

1990-2005

Nursing prepares for the 21st century by revolutionising training and taking on greater responsibility



An interesting period dawned in 1990. The UK had a small surplus of nurses, although by the end of the decade this had completely changed and the NHS faced huge staff shortages. But by 2005 numbers were at an all-time high.

At the start of the 1990s, nurses' jobs were not secure and some struggled to find jobs when they qualified. Redundancies were becoming commonplace and the RCN launched its Unemployment can Seriously Damage Your Health campaign in 1992.

Education underwent a revolution with the advent of Project 2000 – a training system that focused on academic preparation for the job rather than clinical experience. The scheme changed the status of trainees, making them supernumerary so hospitals could no longer count them as staff and paying them a non-means-tested bursary.

Pilot sites started in 1989 but the system was not rolled out until the early 1990s. It was at this point that the nursing diploma came into being and the nurse title changed from state registered nurse to registered general nurse. Students also had to choose from four branches of nursing – adult, children, mental health and learning disability.

The scheme was not without critics as some believed it left newly qualified nurses unfit to practise due to a lack of hands-on experience.

As the decade progressed, the debate over whether nursing should be an all-graduate profession grew. Wales and Scotland decided they would follow the all-graduate path.

There was an increase in the number of mature nursing students. With more people with families entering the profession came a need for greater flexibility at work. Improving Working Lives – the drive for good human resources practice in the NHS launched in 1999 – helped persuade employers to do this.

Necessary budget savings and the loss of nursing students as staff meant employers had to focus on staff numbers. Enrolled nurses were offered conversion courses while a considerable growth in the numbers of health care assistants began.

One abiding bad memory for nurses in the 1990s was local pay. In 1995 the Pay Review Body recommended a basic one per cent pay rise plus an optional extra 0.2-2 per cent on top. Employers took the opportunity to save money. This provoked such anger that the RCN voted to end its no-strike policy and demonstrations ensued.

Christine Hancock, general secretary of the RCN between 1989 and 2001, says: 'It was the most amazing spontaneous outburst of anger from tens of thousands of nurses that had never got involved in politics before. What seemed to get them so angry was the fact that this was a chance for their employers to show how much they valued staff and some were only giving them 0.25 per cent extra.'

Pay was also a large topic for discussion at the start of the 21st century when the new pay system Agenda for Change emerged, which is yet to be fully implemented.

Based on a thorough job evaluation process, the system replaces the likes of D and E grades with bands 5 to 8 for nurses and promises to pay staff far more accurately for the actual work that they do.

Unlike the disastrous introduction of clinical grading in the 1980s,

Agenda for Change has been piloted and has staff, managers and government working together to try and make it a success.

In 1993 managers took control of funding for nurse education and there was a fall in the numbers of nurses entering Project 2000 courses.

NHS trusts were introduced in 1991 with the idea that they would have more control over their own affairs. GP fundholding started as part of the internal market under which providers competed for business. This system was eventually dropped.

Growing demand in the NHS helped to worsen nurse shortages and by 1996 the issue began to hit the headlines. *NT*'s jobs section grew massively as the 1990s progressed and nursing agencies flourished.

Nurses were also getting older. The RCN predicted a 'demographic time bomb' with tens of thousands of nurses due to retire every year.

In 2000 the government tried to get the NHS on track with *The NHS*

Plan – a 10-year plan on how the NHS should develop and grow.

A noticeable trend at the end of the 1990s and early 2000s was the massive influx of internationally recruited nurses. There were an estimated 42,000 overseas nurses working in the UK in 2003, more than double the figure in 2000, with many coming from the Philippines. Some who came to work for nursing homes initially suffered exploitation. Unions and media pressure led the government to introduce ethical codes of international recruitment.

Patients' rights were growing and in 1991 *The Patient's Charter* was published, giving every patient the right to a named qualified nurse, midwife or health visitor responsible for their nursing care.

Patient power was also at the heart of regulation shake-up when the new regulatory body – the Nursing & Midwifery Council – took over from the UKCC in 2002.

The new body unashamedly took a more patient-focused approach and gave almost half of its controlling council seats to lay members. Early troubles led to big delays in nurses wanting to reregister but

the new body speeded up its process in dealing with misconduct. The downside was that registration fees rose from £60 for three years to £129.

A prolonged debate began on how health care assistants should be regulated. The government supported regulation as early as 2000 but it has still not been agreed how to do this.

A surprise announcement was that of the creation of consultant nurses in July 1999 – new 'super-nurses' who would spend half of their time with patients. The name annoyed some parts of the medical profession, but it caught the public's attention and provided nurses with another career choice.

Matrons made a comeback in 2000, in response to public demand. An initially sceptical nursing profession eventually warmed to the idea.

Another boost for nursing in 1998 was the creation of NHS Direct – the nurse-led advice service that made nurses the first point of contact for patients. For the first time nurses were the gatekeepers of care. This service sprung up alongside a growth in primary care and new freedoms were granted to nurses to run their own primary care services.

KEY EVENTS

1990

- Project 2000 training is rolled out from the early 1990s

1993

- Paediatric nurse Beverley Allitt is convicted of 13 murders

1995

- Local pay provokes angry protests from nurses
- Post-registration education and practice is introduced as a way of ensuring nurses remain competent and maintain professional development

1998

- NHS Direct – the nurse-led advice line – is launched
- A massive influx of overseas nurses to the UK is seen in the late 1990s

2000

- *The NHS Plan* sets out a 10-year plan to transform the NHS

2002

- The NMC takes over from the UKCC as nurse regulator

2004

- A new pay system for nurses – Agenda for Change – is set up

2005

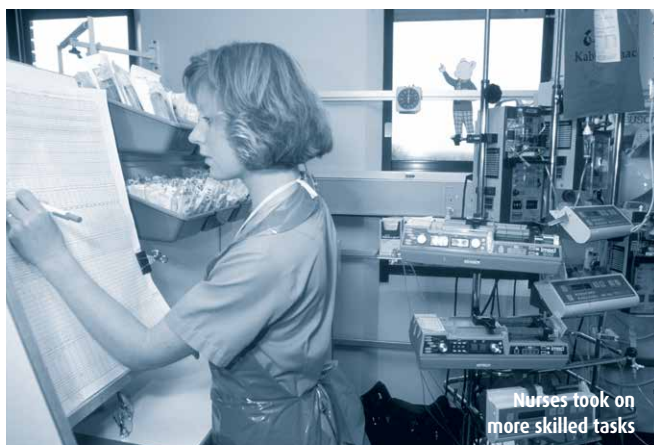
- Nurse numbers hit an all-time high of 397,500



At the start of the 1990s, nurses' jobs were not secure

'Education underwent a revolution with the advent of Project 2000'

1990-2005



Nurses took on more skilled tasks

Nurse prescribing finally got off the ground with the *Nurse Prescribers' Formulary* in 1998 aimed at district nurses and health visitors. The *Nurse Prescribers' Extended Formulary* followed in 2002 for independent nurse prescribing and there is also now supplementary prescribing.

Devolution became an issue in the UK for nurses at the start of the new millennium, particularly in Scotland where health became a devolved matter. Scotland's recruitment problems hit home later than in England and it had to start thinking of ways to keep hold of its staff who may have been tempted to cross the border to take up some of the increasingly generous recruitment offers from English trusts.

Boundaries between nurses and doctors changed as senior clinical nurses in specialist units started to undertake many more skilled tasks and some took a lead in asthma, diabetes, cancer care, neonatal units and intensive care, or as surgeon assistants in theatres.

Mental health nursing changed as more patients attended day hospitals resulting in a growth in numbers of community psychiatric nurses.

Nurses had a new champion for their cause when Unison was created in 1993. The union was a merger of the NUPE, COHSE and NALGO.

Public perception of nurses changed and the harsh truth was that violence against nurses, no doubt tied in with a lack of respect, seemed to be on the increase. This may have been due to bad behaviour being reported more often.

At RCN Congress in 2004 the media seized on a debate that said nurses had become 'too posh to wash' and should hand over the caring component of their job to HCAs. Nearly all nurses present (95 per cent) rejected the motion.

Hospital cleanliness became an obsession of the public and media following the unarguably worrying rise in cases of MRSA infection. New targets were set to cut MRSA bloodstream infection rates by 2008.

Nurse numbers are at a record high with almost 400,000 working in the NHS.

Nursing is constantly developing and growing. Although 21st century nurses are very different from those who worked 100 years ago, the fundamentals remain and the profession goes from strength to strength. ■

Features written by Ann Shuttleworth and Adrian O'Dowd

NT from 1990-2005

The 1990s and 2000s saw *NT* run many campaigns. In 1992 the Mind Your Back campaign called for nurses to have the right to be protected from back injury caused by inappropriate lifting, and for full implementation of new EC rules on manual handling. Up to 3,600 nurses were quitting every year due to back injuries, at a loss of 1.3 million working days. *NT* editor John Gilbert said: 'The scandal of nurses leaving the profession in pain and with their lives and careers in tatters must end.'

NT launched Open Learning in 1991, a distance learning package for enrolled nurse conversion.

Another high-profile campaign was 1995's '*NT* Says Nurses Need three per cent Pay Up Now!' This called for an across-the-board three per cent pay hike rather than the one per cent national award that employers could implement as a minimum. A major demonstration followed. Nationwide protests and a survey of 1,000 members of the public showed that 90 per cent of the population supported a three per cent rise.

Later that decade the 1998 Stamp Out Violence campaign sought to reduce violence against nurses and led to official government reduction targets. By April 1999 then health secretary Frank Dobson announced that government would carry out regular surveys to monitor the number of attacks on NHS staff, trusts were told they had to set and meet targets for reducing violence, and there would be a cross-government drive to cut violence against NHS staff with



national guidelines on assaults, covering prevention, publicity, prosecution and sentencing.

A MORI survey carried out in 1999 by *NT* and the RCN on the public's attitude to nurses revealed that compared with the very same questions in a 1984 survey, nurses had an enhanced public image as better educated, more likely to challenge doctors, and more feisty when it came to campaigning on pay.

Early in the new millennium *NT*'s 2001 Save Nurses from Stalkers campaign responded to new legislation allowing the public to demand nurses' home addresses. This was widely branded as a 'stalkers' charter' and 7,000 *NT* readers signed a petition demanding this part of the legislation be changed. The final legislation said a nurse's home address would not be published or given without her or his permission.

In 2004 *NT* ran a Fairness on Fees campaign to force the NMC to think again on its proposal to increase the three-year registration fee from £60 to £144. Almost 14,000 nurses wrote to *NT* in support of the campaign and these were presented to the NMC. The fee rise was reduced to £129 as a result, an estimated saving of £10m for the nursing workforce.