TRUMPETTE

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Anthony Carr, S.R.N., trained District Nurse and Chief Nursing Officer to the Central Wirral Group of Hospitals, says ---

Herevolution has already beg

AM the so-called Matron replying to Miss Veal's article in last month's issue. I think the image of the matron is never

likely to fully recover when I tell readers that I am a man, married with five delightful children ranging from five months to thirteen years old. Representing a minority group in a woman's world makes one very sympathetic to rebels and their causes. This is why I have some fellow feeling for Miss Veal.

Unfortunately, I feel that her enthusiasm has been allowed to confuse the many facts and issues that should be discussed and dealt with by members of the nursing profession today. Miss Veal's article could do nothing but harm to those many hundreds of nurses who are trying to improve patient care and create reasonable careers for themselves.

IMPORTANT CHANGES IGNORED

The most important changes affecting over 100 hospital groups are completely ignored. It seems that nothing is right in Miss Veal's eyes. May I suggest that instead of launching a most unwarranted, vicious attack on her own colleagues and on the major

warranted, victous attack of the major professional organisation for nursing, she concentrate on a positive course of action. It has been my experience that it is much harder to stay in a difficult position and make a determined effort to correct what may be wrong than to attack the prob-lems from outside. Can I first of all correct the record regarding the Florence Nightingale era? She established two classes in nursing. The ladies became matrons while other classes of persons became the nurses. She did, at one time, advocate that domestic staff and daughters from the land made very good nurses. At first the very good nurses. At first the nurses found it very difficult to gain the matronships of hospitals. gain the matronships of hospitals. Standards of care, apart from a very few hospitals, were very poor. Even to the turn of this century nursing standards were very low in many hospitals. It took many more pioneers like Mrs. Bedford Fenwick, Dame Sarah Swift and Dame Edith Musson to fight for higher standards of care. STANDARDS HAVE PISEN

STANDARDS HAVE RISEN Many today are still concerned about patient care. It is true to say that over the last five years standards of care have risen. There are patients walking around today that would have most certainly died a few years most certainly died a few years ago. Recently, coronary care and intensive care units have been established in the large hospitals throughout the country. Staffed by highly trained nurses, they are able to concentrate all the new resources of medical science to care for the patient. Treatment offered to the patient today would have amazed even Florence

people in every trade and pro-fession who do not pull their weight. This cannot be denied; but the wild unsupported state-ment that 'lots of nurses in this country both junior and senior do not deserve the money they are getting now ... ' is a grave insult to the vast majority of are getting now' is a grave insult to the vast majority of nurses working in the Health Service. I have personally visited over 400 hospitals in the last five years and could tell of stories of real concern and care to patients that would make most of your

readers very, very angry with Miss Veal. There are. for instance, nurses every night who go without meal breaks and work almost twelve hours because of staff shortages. They are entitled to time off but there never seems time for them. Yes, they are exploited, but I do not see Miss Veal writing about these nurses. Her article from first word to last, was offensive. negative and destructive. It does negative and destructive. It does nothing to improve patient care, but rather holds up the nursing profession to public ridicule. Let the public know the facts about these lots of overpaid nurses, Miss Veal. Your emotive statement throws mud upon all trained nurses and some of it will stick. ATTACK ON RCN SENSELESS

SENSELESS Let me now go on to the sense-less attack made on the Royal College of Nursing. It is so easy to stand on the sidelines and shout at the players. I decided, when I was twenty-nine, to do something about the Ren. I be-came a member of the Council. I happened to be the youngest by many years but found that policy could be challenged, de-fined and altered. But beware Miss Veal, if you decide to join. The power house of the Ren will only listen to a person when they can

listen to a person when they can back up their feelings with fact. Emotion has a place, but only a small place, when discussion takes place on matters that affect patients and nurses. Miss Veal's area of attack seems to be aimed

question that should be asked is, how can a better deal be given to patients when there are no staff to partents when there are no start to nurse them? The facts are, that over 30% of student nurses leave the profession before taking their final examinations. There are many reasons why these girls leave, but among them must be the low pay and the fact that they are expected to work from between half a day to a day longer per week than other workers in the health service.

I had to leave the profession for four years when I married, because I could not afford to live on £7 per week; no, not as a student, but as a deputy to night superintendent of a hospital caring for over 1,000 acutely ill patients. Even today pay and conditions of service leave very much to be desired.

It is possible for a Chief Nursing Officer to be responsible for the care of over 4,500 patients in 19 hospitals and supervise a staff of 2,000 - 3,000 and still receive less than £3,000 per vear. One of these officers was offered a position in industry a short time ago. The starting salary was $\pounds 1.500$ more than her present one with the offer of $\pounds 1.000$ more in six months. She refused, but I wonder how much longer can she six turn down offers like these?

STUDENT STATUS

Although Miss Veal makes a most emotional attack on the Rcn in the first part of her article, I think she had a private look at College policy before she wrote of student status. For many years the Rcn has fought to achieve student status. In 1964, they pub-lished a report (Platt Report) and

lished a report (Platt Report) and all the points made by Miss Veal are made, plus many more. So this is nothing new—just college policy being requoted. The Student Nurses Association with-in the Rcn is in the middle of a large growth boom. Every day students and registered nurses are pining the Rcn as they see they bining the Rcn as they see that only in one large organisation can they hope to achieve better care for patients and a truly great profession of nursing.

NEW STRUCTURE

There are many changes taking place in over 100 hospital groups all over the country. A completely new nursing structure is being introduced. Small and large hospitals are being brought to-gether under the nursing control of a senior nurse. The matron disappears completely under this scheme and already nurses are undertaking special training in management so that they may control areas of hospitals



Between 1965 and 1967 Anthony Between 1965 and 1967 Anthony Carr (above) worked as full time area organiser for the Royal Col-lege of Nursing in the Midlands. His main task was negotiating on behalf of nurses who had prob-lems with their employers. He then became Principal of William Rathbone Staff College, Liverpool before taking his present position in January 1970.

His hobbies are photography and listening to music. He has also written numerous articles for 'Nursing Times'.

quire people who have the ability quire people who have the ability to spend, spend, spend, but who have been trained to use the re-sources available to the best effect. Assistant Matrons already in post are gradually being retrained to take charge of, say surgery and medicine, and are offering real support to the ward team. Re-search officers can be appointed support to the ward team. Re-search officers can be appointed to see and examine the patient care being offered by the nursing teams. Why, I wonder was this not mentioned? I admit it does not make news, but surely this is progress

AGENCIES

Finally, the nursing agencies. If nurses wish to work from these organisations, then they will. Miss Veal is right when she says there will have to be changes. Salaries are still much to be improved before they attract nurses. But be that as it may, where I really take issue with the writer is that of negotiation. No employer, be they pursing agency hospital manage nursing agency, hospital manage-ment committee, board of Governors or the Department of Health. should speak for nurses. Nursing is a profession, run by nurses with its own views on training, pay and conditions of service.

The employer organisation who tries to take on this task is head-ing for trouble, and fast. Nurses have a statutory right to control nurse training: this we will keep to ourselves. We also have a right to negotiate our own pay and conditions of service. This we shall also keep within the profession. So. Miss Veal, the revolution