Nurse director says nurses would be more valued in an umbrella organisation

Nurses would benefit from single regulatory body

**By Graham Scott**

THE SEPARATE bodies that regulate the various health professions, including nursing and medicine, should be scrapped and replaced by a single body, the nurse director of one of the UK's largest trusts said last week.

Wilma McPherson, director of nursing at Guy's and St Thomas' NHS Trust, London, said the current debates on the future of the UKCC and on the principle of professional self-regulation provided ministers with an ideal opportunity for a radical shake-up.

Speaking at a conference in London on the challenges currently facing the health service, Ms McPherson suggested a single body should be created, with separate sub-groups covering issues relevant to the individual professions.

She asked: 'Why are we continuing to look at segmented professional regulation? Why are we not taking this opportunity to have an umbrella organisation, albeit with separate chambers within it?'

Ms McPherson added that health professionals would also benefit from coming together in other ways too.

She said nurses often felt undervalued, not only by their rates of pay but, more importantly, by the way they felt they were perceived by managers and their colleagues in other professions.

'Coming together would do more than any other single thing to alter the perceptions of the people in the health service about their individual value.

'Pay is important, but second to the feeling that you have a career and value to the health service.'

The plight of nurses working in higher education also came under the spotlight at the conference.

Speaking from the audience, nurse Jean Orr from Queen's University Belfast said that although the government had abolished the annual contracting between health authorities and trusts on services, unfortunately the contract culture is still alive and well in nurse education.

Ms McPherson agreed, describing the contracting system as 'a quant and medieval way of bartering'.

**Clinical governance needs investment in leadership**

MINISTERS HAVE been warned that they must invest in nurse leadership if their plans to introduce clinical governance in the NHS are to succeed.

The warning follows fresh guidance issued by health secretary Frank Dobson last week laying out a timetable. According to the guidance, organisations need to undertake four key steps by April next year (see box).

But RCN head of quality improvement, Gill Harvey, warned that the plans would only work well with investment in nurse leadership to ensure that grassroots nurses' concerns on care quality receive attention.

'States needed is investment by trusts to give ward leaders the opportunity to go on development programmes, and investment from individuals to take the opportunities and look at their own styles of leadership and learn from colleagues,' she said.

Launching the document, Mr Dobson told nurses that the new arrangements will help ensure that concerns over quality of care are addressed.

'The professions in a particular hospital will now know that the members of the boards of trusts will have to address the question of quality and performance,' he said.

**Nurses prepare to give evidence to Bristol inquiry**

SCORES OF nurses are expected to start giving evidence next month to the public inquiry into the treatment of children who underwent heart surgery at Bristol Royal Infirmary (BRI) between 1984 and 1995.

Jo Stockley, co-ordinator of the RCN's BRI cardiac inquiry project group, said around 50 nurses who worked at the hospital during the period in question will be called on to help the inquiry.

Opened last week, the inquiry follows a separate investigation by the doctors' regulatory body, the General Medical Council, into the deaths of 29 babies who had undergone heart surgery at the hospital.

Other nurses, expert in paediatric care, paediatric intensive care, paediatric cardiac care and nursing and clinical audit, are expected to give evidence next year.

**KEY STEPS TO CLINICAL GOVERNANCE**

- Establish leadership, accountability and working arrangements.
- Carry out baseline assessment of capacity and capability.
- Agree a development plan based on the assessment.
- Clarify reporting arrangements within board and annual reports.