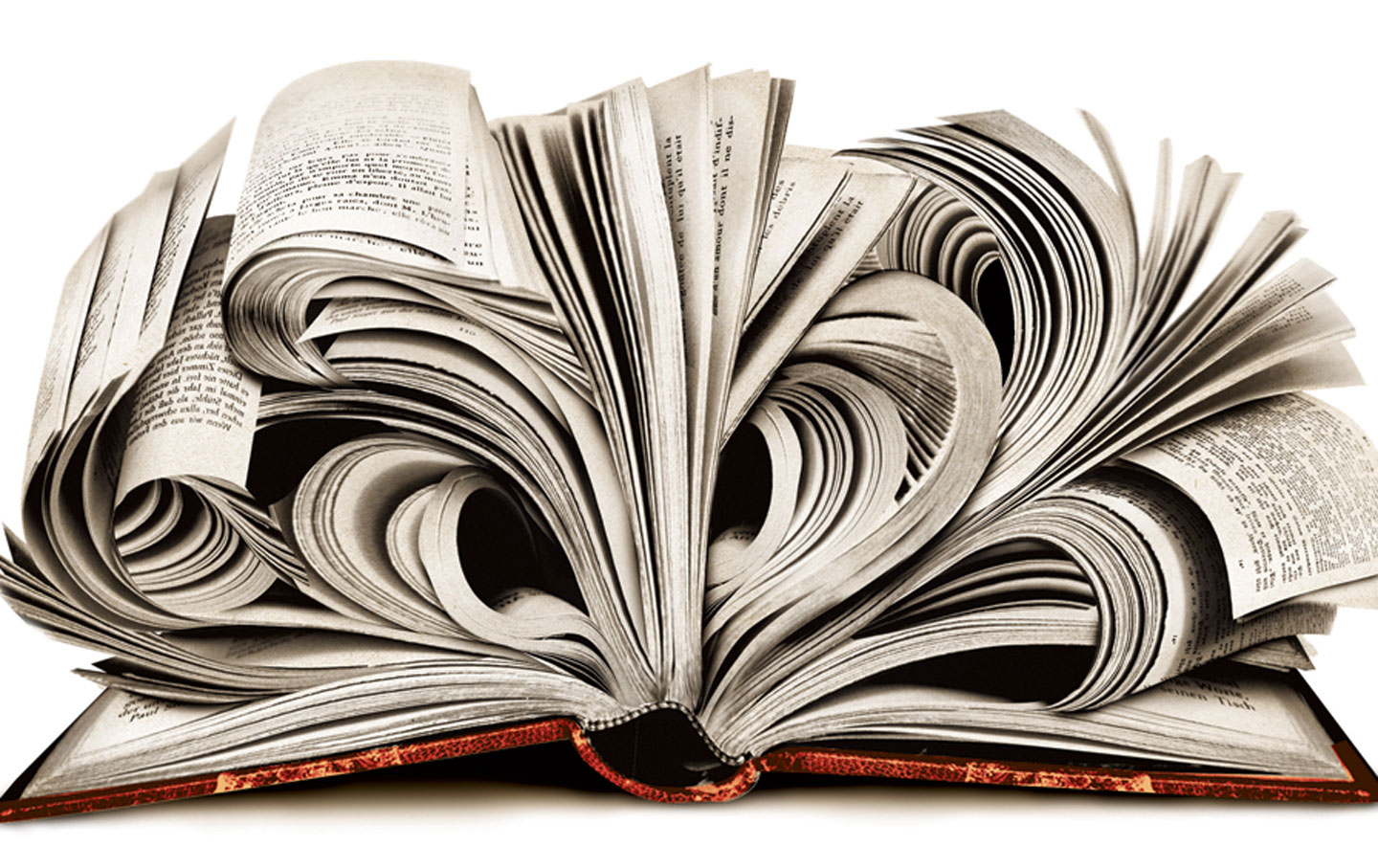
**De Aston**

**English Department**



**Year 12 GCSE: Language Paper 2**

**Challenge Tasks**

**Complete one question a week.**

**Name:**

# **Source A:** Nurse shortage hits dangerous levels in 90% of hospitals, report finds

Monday 21 December 2015 08.47

Nine out of 10 hospitals are failing to meet their own targets for safe levels of nurses on wards, according to a report.

An analysis by the [Health](http://www.theguardian.com/society/health) Service Journal (HSJ) of 232 hospitals in England found that 207, or 90%, were unable to meet safe levels during the day, while 81% could not hit targets for night cover and 79% missed both quotas.

It marks a decline since January this year, when 85% of hospitals were short-staffed during the day.

The HSJ’s findings, based on August figures published by hospitals each month under measures introduced following the Mid Staffs inquiry, come as the [NHS](http://www.theguardian.com/society/nhs)faces increasing pressure.Earlier this month the health service missed a series of key targets for A&E waiting times, cancer treatment and ambulance responses, leading experts to warn that the NHS would struggle to cope with the busy winter period.

Separate research last week suggested nurses were under such pressure that they could not guarantee safe care for their patients.

The [Nursing](http://www.theguardian.com/society/nursing) Times survey of almost 1,000 nurses found eight out of 10 were under more stress at work than they were 12 months ago.

More than half said they “rarely” or “never” had either sufficient staff or time to ensure safe care for patients, while a third said their ward or team was “always” short-staffed.

The chief executive of the Royal College of Nursing, Janet Davies, said the pressures on numbers meant nurses were overworked and unable to provide the care they wanted to.

“Our nurses are telling us that they are really exhausted at the end of their shift, often having to stay late, and really upset if they can’t provide the care they know they want to do,” she told BBC Radio 4’s Today programme on Monday.

“They do get very concerned because they know what they should be doing for patients and if they can’t it’s really upsetting.”

She said the health service was paying the price for previous cutbacks to the nurse training programme.

“We went through a period of time when we were trying to save money, we cut posts, we didn’t train enough people and we are still feeling the effect of that,” she said.

Source B: Florence Nightingale’s letter to The Times on ‘Trained Nurses for the Sick Poor’

The beginning has been made, the first crusade has been fought and won, to bring real nursing, trained nursing to the bedsides of cases wanting real nursing among the London sick poor, in the only way in which real nurses can be so brought to the sick poor, and this by providing a real home within reach of their work for the nurses to live in – a home which gives what real family homes are supposed to give:- materially, a bedroom for each, dining and sitting rooms in common, all meals prepared and eaten in the home; morally, direction, support, sympathy in a common work, further training and instruction in it, proper rest and recreation, and a head of the home, who is also and pre-eminently trained and skilled head of the nursing.

Nursing requires the most undivided attention of anything I know, and all the health and strength both of mind and body. The very thing that we find in these poor sick is that they lose the feeling of what it is to be clean. The district nurse has to show them their room clean for once; in other words, to do it herself; to sweep and dust away, to empty and wash out all the appalling dirt and foulness; to air and disinfect; rub the windows, sweep the fireplace, carry out and shake the bits of old sacking and carpet, and lay them down again; fetch fresh water and fill the kettle; wash the patient and the children, and make the bed. Every home she has thus cleaned has always been kept so. She found it a pigsty, she left it a tidy, airy room.

The present Association wants to foster the spirit of work (not relief) in the district nurse, and for her to foster the same in her sick poor.

If a hospital must first of all be a place which shall do the sick no harm, how much more must the sick poor’s room be made a place not to render impossible recovery from the sickness which it has probably bred? This is what the London District Nurses do; they nurse the room as well as the patient, and teach the family to nurse the room.

Hospitals are but an intermediate stage of civilization. At present, hospitals are the only place where the sick poor can be nursed, or, indeed, often the sick rich. But the ultimate object is to nurse all sick at home.

The district nurse costs money, and the district homes cost money. Each district nurse must have, before she is qualified:

1. a month’s trial in district work;

2. a year’s training in hospital nursing;

3. three months’ training in district nursing, under the Superintendant-General.

For anything like a “National,” or even a “Metropolitan” concern, a capital of £20,000 and an income of £5,000 a year are wanted. Of this a great part is wanted at once, to set on foot three district homes; to pay and maintain their superintendents, nurses, and probationers; to create a hospital training school in which to train.

What has been done at present is to establish one district home under the charge and training of Miss Florence Lees, as Superintendent-General, with five hospital trained nurses and three nurse candidates, and to carry on the previously existing work of the East London Nursing Society with six nurses.

The Central Home was opened at 23, Bloomsbury-Square, in December last, the nursing work having been begun in the neighbourhood from a temporary abode, in July. The Nightingale Training School at St Thomas’s Hospital is at present giving the year’s hospital training to six, to be increased to 12, admitted candidates.

I ask the public not to add one more charity or relief agency to the many that are already, but to support a charity—truly “metropolitan” in its scope, and truly “national” if carried out—which never has been before.

FLORENCE NIGHTINGALE

**Section A: Reading**

Answer **all** questions in this section.

You are advised to spend about 45 minutes on this section.

|  |  |
| --- | --- |
| 0 | 1 |

Read again the first part of **source A**, **lines 1 to** 20.

List fourstatements from the text which are TRUE.

**[4 marks]**

|  |  |
| --- | --- |
| 0 | 2 |

You need to refer to **source A** and **source B** for this question:

Both sources give details about being a nurse.

Use details from **both** sources to write a summary of the differences between

(8 marks)

|  |  |
| --- | --- |
| 0 | 3 |

Now refer only to **source A**, how does the writer use language to shock the reader?

You could include the writer’s choice of:

• words and phrases

• language features and techniques

• sentence forms.

(12 marks)

|  |  |
| --- | --- |
| 0 | 4 |

For this question, you need to refer to the **whole of source A** together with the **whole of source B**.

Compare how the writers convey their different ideas and perspectives of the profession they describe.

In your answer, you could:

• compare their different ideas and perspectives

• compare the methods they use to convey their ideas and perspectives

• support your response with references to both texts.

(16 marks)

**Question 5.**

Being a nurse is a thankless job.

Write a newspaper article in which you explain your view on the statement above. [40 marks]