We welcome all readers' letters but reserve the right to edit them, and withhold names and addresses or both. Please keep to a maximum of 150 words. Write to The Editor (Letters), Nursing Standard, Nursing Standard House, 17-19 Peterborough Road, Harrow, Middlesex HA1 2AX. email: nursing.standard@rcn.org.uk. Please include your full name, address and a daytime telephone number.

Support for our Welcome to nurse here focus

Bad treatment does not occur everywhere
I am a clinical effectiveness sister at Huddersfield Nuffield Hospital and have been appalled at the treatment of some Filipino nurses working in the UK. I have just completed mentorship of three fantastic Filipino nurses and we have greatly benefited from their expertise. The nurses have had excellent accommodation and will have friends to help them move when they go to their new house. We also socialise together regularly. Please use us as an example. I am sure bad treatment does not occur everywhere. Positive feedback needs to be highlighted otherwise we will lose these valuable nurses as colleagues and friends to other countries.

Jane Brown
Huddersfield

Working in the UK to pay for child’s education
There is a lot of misunderstanding and ignorance on the part of UK nurses where our overseas colleagues are concerned. I have been shocked at some of the stories my colleagues from overseas have told me about the way they were treated when they first arrived in the UK. And this is not by unscrupulous managers or agencies, but by the nurses they work with. One colleague was told by a nurse she worked with at a nursing home that she was a ‘bad mother’ because she had ‘left’ her children at home in the Philippines. It made no difference that my friend had come here to work so that she could pay for her children’s education or that her mother, sisters and husband were all caring for the children while she was away. I hope that by publicising the good relationships many of us have with our colleagues from other countries, negative attitudes like this will disappear completely.

Linda Morrison
London

NHS exploits overseas nurses too
I work in a trust that has recently employed about 30 nurses from the Philippines. Is it acceptable that they are on a B grade during their adaptation programme? They take responsibility for patient care, administer drugs (without a PIN) and generally ensure that the wards actually function. Due to the expense of paying market rates for trust accommodation and the need to support young families at home, many supplement their income by applying for bank loans, working extra shifts, looking for work with the hospital cleaning contractor, or even having money sent here from the Philippines. It’s not just the private sector that is exploiting nurses from overseas.

Name and address withheld

No time to spend scrubbing floors or bedpans

While I do not undervalue the importance of a clean environment, the very idea of nurses returning to their hands and knees scrubbing the floors is laughable.

Nurses who, years ago, spent their time performing the housekeeping tasks now undertaken by domestic staff, do not wish to return to spending Sunday afternoons scrubbing bedpans. In recent years, nurses have taken on many junior doctors’ tasks in addition to their nursing work. I’m sure nurses would agree that patient care may suffer if we return to scrubbing floors, as we would have little time to attend to patients directly. Wouldn’t it be cost-effective to employ more domestic staff rather than pay nurses to perform domestic chores?

L Regan
By email

Nurses are there to do the best by the patient

In response to Professor Eric Caines’ comments, although nurses may not have wanted to be treated as handmaidens some of us do still want to be nurses. Holistic care for patients and high standards should be the aims of all nurses.

I trained pre-project 2000, but have continued my education and feel that the practical input into nurse training was reduced too greatly. I have been told by a student nurse that ‘I don’t do bed pans’. I am proud to say that I do do bedpans and would do whatever was needed to enhance the care of my patients. Perhaps the problem is that nurses are starting to forget what nursing really is.

J Heywood
Spalding