We welcome all readers' letters but reserve the right to edit them, and withhold names and addresses or both.
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You can e-mail us at: nursingstandard@compuserve.com
Please include your address and a daytime telephone number.

Panorama highlighted problems but ignored staff's hard work

Panorama (BBC1 March 23) did nothing to dispel the myths and fears that surround Ashworth, Broadmoor and Rampton special hospitals. Neither Ashworth nor Broadmoor had an opportunity to put their case on the programme, maybe because they disagreed with what the programme was trying to establish.

The programme highlighted the problem of illicit drugs, alcohol and pornography in the hospitals. However, these are a problem in any secure establishment and are endemic within society. We can reduce the supply, but it is impossible to eradicate, though of course we keep trying.

It is true that the special hospitals have problems, but these are already being addressed. The staff at Ashworth Hospital are hard working, dedicated professionals striving to deliver the best patient care possible. With the right support these professionals can show that special hospitals continue to have an important role.

The continued inappropriate detention of some patients in the special hospitals is a result of bed shortages elsewhere, or lack of funding for patient relocation to establishments more appropriate for the continued treatment of the individual.

With regard to the current DoH review, the Ashworth RCN branch had been promised by Ray Rowden, while director of the High Security Psychiatric Services Commissioning Board, that he would consult with our members to enable those working in Ashworth to contribute to the recommendations. This was not done. The comments made by Mr Rowden in the programme, regarding Ashworth Hospital imploding within 18 months to two years were, to say the least, inflammatory. They give cause for concern and possibly fear to many of our patients, their relatives, the public and of course the staff working at the hospital.

Panorama failed to enable the public to understand the needs of patients cared for in the special hospitals and all of the issues surrounding the future of these hospitals.

Teresa Murphy, Branch Chair; Len Jones, Secretary
Convener of RCN Ashworth

Nurses with a captive audience

I am writing on behalf of occupational health (OH) nurses. Our specialty has to be the most underestimated and least understood.

OH nurses need to be skilled in a wide range of areas and are accountable and responsible for looking after a large workforce.

Many work alone and have sole responsibility for the development and implementation of their service. But all too often OH is stereotyped into what others believe the profession entails – dishing out plasters and aspirin.

With the recent Green Paper 'Our Healthier Nation', and the government's intention to focus more on the workplace, we are at last beginning to recognise the potential of the workforce for what it is – a large captive audience whose health can be influenced in a positive way. This could result in a healthy workforce and increased company profitability.

Katih Douglas
Lancashire

EN seeks impossible – a living wage

I am an EN employed by an agency at C grade. Previously, I worked for a nursing home with D grade responsibilities.

When I left, my salary was just over £6 per hour.

Recently, I applied for a position as a bank nurse at my local hospital group. I was unsuccessful because I had asked for a salary of £5.25 an hour and they only employed ENs at D grade for £5.45 an hour. I do not consider £5.45 an hour to be a living wage.

I have also been ringing the personnel department at the local hospital group for part-time D grade positions, but none are available at present.

I said that I would be willing to accept a top salary C grade, but was informed that they only occasionally employ C grades.

So, if ENs are rarely employed at D grade, but there are no C grade jobs, where does that leave us? I enjoy being an EN – it is the powers that be who make it so difficult. There is a national shortage of nurses. Yet many hospitals waste valuable resources employing agency nurses rather than offering their own nurses decent salaries and opportunities.

Name and address supplied

Over 50 does not mean over the hill

I read the article about the ageing workforce (News Analysis March 10) with interest. However, in the same issue, a prison advertised for an RN to fill the post of healthcare officer. Among the requirements was a specified age – '20 to 49.5'.

I have to ask why? A nurse who is over 50 is likely to have had a long experience of nursing and have developed life skills that would equip them to deal with people.

Surely this would make them particularly suitable for prison work.

With regard to physical ability, I note that the advert welcomes applications from disabled people. It does not exclude women or suggest a minimum height. So why exclude people in their 50s?