

The Future of the B.Sc/SRN degree in Nursing Studies

1. Although the considerations are certainly numerous and weighty and are sometimes imponderable, in outline the situation is comparatively straight forward and I propose to begin there.
2. The course is a combined enterprise by Bedford College and the Middlesex Hospital School of Nursing. It is built upon the experience of the former in applying the social sciences to professional areas, in particular that of medicine and the health services, and of the latter in the education and training of nurses on courses of high academic standard. Moreover, the School of Nursing has already for twelve years co-operated with the Department at Bedford College in mounting a combined B.Sc/SRN course consisting of a standard B.Sc in Social Policy and a special SRN course taken partly concurrently but mainly post-graduate.
3. The simple question, therefore, is, What will be the effect of the merger of Bedford College and Royal Holloway College on the ability of the Department and the School of Nursing to continue to capitalise on their experience and develop the integrated B.Sc/SRN course upon which they embarked in 1981?
4. At present, the students pass 2½ days a week in academic study at Bedford College and 2½ days in clinical practice in the Hospital (or elsewhere). The logistical problems involved for them, and for the lecturers who have a responsibility for the teaching in clinical practice that forms part of the nursing course-units, become overwhelming once the Department moves to the Egham campus. It would be quite impossible to continue the course as now structured from two sites twenty miles apart.
5. Changes must, therefore, be made in the course and there seems to be only four basic possibilities:-
 - (i) The Middlesex Hospital School of Nursing component could be transferred to a School of Nursing more conveniently situated to the Department when it transfers to Egham.
 - (ii) The Bedford College component could be transferred to another School of the University in reasonable proximity to the Middlesex Hospital.
 - (iii) The structure of the course could be redesigned to make it possible for the School of Nursing and the Department to continue to collaborate from sites twenty miles apart.
 - (iv) The course could be simply abandoned
6. Option (i) has been extensively explored by the Department this term. This exploration has ~~revealed~~ ^{revealed} substantial problems.
 - (a) There is no suitable hospital ^{near} to Egham that is conveniently accessible by public transport.
 - (b) Schools of Nursing at non-teaching hospitals in the Greater London area do not usually attract academically well qualified student nurses, and they are not, therefore, usually very experienced in teaching at above an academically low-level standard.

not since relevant studies course standard not enough (able) tutors + the few that exist avoid cut of non - difficult to reach hospital, low standard

relatively cheap but how - out of step

- (c) They are unlikely to attract the well qualified applicants we are seeking.
- (d) ^{and} They are unlikely to be in a position to support an eventual expansion of the course to say, twenty students a year (which we have always intended on academic grounds) without compromising their existing educational and training responsibilities.
- (e) While the judgements above may be subjective in relation to particular hospitals, we have had the benefit of informal advice from members of the General Nursing Council, The Royal College of Nursing, and experienced persons ⁱⁿ the profession and it is the opinion of the General Nursing Council (which is likely to ~~effect~~ ^{reflect} informed professional opinion, that will be decisive because the GNC must approve the School of Nursing that participates in an integrated B.Sc. /SRN degree.
- (f) Similarly, the University (and in this context ^{the} means principally the Special Advisory Committee in Nursing Studies) must be satisfied about the capacity of the School of Nursing to provide clinical experience adequate for an honours degree of the University. Up to now, it has not contemplated a hospital not associated with a medical school and there can be no doubt whatsoever that should it have doubts that are shared by the GNC, or even doubts not shared by the GNC, the course would not be approved.
- (g) Our inform^{al} soundings suggest that the only chance would be with a hospital that is least conveniently situated: indeed it is not much nearer than central London. To use it would necessitate the substantial use of a coach each day of the week, sometimes at weekends and sometimes at unsocial hours because of night duty. The cost must be prohibitive.

In our opinion: Option (i) is unlikely to be viable.

7. Option (ii) is a matter for the University rather than the Department. There is no School available outside LSE which could provide the social science framework that forms a vital part of the structure of the course. On the other hand, the Department could continue to provide this part of the input to the course through its medical sociology section at the College's central London base or through other teachers operating from there. It might make sense to extend the Department's existing association with the Middlesex Hospital Medical School to encompass the Nursing Studies degree or to take up again its previous negotiations for a similar association with University College while taking on board the Nursing Studies degree or to do both. It is not for the Department to do more than say that it would be very willing to discuss with either school or both an association to support a Nursing Studies degree should the concept receive the blessing of the University and the College.
8. Option (iii) was not at first attractive because it would involve the students being engaged in blocks of teaching first at one location then at the other, something which seemed to run counter to the thinking of the GNC which favours integration through concurrent experience in the university and the school of nursing. There also seemed to be insoluble problems in terms of student accommodation if their place of work changed every term.

In addition, there would be no possibility of the students being involved in lectures and seminars with other students in the Department. There is, however, one possibility which we think should be explored and that is to divide each session, not into terms, but into semesters as laid down for the course-unit degrees generally in the College. Each session, each student would spend one semester at Egham and one in clinical practice at the Middlesex Hospital. At any one time, there would be two years' undergraduates operating at Egham and two at the Middlesex (and at other hospitals in the Health District). Residence places ~~would~~ be provided on this basis at Egham without problems: central London is more difficult but the problem is not insoluble. Such an arrangement is acceptable to the School of Nursing and indeed on first glance they see some positive advantages in it. Integration would not be easy - it is not easy now - but we are not disposed to say it might not even prove to be a better road for our course.

9. The details of such a proposal would have to be worked out and no such attempt will be made in this paper. In outline, these would be the main features:
- (a) Each session would be divided into a first semester of 12 weeks, ~~at~~ one week period for changing location, a second semester of 12 weeks, one week for exams, a post examination 4 week period, and an extra -term 4 week period (as now).
 - (b) Numbering the semesters 1 to 8 throughout the 4 years of the course, the student would spend 1 at Egham, 2 in central London, 3 at Egham, 4 and 5 in central London, 6 at Egham, 7 in central London and 8 at Egham. Semesters 2 and 4 would be followed by a further period of clinical practice in central London covering the post-examination and extra-term period. Semester 6 by a similar period at Egham for writing an Extended Essay and Semester 8 by a final period of professional practice completing the training for SRN.
 - (c) All the academic study in Nursing, Medical Sciences and Social Sciences would take place at Egham and specialist teaching would be supplied there by visiting consultants and others, probably from local hospitals which already supply similar services to RHC departments in the Life Sciences. All the clinical practice would take place in central London and would be supported by lectures in Nursing Studies from the Department at Egham. These lecturers would have to commute for this purpose (or if living in central London commute to Egham when teaching there) and this may be one of the problem areas of the scheme. *ACADEMIC LOCATION FROM WEST END CAMP*
 - (d) The Department will begin some semester-based courses for its main undergraduate section next session and this practice could be extended to make it possible for Nursing Studies students to be taught in association with other students in the Department.

10 Option (iii) is, in our opinion, much the best option to explore, having advantages (both for academic study and for clinical practice) as well as possible problems in respect of integration. Since it is clear that any of the options listed would necessitate the termination of the present course, we propose that the entry for October 1983 be cancelled straight away. Existing students should continue to be taught as planned throughout the course in central London, being based after the departure of the main department to Egham (proposed for summer 1984) at the central-London Base, - or as now in Frasers Lodge if the Base has not by then been established. We should plan to begin the new course at Egham in October 1984, but we would have to consider the implications of any delay in the move of the main department fairly early in the planning stage. The third appointment should be postponed until after University and GNC approval for the new course has been obtained.

11. Option (iv) is again a matter for the University. We would argue against it on these grounds: (a) the case for London University being involved in undergraduate education in nursing studies is a very strong one and there must be a substantial argument in favour of its being based in more than one school; (b) the second course should clearly complement and not duplicate the well-established course at Chelsea and Bedford College and the Middlesex Hospital School of Nursing constitute a unique reservoir of experience and expertise that the University should exploit.

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