

25/11/80

BC AL/336/32/31

Dear Ivor,

It seems to me that I've reached an impasse and I at the moment at least cannot work out a resolution bar me from withdrawing from my commitments. The course causes me nightmares - not that that should be of any interest to you or anyone else - except I can't cope with it - and I had not realised the nature of the difficulties of setting up the type of courses like nursing studies till I came to Bedford. At the Welsh National School of Medicine matters were clear and simple. (!!)

The nature of the problem:

In principle one can indulge oneself in the academic study of nursing, that is to say one examines its issues and problems from a structural point of view. This need not necessarily include practice, or if it does include practice, it is merely from the point of view of the observer. This would be an academic exercise - intrinsically interesting no doubt - of certain interest to the researcher and of doubtful value to the practitioner!

The way I view the study of nursing in 1980 - given the social/economic and political climate - is to produce a first level practitioner whose nursing practice should be enhanced by nursing studies, that is to say by primarily those studies that constitute nursing studies and whatever else. It is in this way that academia and practice cannot be separated - they feed on one another. Whether this knowledge is taught in the classroom, in essays or at the patient's side is irrespective. In this way academic, similar to the word scientific is the terminology describing an approach - and professional and academic studies cannot be separated.

(THIS MUST BE
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SCALE BY 1980)

But I realise that London University is not set up to teach courses of this nature. It has not got the resources, nor is it willing to consider them. A practice oriented academic course which so far has no substance - and you agreed it had none - needs different resources than those that are available at this college in this department. As I have pointed out before, the resources need to cover sound and knowledgeable clinical input and supervision, the working out of clinical placements and the development of objectives as to what should happen during those everchanging placements. Knowledge has to be fished out from somewhere and to be created from the practice as the students come back and relate their experiences. The actual co-ordination is a secretarial matter, watching the telephone as people can't meet their commitments and need to be shuffled else here, etc.

Maybe, one needs to separate practice from academic studies. I do not know who would benefit, except perhaps Bedford College who has reasons of its own to attract such students - and because such reasons are probably economic ones, there lurks the contradiction; there is no money to run the course. We feed in cynicism right at the beginning. If one were to separate it and let Middlesex get on with teaching it, it would be a straight forward SRN course and add 18 months at least to three years. Additionally, the students would come out with a nursing studies degree which is of little use in this competitive world - they should at least study something which has some foundation, however vague, like soc. admin or sociology or ? If one were to separate it, one would help to create schizophrenics - as there would be no relation between what happens in the classroom and in practice.

It seems to me one cannot win.

Maria,