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The Commission have held 24 meetings, and the various sub-committees appointed have held 25 meetings in addition.

The Commission states that at the first meeting held on December 8th, 1930, it was decided to issue a questionnaire addressed to the responsible authorities of all the hospitals approved as training schools by the General Nursing Councils, and also to a sample of the hospitals not so approved. The procedure adopted in connection with the issue of this questionnaire and with the analysis of the information received was sent out in the First Interim Report of the Commission, which was published in *The Lancet* of February 28th, 1931, and is reprinted as Appendix XVII of this Report. Two other questionnaires were subsequently sent out respectively to trained nurses working in hospitals, and to probationers known to have had a good secondary education. In addition, groups of girls still at school and older girls were questioned. The results of all these inquiries are summarised in Appendices III, IV, and XVI.

The following are the recommendations of the Commission:—

RECOMMENDATIONS.

1. Conditions of service in the nursing profession should be altered in such a way as to attract a far larger proportion of those girls who in any case will stay at school till they are 18.

2. An extensive trial should be made of combined scholarship and maintenance schemes throughout the country for girls of 16 upwards, with possible extension of such schemes to girls of 14. These girls should be chosen, not solely on examination results, but taking into consideration other factors, such as the record and interests of the girl, and probable suitability for nursing. These schemes would be rendered more effective by periodical visits of parties of schoolgirls to hospitals in their neighbourhood. Such visits would awaken their interest and encourage them to apply, where necessary, for maintenance grants, which could be allocated in accordance with the principles set out in proposition (2) in para. 93.

3. The curriculum in these scholarship courses should be general rather than special until the girl has reached 16 or 17, and after 17 anatomy, physiology, and hygiene could be introduced in direct preparation for the first part of a divided Preliminary State examination.

4. Encouragement should be given to girls who have left school and are occupied in shops or offices during the day to study anatomy, physiology, and hygiene in evening classes in polytechnics, technical schools, and evening institutes, and to take the proposed Part I. of the Preliminary State examination. The same classes could be attended by girls over 17 who are working in various departments of hospitals or in convalescent homes, and possibly by first year nurses at Affiliated, Associated, or Reciprocal hospitals.

Cost of Training.

5. Hospitals should recognise that the nurses are paying indirectly, if not directly, for their training, and that the onus rests on the hospitals to provide good facilities for such training, including expert instruction during hours on duty. To this end a ward sister who has to train successive batches of students should be given extra remuneration, and some relief from other duties, for teaching in the wards.

6. Neither a maximum nor a minimum standard of payment to probationers is recommended in the present condition of shortage. The policy most likely to attract suitable candidates is that offering low salaries to probationers and increasing the remuneration of the trained staff.

7. As an experiment, certain hospitals which are known to give good training should advertise for probationers without offering any remuneration, but offering six weeks' holiday a year and two short periods of study leave (one week each) during the period of training. Scholarships could be given to ensure the supply of sufficient candidates until the scheme became well known.

8. The professional education of nurses should be encouraged by the provision of funds expressly allocated for the purpose—*e.g.*, endowments and State subsidies.

Salaries of Trained Nurses in Hospitals.

9. *Staff Nurses.*—While the minimum scale of salary set out by the College of Nursing is adequate at important hospitals, considering that the post is a "learning" one, payment on this scale is unlikely to attract staff nurses to small, outlying, or special hospitals. We advise these hospitals to offer initial salaries between £65 and £80, varying with the experience and amenities provided.

10. *Ward Sisters.*—The minimum salary in hospitals not approved as training schools should be £80, rising to £120. The minimum salary for ward sisters in hospitals approved as partial training schools should be £90, rising to £150. The minimum salary for ward sisters in hospitals approved as complete training schools should be £100, rising after eight years to £160.

If the existing system is adjusted on these lines, we suggest that £10 of the ward sister's salary in approved training schools should be regarded as a fee for teaching.

11. *Non-Resident Posts.*—The inclusive salary and emoluments offered to non-resident sisters should be of not less value than £250 a year—College of Nursing minimum scale for non-resident posts.

12. *Higher Posts.*—We recommend the universal adoption of the College of Nursing scale of minimum salaries for posts higher than that of ward sister. This scale has already been adopted by many hospital authorities. In the higher administrative posts the responsibilities of the officer increase with the size of the hospital and the allocation of minimum salaries on the basis of the number of occupied beds is equitable.

Salaries of District Nurses.

13. The College of Nursing minimum scale for resident district nurses (£85 to £120) should be adopted by District Nursing Associations, and if an all-inclusive salary is offered it should be a minimum of £230, rising to £250 after a short term of service.

Superannuation.

14. All voluntary hospitals, institutions, and associations employing nurses should participate in the Federated Superannuation Scheme for Nurses and Hospital Officers.

15. Early steps should be taken to secure the interchangeability of pension rights among employees of all Local Authorities, whether they have adopted the Act of 1922 or have a Local Act superannuation scheme, and to make provision for superannuation obligatory on Local Authorities.

16. Section 8 of the Local Government and Other Officers' Superannuation Act, 1922, should be extended to apply to nurses migrating between employment under local authorities adopting the Act, and employment under any institution or association participating in the Federated Superannuation Scheme for Nurses and Hospital Officers, and to nurses leaving hospital to undertake private nursing.

Hours of Duty.

Day Duty.

17. The span of work should not exceed 13 hours.

18. If on one, or at most two days a week the span should be extended, it should not exceed 14½ hours, and the extra time should be compensated for by extra hours off duty.

19. At least 1½ hours should be allowed for meals during the span, of which 40 minutes should be allocated to midday dinner.

20. Not less than three clear hours off duty, independent of meal times, should be allowed during the span every day.

21. One free day each week should be allowed.

Night Duty.

22. The hours of night duty should not exceed 57 in any week.

23. The span of night duty should not exceed 11 hours, and should be less if possible.

24. If on three nights a week at most the span should be extended to 12 hours, this should be compensated for by a shorter span on the remaining nights.

25. If the span is 11 hours or more, 1½ hours in all should be allowed off duty for meals and rest.

26. One free night should be provided every week irrespective of three-monthly breaks.

[previous page](#)

[next page](#)