

## THE ASSISTANT NURSE.

Many persons, professional and otherwise, have attempted to explain the Assistant Nurse, and in our opinion have failed. It is so simple. An Assistant Nurse is merely a person who has not, and is not attempting to, attain the recognised standard of efficiency prescribed by Act of Parliament for members of the Nursing Profession.

There need be no argument on the matter, it is quite simple. In Trades Union circles persons who butt into skilled work for which they have failed to qualify, have a distinctive title, which is descriptive, but far from polite!

We carefully read opinions expressed on the Assistant Nurse question, purporting to be arguments in support of the necessity of degrading nursing standards, and asking for control by Act of Parliament of a semi-trained class of nurse. It is astounding that Registered Nurses, holding the position of Matron, can advance opinions so utterly defective in logic and perspicacity, but so it is.

The Royal College of Nursing is organising meetings in connection with its country branches to promote the legal recognition of the Assistant Nurse, at which, so far as we can gather, reasons for opposition are not invited. That is, no one able to present the case against the principle of degrading the profession of Nursing is invited to argue the point. The following letter, which appeared in *Public Assistance Journal and Health and Hospital Review*, on March 13th, is typical of arguments advanced in support of the Royal College policy. It invites criticism.

SIR,—I was particularly interested to read the letter from Mrs. Maud Ramsay in your issue of the 6th instant on the question of the Assistant Nurse.

As a large number of your readers must already know, the Assistant Nurse has been a subject for discussion by a number of branches of the Royal College of Nursing during the past few weeks, and as recently as the 25th ultimo, I was invited to open a discussion on this subject at the Bristol Branch.

In the course of my address I emphasised the necessity of the Assistant Nurse, that she should be controlled, and that in a modified form she should receive two years' training. I particularly stressed an important point in my mind, that the Assistant Nurse should not be permitted to nurse habitually and for gain, unless controlled.

An interesting discussion followed, and many of your readers may be interested to read the findings of the meeting of the Bristol Branch to be transmitted to the headquarters of the Royal College of Nursing, which are as follows:—

"The General Nursing Council should be empowered to control all Assistant Nurses.

"The Assistant Nurse should receive a prescribed training in an approved school, other than that training students for the General State Register. She should have a badge, and be entitled 'Assistant Nurse,' and be called 'Nurse' in the wards. The bulk of the training should be done by the Ward Sister, and the examination should be largely practical.

"All Assistant Nurses should work under the control of a State Registered Nurse.

"A period of grace would be necessary on the lines laid down for the General State Register. It was recommended that a candidate should be recognised, if she had had two years' consecutive training in a hospital or nursing home and had a satisfactory recommendation from a State Registered Nurse in charge. Those who had less than two years' training or are now nursing for nursing co-operations should have to enter a training school for the prescribed period.

"All nurses should state on which register their names appear when doing private work, on account of both the financial and nursing aspects.

"To avoid difficulty, State Registered Nurses might all be called 'Sister,' while those in charge of wards—the present Sisters—be called 'Charge Sister.' It is suggested that they should use the letters 'S.R.N.' more frequently on letters and wear the badge of the Royal College of Nursing or of the State Register.

"The Pass List of the Final State Examination should be published in the local Press to stimulate interest."

Yours faithfully,

G. PEARSON, S.R.N., S.C.M.,  
Matron,  
Stapleton Institution, Bristol.

In justice to the readers of the above journal, Miss Isabel Macdonald, S.R.N., Secretary of the Royal British Nurses' Association, addressed the following letter to the editor, which was excluded, whilst space was found for another supporter of degrading in the following week! We protest against such a one-sided policy in public argument. It is unfair to the public and the nursing profession.

194, QUEEN'S GATE, LONDON, S.W.7.  
March 16th, 1942.

To the Editor,  
*The Public Assistance Journal*  
*and Health and Hospital Review*,  
27 to 29, Furnival Street, London, E.C.4.

SIR,—In your issue of 13th inst., Miss G. Pearson enumerates the recommendations, of a meeting of Nurses in Bristol, in relation to the Assistant Nurse. The first of these is that "The General Nursing Council should be empowered to control all Assistant Nurses." First, and most important, *we should be glad if Miss Pearson would explain precisely how far this control would extend.* If it implies that it would prevent anyone but those nurses, on one of the two Registers referred to in another recommendation, from nursing for gain then the nurses who put their faith in such a recommendation are building their house upon sand and those who promise such control, through establishing a second register for the half qualified, are pledging Parliament to a course unprecedented in its history. The arguments to prove this are too lengthy to be usefully enumerated until we have a precise statement as to what it is intended to imply by "control." We shall therefore await information from the promoters of the recommendation.

Another recommendation is that "All Assistant Nurses should work under the control of a State Registered Nurse." The position is not quite clear. Is it implied that anyone, say for instance a private patient, would on the adoption of such a recommendation by Parliament or the General Nursing Council, be under the necessity (when employing an Assistant Nurse) of employing a State Registered Nurse for supervision of the former?

I am, Sir, Yours faithfully,  
ISABEL MACDONALD,  
Secretary, The Royal British Nurses' Association.

We therefore invite Miss G. Pearson to reply to Miss Isabel Macdonald's questions in this journal, and we also invite her to reply to the following questions:—

1. Was any Registered Nurse invited to the meeting aforesaid to argue the case against degrading of the present professional standards, and make practical suggestions how the chronic sick are to be efficiently nursed. This can and should be done.

2. Why should Registered Nurses be compelled to train, control and guarantee semi-trained nurses to compete with their own economic security? Such a cut-throat policy being unprecedented in any profession or trade?

3. Why should the Registered Nurses be called upon to relinquish their legal title, and assume that of Sister to which they have no right outside religious and institution denominations, for the benefit of semi-trained persons who are not qualified members of the Nursing Profession?

4. And what right has Parliament to permit these semi-trained women to avail themselves of the facilities of the headquarters and skilled service of the General Nursing Council for England and Wales, for which Registered Nurses have already paid £801,409 5s. 9d., and towards which the Treasury has not subscribed one penny?

We also advise the Editor of the *Public Assistance Journal and Health and Hospital Review* to play fair.

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