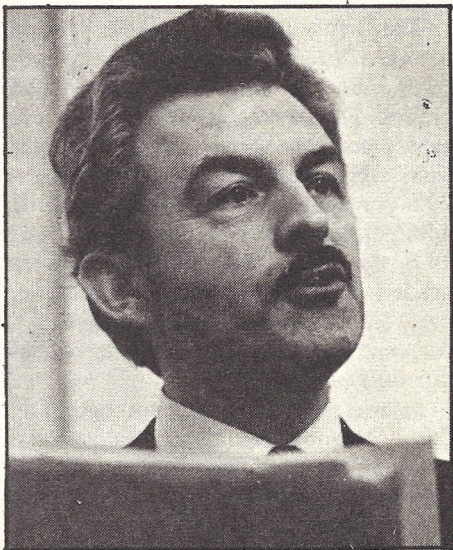


# NURSES ARE WORTH MORE **EVEN**



**Anthony Carr**

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## Justice is not seen to be done

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**by Anthony Carr,**  
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MY FIRST reaction to the report of the Standing Commission on Pay Comparability for Nurses and Midwives is one of immense disappointment, leading to despair. Here was an opportunity to look realistically at the fall in real earnings in nurses' pay since the Halsbury Committee reported in 1974. The Commission employed management consultants to review agreed posts by questionnaires to 157 nurses and 59 of these were



interviewed. The Commission was persuaded that the 134 questionnaires returned were sufficient to be able to assist it in evaluating half a million nurses.

It uses the argument that the nurses in the various grades do very similar work throughout the country. By this system, it could compare nurses with the food, drink and tobacco industry, pharmaceutical and chemical industries, engineering, retail and service, insurance, banking and finance and others.

Here, however, is the strange thing about the research: nurses were not compared with those employed within the NHS! This is shown in paragraph 58, when describing salaries of top nurses it is stated that at these levels nurses were already paid more than holders of jobs of similar weight elsewhere. If it had taken any notice of the findings of the Speakman report, it would have found a totally different story.

The consultants' finding, when matched against salaries as at April 1979, showed wide variations in all grades. RNOs should receive 0.1 per cent increase, ANOs minus 12.5 per cent, while staff nurses should have a 29.6 per cent increase, Sisters grade II 14.6 per cent, Nursing Officers grade II 14.6 per cent and Nursing Officers grade I only 4.3 per cent. In education, basic tutors were evaluated at minus 0.9 per cent and directors of nurse education 20.1 per cent.

Salaries, however, are not based on this evaluation for all grades and the most important change between evaluation and the award was that for the ward sister. The Commission needed to account for the low score of nursing officers, sister and tutor grades. It was convinced by the evidence received, and its own experience, that the sister was worth more, and therefore compared her with junior doctors.

If only the Commission had continued to do that — compared like jobs with like — within the NHS, a totally different award would have been made for all other grades. Because this was not done, the Commission has removed any incentives to progress, though the difference between Sister grade II and other grades in percentage terms is Nursing Officer grade II 2.9 per cent, Nursing Officer grade I 6 per cent, SNO grade II 11 per cent and SNO grade I 15 per cent.

The status of the health visitor has been eroded and the salary scale has become so cramped, that with opportunities to work a few weekends or night duty, even the divisional nursing officer is at risk. For example, the charge nurse

on maximum salary on night duty could earn in one year £8,525. It can be assumed that very few nurses will wish to rise above sister grade in view of the lack of opportunity for extra payments.

Yet if the Commission had checked the market sufficiently, it would have found that apart from one or two specialised areas, the sister's post was not difficult to fill. The nursing officer's post, which is often difficult to fill, will now become impossible.

Directors of nurse education and all other tutors must now feel that justice is never going to be done. Their award is insulting. Although for senior nurse educators dedicated enough still to be in post, the future is clear: go into higher education or senior nurse management if young enough — there is no career left in nursing education. The future for nursing is very bleak indeed.

Area and regional nurses — what can be said? Had the Commission, when seeing the consultants' report, even bothered to compare these grades with their administrative equivalent, it would have seen that its proposed standstill compared nurses at area level to scale 22 posts, while their equivalent administrative colleagues were either at scale 27 or 29. This showed a difference at April 1979 of between £873 to £1,580 or April 1980 of between £3,301 to £4,300.

To summarise, I am delighted for ward sisters. If the same criteria for internal comparisons had been used for all other grades, the award would have been satisfactory. In the event, all other grades have been devalued, and differentials changed to such an extent that it will take years to undo the harm and hurt the Commission has caused.

Morale is low and justice has not been seen to be done. Incentives to progress in posts in education or management have been taken away. A re-organisation of the NHS later this year will probably be the straw that breaks the camel's back. In a word — the award is disastrous □