Photograph of Dame Sarah Swift, founder of the College of Nursing
Circa 1920, photographer unknown
Sarah Swift, Matron-in-Chief of the British Red Cross, was the first to suggest a College of Nursing.

In 1916, nursing was an unregulated profession. While prominent figures such as Florence Nightingale had championed teaching schools for nurses, each was responsible for setting its own standards for training and consistency was lacking. Anyone could claim to be a nurse.

Added to this, those nurses who had been trained were concerned about the influx of volunteer ‘nurses’ or VADs (Voluntary Aid Detachment nurses) following the First World War. In many cases these women had as little as two weeks first aid training.

Swift joined forces with MP Sir Arthur Stanley, and her idea for a college quickly gained support from other hospital matrons. One hundred years ago, on 27 March 1916, the College of Nursing was established.

The College was instrumental in persuading parliament to introduce the regulation of nursing and in 1919 the Regulation of Nurses Act was passed for England, Scotland, Wales and Ireland (which was still part of the UK at the time). This meant that all nurses had to learn the same subjects and meet the same standards.

In 1928 the College was granted a royal charter, and in 1939 became known as the Royal College of Nursing.

Speaking up for nurses

Right from the start the College of Nursing campaigned to support nurses, whether it was to protect private nurses from unscrupulous agencies at the start of the 20th century, demand better safety precautions around the use of needles at the start of the 21st century or increase staffing levels to improve patient care today.

Although it wasn’t until 1977 that the College officially became a trade union, it had been involved in negotiations about pay and working conditions since it began.

The voice of nursing

Today the RCN has 430,000 members. The College helps nurses with their professional development through learning events and resources and works with members and other organisations to promote innovation in nursing practice. It also campaigns for good working conditions for nurses. The goal is that patients will receive the best nursing care possible from a proactive workforce that is well informed and able to perform at its best.

Activity

Take a look at the photograph. What is Sarah Swift trying to convey in the picture? Think about her pose and what she is wearing? What does she want people to think about herself and nursing?

Sarah Swift set up the RCN to help standardise nursing. Working in groups make a list of three rules for being a good nurse in 1916. Feed back to the class and discuss why you’ve chosen the rules and what might be different now.

Fact: Despite being an all-female organisation, Sarah Swift had to partner with MP Arthur Stanley as women were not allowed to be MPs until 1930
THE IMAGE OF NURSING

2: Nursing Angels

First World War postcard, second of three in a series.
1914-1918, published by Bamforth Ltd
The “selfless angel” image

This postcard presents an idealised image of nursing during the war. The devoted nurse is at her patient’s side in his time of need, in clean, comfortable surroundings. In reality nurses’ work was often demanding and dangerous, particularly when nursing soldiers close to the front. Rather than reflecting their bravery or skill, this image emphasises nurses’ care and compassion. This romanticised image reflects views widely held in the early 20th century.

Previously, nursing had not been regarded as a respectable job. It was during the Crimean War (1854-1856) that nursing began to be seen as a suitable occupation for women. This was partly due to the rising fame of nurse Florence Nightingale, a devout Christian from an upper-class family. Nurses began to be portrayed as angels, dutifully caring for others. By the time the First World War broke out, the female nurse tending to wounded soldiers was an image the British public was comfortable with.

The red cross worn by the nurse in the image shows that she is part of a Voluntary Aid Detachment (VAD). These were staffed by female volunteers who had no formal nurse training.

Gender stereotypes

Later, postcards, cartoons, film and TV often reinforced this ‘selfless angel’ stereotype, as well as others such as the ‘naughty nurse’ and the tyrannical ‘battle-axe.’ In most cases, nursing was stereotyped as women’s work. The reality is quite different; although the majority of nurses who served during the First World War were women, nursing was and is a demanding and skilled profession for both sexes.

Activity

Think about nurses you have seen in films and TV or have read about in books. What are the similarities to and differences from this image?

This postcard was distributed during the First World War, when nursing images were often used for propaganda purposes. Search for references to nurses and VADs in the Illustrated News First World War Archive (www.illustratedfirstworldwar.com). How are nurses described? Why do you think this might have been useful for propaganda? And how might a nurse’s actual role in a casualty clearing station or hospital have differed from this stereotype?

Fact:

During WWI soldiers serving in the trenches could send postcards featuring short pre-printed messages such as “I am well” or “I am wounded”. Commercial postcards could be bought behind the frontlines and mailed home with more personal messages.
He’s stepping out in a career that’s different

“He’s stepping out in a career that’s different” leaflet
1970, published by Her Majesty’s Stationery Office
Promoting a career in nursing to men

The image is clear: this man wearing a suit is a professional. The text on this leaflet confounds the reader’s expectations; the “career that’s different” is nursing. It goes on to invite men to “serve others, lead an interesting life and have an assured future.” Nursing is promoted as a career choice that offers status, prospects, security, and a good salary.

In 1970 nursing was widely seen as a job for women. However, nursing has never been an exclusively female profession in Britain.

Gender prejudices before the Second World War

At the beginning of the 20th century, the majority of civilian male nurses worked in mental hospitals (psychiatric hospitals), and received very little training. As a result, male nurses were regarded as less qualified and of lower status than female nurses. This established a gender stereotype within nursing: men worked in mental nursing, women worked in general nursing.

Men who attempted to move into general nursing met resistance. Most hospital matrons thought it was inappropriate for men to nurse female patients; and many suspected that male nursing students would upset or seduce the female students. Some general nursing courses refused to accept male students.

The rise of male nurses after the war

During the Second World War, male and female nurses were brought together by the military services, and worked together successfully. After the war, many male military nurses looked for nursing jobs when they returned to civilian life. Facing a nurse shortage, the Ministry of Health encouraged the employment of more male nurses in both mental and general nursing. The ministry also arranged for a one-year training course for men leaving military service to qualify them for nursing quickly.

The number of trained male nurses employed full-time by the NHS rose slowly to 12,145 in 1955; men representing 10% of nurses. By 1960, when men were allowed to become members of the Royal College of Nursing, the number of male nurses was continuing to gradually rise. However, the gender divide remains uneven. In 2015, 11.2% of nurses and health care workers employed by the NHS were men.

Activity

Would you have recognised the man on the card as a nurse? What does the design of this leaflet suggest about assumptions about gender in this period? Working in pairs, compare this image with that on the ‘Nursing Angels’ card (no. 2). In what ways are men and women portrayed differently in health care and medicine? Consider what has changed and what has stayed the same between 1916 and 1970.

Fact: The first nursing school, in India in 250 BC, allowed only men to be nurses.
Photograph of nurses in a classroom
Circa 1920-1930, location unknown
A skeleton stands at the side of the classroom as the students focus on an “exploded skull,” a model that displays the bones of the skull separated from each other. This is an early 20th century anatomy class for nurses. We expect nurses to have received specialised education, but this has not always been the case.

19th century nursing

During 19th century, anyone could call themselves a nurse. However, as medical practices developed, the range of knowledge and skills required of nurses was increasing. For example, with the introduction of anaesthesia, surgical nurses became responsible for post-anaesthesia care. They also administered the new analgesics introduced for pain relief. As knowledge of diseases increased, nurses were required to monitor and report patients’ symptoms, and as germ theory became accepted, they worked to control infection.

In hospitals, new nurses began to be trained on the job; first observing and then assisting the more experienced nurses. In this early nurse training, hands-on experience and developing good character were prioritised over theoretical study and exams. Indeed, at the nurse training school Florence Nightingale established in London in 1860, the first students complained that they learned little more than how to be obedient.

What nurses needed was to understand both the processes going on inside patients’ bodies and their treatments. Eventually, nurse education developed into a mixture of practical work, text books and lectures given by specialists.

Standardisation

Although training improved, any hospital could set up a nursing school and choose its own standards. In 1919, the Nurses Registration Act standardised nurse training and examination. When they passed their nursing certificate, students gained the professional qualification of State Registered Nurse.

In 2009 nursing became an all-degree profession, meaning that all student nurses are now educated in universities.

Activity

Working in groups of 4 or 5, each choose a country from a different continent of the world. Find out enough about nurse training in that country to talk for 2-3 minutes to your class. Discuss the differences and similarities.

How many countries require nurses to go to university? Which have a government system of registration? Consider how the differences you have found might help us understand changing attitudes to nursing education in the UK.

Fact: Florence Nightingale was resistant to initial campaigns for a register of nurses. She thought that the register would be out of date as soon as it was printed and more importantly, it would be difficult to quickly remove a nurse who had been fired for incompetence or misconduct.
NURSING SKILLS

5: A 19th century nurse’s tool kit

Nurse’s chatelaine
1880-1910, maker unknown, owner unknown
The chatelaine was the Swiss Army knife of the nursing profession. It attached to the belt, so that the tools that hung from it were always close to hand. During the 18th and 19th centuries most well-to-do ladies would have a chatelaine; although each would be different, depending on what tools the wearer considered essential for their household.

This nurse’s chatelaine contains scissors, forceps, a darning needle and a tongue depressor. The forceps, scissors and tongue depressor were used when treating patients or observing their symptoms. The darning needle is not medical however. It would be used to repair fabrics; such as bed linen; a task associated with housekeeping rather than health care.

The changing role of nurses

Before the rise of hospitals and asylums in the 19th century, nursing was often carried out in the patient’s home by their servants or family members. If extra help was needed, a nurse might be hired by the family, usually as a live-in servant. The main role of casually employed nurses was to comfort the patient and help with activities such as feeding and washing. These nurses could also administer “home remedy” treatments such as applying poultices, or making herbal infusions. It is unlikely that these nurses made a full-time living from nursing, and most probably did laundry and cleaning work too.

Throughout the 19th century and into the 20th nurses were expected to have both medical and domestic skills. The combination of tools on the chatelaine is a reminder that the reform of nursing from domestic task to recognised health care profession was not an immediate change but a slow transformation.

Activity

Thinking of your knowledge about surgical and medical techniques, and the ways the items on the chatelaine were used, do you think this equipment would be compatible with (a) 19th century ideas about germ theory and (b) modern infection control methods? How would a nurse need to look after the instruments in these different time periods?

Fact:

Colney Hatch Asylum (later Friern Hospital) in North London had six miles of corridors including the longest single corridor in Europe. It took two hours to walk the wards so nurses would have been particularly keen not to forget to carry their equipment with them!
NURSING SKILLS

6: Nursing during the First World War

Photograph of the interior of an ambulance train
27th April 1918, Second Lieutenant David McLellan (photographer) © IWM (Q 8749)
The passengers on board this train are wounded soldiers, cared for by military nurses, watched by army officers. The First World War placed heavy demands on nursing services, and nurses worked closer to the front line than they ever had before in wartime.

Ambulance trains carried wounded soldiers from the front lines to hospitals. Casualties could spend many hours on board. It usually took about two hours to ‘load’ a train at a casualty clearing station, and then between six and 36 hours to travel to the base.

The trains sometimes took days to reach their destinations, but patients were glad to sleep, even in cramped bunks. By the summer of 1915, even very complex procedures such as antisepic wound irrigation could be performed – albeit with difficulty, and, on upper-bunks, requiring quite ‘acrobatic’ techniques – by transport nurses.

**Nursing duties**

Nurses worked on the front lines in casualty clearing stations, field hospitals and base hospitals. They rehydrated patients, prepared them for surgery and dressed their wounds. Nurses also combated illnesses caused by trench life: trench foot, dysentery and typhus fever.

**The College of Nursing**

Thousands of women volunteered to help meet demand for nurses during the war. They joined the Voluntary Aid Detachments (VADs) run by the British Red Cross, and received only six week’s training in first aid. The VADs lacked the experience and training nurses had, yet were often referred to as nurses.

Standards in nurse training were unregulated at this time, and the rising number of VADs with little training caused uncertainty amongst nurses, concerned about their profession. Sarah Swift, Matron in Chief of the British Red Cross, joined forces with politician Arthur Stanley to propose a college for nursing, to set standards in nurse education and training. In 1916 the College of Nursing was established.

**Activity**

Nursing duties included preparing and assisting patients for surgery, and keeping wounds clean and dressed in clearing stations, on board trains and ships and in make-shift or temporary hospitals. Consider what role nurses would have played in developments in either (a) blood transfusion or (b) plastic surgery during the First World War. How would the environment affect the way nursing care before, after or during an operation?

**Fact:** In 1946 the Royal College of Nursing (RCN) became the first women’s organisation to be granted a coat of arms featuring a shield. The shield represents military service, in recognition of the Royal College of Nursing’s role during the world wars.
Els Freshwater
@theRCN #whyInurse because I love the opportunity to learn new things

Donald Nurse 999
@theRCN I nurse because I’m happy to do whatever it takes to improve just one patient’s life. In hospital or prehospital it’s #whyInurse

Cody Trezise
because it is so gratifying to make a positive impact on an individual’s life, whether that is big or small. #whyInurse @theRCN

Dorcas Gwata
Because nurses are critical in addressing mental health problems with young people. @theRCN #whyInurse

Zvetlana Farrugia
@theRCN #whyInurse #iluvnursing because it’s challenging, scientific and a caring profession

Pete
@theRCN #whyInurse I nurse because I get to design and create better ways to help people full time day in day out

Tweets posted on International Nurse’s Day 2015
These tweets show just how inspiring modern nursing staff find their careers. As well as being inspiring, nursing is also a career full of varied, challenging and rewarding opportunities. When professional training began in the 18th century, there was only one type of nurse, today students choose from one of four types, or fields, or nursing.

**Adult nursing**
Adult nurses work with patients over 18. They can work in hospitals or in community settings such as people’s homes, health centres or nursing homes.

**Children's nursing**
Children’s nurses work with children and young people up to 19 years old. Children react to illness in a very different way to adults, and children’s nurses are specially trained to understand their needs. Children’s nurses also support, advise and educate parents and carers.

**Learning disability nursing**
Nurses who qualify in this field of nursing help people with learning disabilities to live independent and fulfilling lives. They may work with people in supported accommodation, or with those who need more intensive support - for instance, in hospitals or in specialist secure units for offenders with learning disabilities.

**Mental health nursing**
Mental health nurses plan and deliver care for people living at home, in small residential units or in specialist hospital services. Nurses working in this field need enhanced communication skills to support families and carers. They work with other health care professionals to ensure patients with mental illness get the specialised care they need.

**Midwifery**
Midwifery is a separate profession to nursing with its own degree level qualification. Midwives work at the heart of the community, as the primary co-ordinator of care for all pregnant, labouring and postnatal women. They provide support, guidance and care for mother, baby and family.

**Health care assistants**
Nursing is also carried out by health care assistants (HCAs) and assistant practitioners (APs). They can be found in all sorts of settings, including hospitals, doctors’ surgeries and the community. Working with patients of all ages, they are an essential part of the nursing team providing care and support across every healthcare discipline. Training varies across the UK.

Find out more about careers in nursing in the Professional Development section of the RCN website at [www.rcn.org.uk](http://www.rcn.org.uk)

**Activity**
In your groups discuss what attracts people to nursing now and what attracted people to the role in the 19th century – what are the similarities and differences. Write a 40-word advert promoting the role of the nurse for a 19th century newspaper and a 140 character tweet promoting modern nursing.

**Fact:**
In January 2017 the role of Nurse Associate was introduced in England. The role is expected to work alongside HCAs and registered nurses to deliver hands-on care, focusing on ensuring patients continue to receive compassionate care.

Publication code 005 736, February 2017
I was amazed to see trees didn’t have any leaves because I thought, oh my God, I thought they were all dead, but obviously I was told it was winter. I had never seen snow on the ground apart from the top of Mount Kenya, when I was a boy, and Mount Kilimanjaro. We lived near a place where you could see both mountains.

There wasn’t a single Kenyan in the hospital. I was the only Kenyan, although there were people from the West Indies, Dominican Republic – but I didn’t know that where that was until afterwards.
Steve Kimatta was born and raised in Kenya. In 1965 came to England and got a job as a nursing assistant. Although he found some aspects of life in Britain surprising, Kimatta felt welcome and supported. He settled in Britain, qualified as a nurse and, while keeping in touch with his family in Kenya, he remained in Britain, working in learning disability, psychiatric and older people’s nursing.

Nurse shortages

Kimatta said “At the time [I came to the UK] there was no problem getting a visa I think because maybe there was a need for nurses at that time.”

Nurse shortages were a common problem throughout the twentieth century, for several reasons:

- **The ‘marriage bar’** discouraged women from working once married. This affected nursing, as the majority of the workforce was female. The marriage bar was gradually lifted from 1944 onwards.
- **The Second World War** caused labour shortages across the British economy.

**Immigrant nurses**

Health care workers from abroad became vital to Britain. Targeted overseas recruitment began in the 1930s. In 1949, the RCN worked with the government to launch campaigns to recruit hospital staff from the Caribbean and Europe, particularly Ireland. Nurses from overseas were often recruited into the least popular areas of health care, such as mental health and learning disability, and not always offered the best training opportunities. It is estimated that by 1965, 35% of nursing staff in Britain were born overseas. Today, the NHS across the UK continues to depend on the contribution of nurses from overseas.

**Activity**

Steve Kimatta’s account comes from an oral history interview, recorded by the Royal College of Nursing. Interview the person next to you about a time they experienced a culture shock or visited a place very different from home. What did they see and do? How did they feel? Make sure to swap roles so that both of you have an opportunity to be the interviewer. Then consider the benefits and problems of using personal accounts as a source material in history.

**Fact:** All nurses who work in the UK must be registered with the Nursing and Midwifery Council (NMC). Overseas nursing qualifications must meet the UK standards to be recognised by the NMC.
Photograph ‘Nursing Rocks’, Gold winner of the 15 years and under category, Care on Camera 2015
© Alistair Maclean
This image shows an occupational health nurse inside the Rock of Gibraltar. Today nursing takes place in some surprising settings, but this has not always been the case. Before the rise of hospitals and asylums in the 19th century, many informal nurses were hired to tend to people at home. However as nursing the sick moved onto wards with trained nurses, care in the home became less popular.

Community nursing

Organised district nursing, where nurses would visit people in their homes, began in England in Liverpool in 1859. After witnessing the care provided to his wife, philanthropist William Rathbone continued her services so that people could access free care. He went on to work with Florence Nightingale, developing a model for district nursing that became a standard for the profession.

Industrial nursing, which is now called occupational health nursing, was also on the increase, with nurses working in heavy industries such as shipbuilding and mining to safeguard the health of workers.

Nursing independence

In the 1960s and 70s, the boundary between the work of doctors and nurses began to shift. Nurses began to undertake complex clinical assessments, diagnosed illness, prescribed treatment and designed plans of care. The 1980s and 90s saw a dramatic rise in the number of nurse specialist roles – nurses focusing their expertise on one medical condition or type of treatment.

This allowed nurses to work more independently and nursing now takes place wherever it is needed. You can find nurses on cruise ships and aeroplanes, in warzones and disaster areas, as well as in schools and workplaces. Nurses also work in research helping to make health care improvements and teach student nurses in universities.

Caring for people in their homes has also once again become a normal part of health care. Technology has allowed more freedom to treat patients at home and help them to avoid long stays in hospitals as much as possible.

Activity

Imagine you are a nurse in one of the following settings: a cruise ship; the Armed Forces; a prison. What type of cases do you think you would have to treat and what would the challenges be? What types of technology have become available in the last 100 years that would help your role? What public health challenges might exist?

Fact: Nurses contribute to films and TV shows as medical advisers – making sure that situations, illnesses and treatments as realistic as possible.
NURSING ICONS

10: Florence Nightingale (1820–1910)

Florence Nightingale carte-de-visite
1856 Photograph by William Edward Kilburn, published by Ashford Brothers & Co
Owned by Florence Nightingale Museum
Cartes-de-visite

Photographs of celebrities attached to small cards, known as cartes-de-visite, were hugely popular in the second half of the 19th century. Today, this Florence Nightingale carte-de-visite is a reminder of Nightingale's enduring celebrity status.

Florence Nightingale

Florence Nightingale was born in 1820. Aged 16, she discovered she had a talent for nursing while caring for her family and servants during a flu epidemic. She decided that God was calling her to become a nurse. Her parents were against the idea, as until then, nursing was a job for the poor. Despite this, Nightingale undertook nursing training and at 33 became superintendent of a hospital for ‘gentlewomen’ in London. In 1854, she was invited by the Minister of War, a social acquaintance, to oversee the introduction of female nurses into the military hospitals in Turkey.

Wartime nursing

During the 19th century, the invention of increasingly destructive weaponry and tactics caused large numbers of casualties. In unsanitary conditions, soldiers’ lives were equally threatened by disease as they were by injury. Care of the significant numbers of wounded and sick personnel was inadequate and unorganised.

Nightingale believed in miasmatic theory, the idea that disease was transmitted by foul air, long after it had been discredited in the medical world. However, the measures she introduced to remove miasmas, such as airing and cleaning wards, did improve sanitary conditions. With the nurses she brought to Turkey, Nightingale cleaned and organised hospitals and improved supplies of food, blankets and beds.

Nightingale’s fame

Nightingale’s reform of military hospitals was deemed an outstanding success, and she returned to Britain a hero. Nightingale hated what she called the “buzz fuzz” of celebrity. Her desire for privacy only fuelled the legend, and the saintly image of Nightingale was reproduced on a huge variety of souvenirs.

Activity

Put yourself in the place of Florence Nightingale and write a letter to a hospital explaining how to prevent the spread of miasmas. Discuss with your group why the measures may have worked despite Miasmatic Theory being superceded by Germ Theory.

Fact: Nightingale had a pet owl named Athena, which she saved from a group of children after it fell from its nest in the Parthenon, Greece. After her death Athena was stuffed and can now be seen at the Florence Nightingale Museum in London.
NURSING ICONS

11: Mary Seacole (1857-1881)

The Wonderful Adventures of Mrs Seacole in Many Lands
Published by James Blackwood, London, 1857
The colourful story of Mary Seacole’s life is told in her 1857 autobiography, and bestseller, *Wonderful Adventures of Mrs Seacole in Many Lands*. Seacole was born in 1805 in Kingston, Jamaica. Her mother was a local woman and her father a Scottish soldier. She became famous for nursing during the Crimean war.

**Finding her passion**

Mary first learned to nurse from her mother, who ran a boarding house for invalid soldiers and used traditional remedies to help them. However, it was Mary’s love of travel that helped to round out her nursing knowledge. She visited other parts of the Caribbean, Central America and even Britain, where she added European medical techniques to her skills.

In Panama, she battled a cholera epidemic, learning much about the disease and catching and recovering from it herself. On her return to Jamaica she was faced with a yellow fever epidemic and the medical authorities turned to her to provide nurses for sick soldiers.

**Nursing in the Crimea**

It was on a trip to London that Mary discovered that the nursing system at the Crimean War had collapsed. She applied to the authorities to travel to the war to tend the sick and wounded but was turned down on every occasion. Both talented and experienced, she was left to wonder if the colour of her skin was causing prejudice against her.

Eventually in 1855, at the age of 50, Mary funded her own passage to the Crimea. She opened the British Hotel near Sevastopol which served as a base from which she would take mules laden with food and medicines to the front line. The hotel also had an officer’s club and canteen and soon the whole of the British Army knew ‘Mother Seacole’.

The war correspondent W H Russell said of Seacole “[she is] a warm and successful physician, who doctors and cures all manner of men with extraordinary success. She is always in attendance near the battle field to aid the wounded, and has earned many a poor fellow’s blessings.”

**Returning to London**

Seacole returned from the war bankrupt. The debts of the officers and the expensive, unsaleable items left in her hands after the end of the conflict left her financially ruined. However, the newspapers started a campaign to raise money for her. Backed by royalty and the British army, enough funds were raised to ensure that Mary could live the rest of her life in comfort in London.

**Activity**

Mary Seacole’s adventures paint her as a very independent woman, at a time when this was unusual. Read an account of one of her trips away from Jamaica, from any part of her book (freely available online). How does she portray herself to her readers to try and ensure that (a) her achievements are recognised and (b) she is considered respectable?

**Fact:** Seacole is the only named black woman to have a statue in the UK. It is outside St Guys and St Thomas’s hospital in London.
Notes for teachers

This resource explores the role of nurses and nursing in the history of medicine and public health. Each card provides source material and activities and can be used on its own or to complement wider topics. It is aimed at secondary school students and can be used to support National Curriculum and Scottish Curriculum for Excellence learning.

The cards can also be reproduced and used for homework or independent study.

The teaching notes below include additional resources for yourself or your students which provide more context for each theme.

1. The Royal College of Nursing

A timeline of the RCN can be found here: https://edu.hstry.co/timeline/the-royal-college-of-nursing/embed


The Royal College of Nursing's Principles of nursing practice also set out what patients and their families can expect from a nurse.

RCN Principles of nursing practice: https://www.rcn.org.uk/professional-development/principles-of-nursing-practice

The RCN archive includes 1932 rules for sisters, nurses and probationers at Sherburn Hospital in Durham. Visit the archive catalogue at archives.rcn.org.uk/CalmView and search for reference number c545/3.

2. Nursing angels

A first-hand account from a First World War nurse working in a casualty clearing station can be found here http://www.scarletfinders.co.uk/164.html


3. Men in nursing

The website www.truthaboutnursing.org has numerous resources about the image of nursing.

4. Nursing education

There are different requirements for becoming a nurse across the world. The UK requires nurses to be registered with the NMC via a degree level qualification. You can find more about becoming a nurse in the UK here https://www.rcn.org.uk/professional-development/become-a-nurse

The World Health Organization (WHO) advocates a world-wide standard for nursing education http://www.who.int/hrh/nursing_midwifery/hrh_global_standards_education.pdf

5. 19th Century toolkit

You can discover more about germ theory here: http://www.sciencemuseum.org.uk/broughttolife/techniques/germtheory

The Royal College of Nursing publication Essential practice for infection prevention and control describes more about modern practices https://www2.rcn.org.uk/__data/assets/pdf_file/0008/427832/004166.pdf

6. Nursing during the First World War

Using their knowledge of nursing through other topics, students will be able to extrapolate what role of nurses may have been using the following sources.

Plastic surgery: http://www.bbc.co.uk/guides/zxw42hv

WW1 advances in medicine in blood transfusions: http://www.bbc.co.uk/guides/zs3wpv4

Blood transfusions: http://online.wsj.com/ww1/blood-transfusions
The RCN’s Those who served and Frontline Nurses exhibitions can also be accessed at www.rcn.org.uk/whatson

7. Nursing as a career
More information about nursing career can be found here:
Nurse: https://www.rcn.org.uk/professional-development/become-a-nurse
Midwife: https://www.rcn.org.uk/professional-development/become-a-midwife
HCA/AP: https://www.rcn.org.uk/professional-development/become-an-hca-ap

8. Britain relies on nurses from overseas
A Guardian newspaper article on the NHS and overseas nurses can be found here: https://www.theguardian.com/society/2008/jun/18/nhs60.nhs2
A BBC report on contemporary immigration rules for nursing can be found here: http://www.bbc.co.uk/news/health-34531443
First-hand accounts of moving to the UK can be read in the stories section of the Moving Here website: www.movinghere.org.uk

9. Nursing environments
A first-hand account of nursing on a cruise ship can be found here: http://www.leicestermercury.co.uk/interview-cruise-ship-nurse-jo-needham-life-sea/story-18434588-detail/story.html
Information about nursing in the Queen Alexandra’s Royal Army Nursing Corps can be found here: http://www.army.mod.uk/medical-services/nursing.aspx
Information about working in the criminal justice system as a nurse can be found here: https://www.healthcareers.nhs.uk/explore-roles/nursing/prison-nurse


The Royal College of Nursing’s centenary photography competition shows real images of modern nursing in a variety of settings: www.rcn100photo.org.uk

10. Florence Nightingale
The Florence Nightingale Museum has extensive resources about Florence Nightingale and nursing in the 19th century. As well as the physical museum in London, the website provides access to online information and a help with homework service for students. http://www.florence-nightingale.co.uk/resources/
Information about miasmic theory can be found here: http://www.sciencemuseum.org.uk/broughttolife/techniques/miasmatheory
The Florence Nightingale digitisation project has made more than 1900 of Florence Nightingale’s letters available online. The database can be accessed here: http://hgar-srv3.bu.edu/web/florence-nightingale

11. Mary Seacole
The full text of Mary Seacole’s autobiography is available here: http://digital.library.upenn.edu/women/seacole/adventures/advances.html
More information about Mary Seacole can be found on the Florence Nightingale Museum website: http://www.florence-nightingale.co.uk/resources/