The history of nursing and midwifery regulation

From 1860 to the present - how we got to where we are today.

Early days
When state registration of the medical profession had begun in 1858, many observers pointed to the need for a similar system for nursing. That year, the Nursing Record called for "... the whole question of the Registration of trained nurses to be set forth in a succinct form before the profession and the public". Support for the regulation of nursing began to become more widespread following the establishment of organised nurse training in 1860. By the 1880s, the Hospitals Association [an early version of the NHS Confederation] was committed to the principle of registration for nurses. The Matrons Committee, comprising the matrons of the leading hospitals, agreed but differed in their views of the required length of training, arguing for three years as opposed to the one supported by the Hospitals Association. In 1887, the Hospitals Association overruled the matrons and established a non-statutory voluntary register. At this the Matrons Committee split, between one group which supported the Hospitals Association and another faction, led by Ethel Bedford Fenwick, which opposed the new register and sought to align themselves more closely with the medical profession. Florence Nightingale, incidentally, supported neither group and was opposed to any form of regulation for nursing, believing that the essential qualities of the nurse could neither be taught, examined nor regulated.

In 1887, the group of nurses associated with Ethel Bedford Fenwick formed the British Nurses' Association [BNA], which sought "... to unite all British nurses in membership of a recognised profession and to provide for their registration on terms, satisfactory to physicians and surgeons, as evidence of their having received systematic training". Therefore two separate voluntary registers now existed. Whereas that maintained by the Hospitals Association was purely an administrative list, the register established by the BNA had a more explicit public protection remit.

Towards registration: 1902-1919
The pressure for state registration grew throughout the 1890s but was undermined by disagreements within the profession [plus ça change ...] over the desired form and purpose of the regulatory system. In 1902, the Midwives Registration Act established the state regulation of midwives [interestingly with no semblance of the often bitter debates which surrounded nurse registration] and, two years later, a House of Commons Select Committee was established to consider the registration of nurses. The committee reported in 1904 and set out a detailed and persuasive case for registration. However, the government sat on the report and took no action. Over the next decade, a number of private members bills to establish regulation were introduced but all failed to achieve significant support in Parliament.

The First World War provided the final impetus to the establishment of nursing regulation, partly because of the specific contribution made by nurses to the war effort and also as a reflection of the increased contribution of women more generally in society. The College of Nursing [later the RCN] was established in 1916 and three years later persuaded a backbench MP, Major Barnett, to introduce a private members bill to establish a regulatory system. The bill was finally passed in December 1919 and separate Nurses Registration Acts were passed for England/Wales, Scotland and Ireland [still one country at that time]. These acts established the General Nursing Council for England and Wales and the other bodies which survived intact until the legislative changes in 1979 which were to create the UKCC and the National Boards.

The Briggs Report and the Nurses, Midwives and Health Visitors Act 1979
The Briggs Committee was established in 1970 [thanks to pressure from the RCN] to consider issues around the quality and nature of nurse training and the place of nursing within the NHS, rather than regulation per se. It reported in 1972 and recommended a number of changes to professional education. Almost as an afterthought, Briggs also recommended the replacement of the existing regulatory structure (involving nine separate bodies across the United Kingdom) with a unified central council and separate boards in each of the four countries with specific responsibility for education. Six years of debate and delay followed before the modified Briggs proposals formed the basis of the Nurses, Midwives and Health Visitors Act 1979. This was due to the need to take account of devolution, Treasury misgivings, lack of consensus within the professions [especially from midwives], and a lack of government will to find the parliamentary time to enact the legislation.
From UKCC to NMC: 1983-2002

In 1983, the United Kingdom Central Council for Nursing, Midwifery and Health Visiting (UKCC) was set up. Its core functions were to maintain a register of UK nurses, midwives and health visitors, provide guidance to registrants, and handle professional misconduct complaints. At the same time, National Boards were created for each of the UK countries. Their main functions were to monitor the quality of nursing and midwifery education courses, and to maintain the training records of students on these courses.

This structure survived with minor modifications up to April 2002, when the UKCC ceased to exist and its functions were taken over by a new Nursing and Midwifery Council (NMC). The English National Board was also abolished and its quality assurance function was taken on board by the NMC. The other National Boards were also abolished, but new bodies were created in each country to take over their functions.

Sources


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Ethel Gordon Manson  Mujer británica, nació en Morayshire, ciudad de Elgin en Escocia. Hija de un médico rico, retirado quien murió cuando ella tenía un año. Su madre caracterizada por una personalidad fuerte, nuevamente se casa con un adinerado miembro del parlamento, George Storer.

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INTERROGANTES
¿por ella se inclino hacia la enfermería si tenía un buen estatus social?

Mrs Bedford Fenwick A Restless Genius.rtf

Ethel Bedford Fenwick, una mujer de clase alta y de visión idealista, vivió en la misma época que Nightingale. Ella, al observar las malas condiciones de vida de las enfermeras y el bajo reconocimiento social de este trabajo; plantó la necesidad de establecer estándares para la formación y el trabajo de la enfermera. Su proyecto se estructuró en lo siguiente:(9,10)

• La formación de la enfermera debía ser de dos a tres años y estar estandarizado.

• Se debía regularizar el trabajo de la enfermera en cuanto a la reducción de horas de trabajos, un mejor pago y los días de descanso.

• Las mujeres que aspiraban a ser en-trenadas debían poseer un cierto nivel de educación y no basarse en las actitudes morales.

• Las enfermeras que se graduaran debían contar con un Registro Estatal que las reconociera como profesionales.

Lo anterior no fue fácil de alcanzar, pues puso en juego los intereses de los médicos e instituciones de salud de continuar con el sometimiento y la explotación al que tenían sometido al personal enfermero. Sin embargo, para lograr el Registro Estatal,(6,11) Fenwick demostró con estudios epidemiológicos las malas condiciones del personal enfermero y cómo ello influyó en la prestación de los cuidados; se unió a los grupos feministas que luchaban por la igualdad de la mujer y fundó en 1887 la primera asociación de enfermeras, la Asociación de Enfermeras Británicas.