LETTERS

Entry criteria should be scrapped

The news that the UKCC Education Committee has considered a paper proposing the cessation of the DC test is very welcome. ('Cheating allegations could lead to DC test being scrapped', News, January 25).

For three years I was the professional officer with lead responsibility for the day to day administration of the policy on educational entry criteria for nursing and midwifery education (Rule 16 of the Nurses, Midwives and Health Visitors Rules). During the period 1990-1993 anecdotal evidence of abuse of the test was received but hard evidence was never forthcoming.

Research by the University of Leeds demonstrated the overall integrity of the test as a predictor of success in first level training, but candidates over 35 and those whose first language was not English, appeared to suffer some disadvantage in this sort of testing.

A simple trawl of colleges of nursing and midwifery undertaken by me in 1992 revealed significant pockets of doubt about the usefulness of the test.

I recall that colleges of midwifery were particularly sceptical, some colleges did not use it at all and some required additional educational evidence. I think fewer and fewer colleges are now using it as an entry gate.

It was an excellently conceived test, very thoroughly piloted and a valuable tool for selection. It has now passed its sell-by date.

Peter O'Reilly is reported as saying that the Council has always kept the entry gate as wide as possible. It certainly strove to do so with moves such as approving NVQ level 3 as an entry gate. There were many times however when I personally, acting as the Council’s agent, had to issue refusal letters to people with evidence of study and achievement with organisations which were outside the Council’s remit for recognition.

The UKCC should look to higher education and its use of accreditation of prior learning and prior experiential learning (APL/APEL) as entry criteria. Access courses have been in use as an alternative entry gate since before 1990 and have become a popular choice for colleges and candidates.

I would urge the UKCC Education Committee to consider scrapping the whole range of current entry criteria (five GCSEs etc) in favour of an evaluation of the individual’s educational, career and personal profile to date, by the college to which application is made, based on the UKCC’s standard.

Yvonne Willmott BA(Hons), RN, RM, RHV, DNCert, CertEd

The unacceptable cost of PREP

Isn’t PREP going to grind down the NHS? We are going to ask nurses to produce evidence of post-registration education when they may not have the time or money to do so, if they have a family to look after for example. It seems harsh to take away the careers they have trained for just because of their parental and family commitments.

Healthcare workers with national vocational qualifications are having to take more responsibilities on the wards. Are they to fill the vacuum left by qualified staff who cannot afford to re-register?

John Lavery RMN
Guernsey

Personal information not essential

I am writing in response to Karla Buswell’s article ‘Sharing to care’ (Viewpoint, January 25) in which she argues that nurses would provide the best level of nursing care if they were informed of a patient’s reasons for an abortion.

While I agree that staff should always be non-judgmental and treat the patient as we would any other, I do not believe that knowing details of a patient’s personal life is a necessary pre-requisite for excellent nursing care.

It is up to the patient herself to disclose such information to individual nurses as and when she feels ready to do so.

A good counsellor should not have to be briefed beforehand to provide effective listening and emotional support.

KE Crosby RGN, BA(Hons)
Littleborough
Lancs

Men’s health gets a raw deal

Having noted the article about more women dying from heart disease than breast cancer every year (‘A neglected majority’, Feature, January 25) and also on Cervical cancer:

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Viewpoint

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