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good general training will realise and accord, for she will know that the care bestowed on these details is all-essential to the patient's recovery.

From this case Nurse passes on to dress a child which has been badly scalded. The over-worked parish doctor, who has more patients to see in a day than any human being could possibly attend to in a week, has left the little one with an easy conscience in Nurse's hands, and it requires all her surgical experience to dress the slowly healing sores, and all her tact and loving kindness to persuade the mother, by whose crass carelessness the accident had occurred, not to interfere continually with the dressings, and the child to suffer them to be removed and replaced.

Then she goes next to a young man, who, in a damp, dark cellar, is gasping for his weary breath. He is an out-patient at a Chest Hospital, and for months has suffered from bronchitis and asthma which has puzzled scores of physicians by its obstinate persistency. Nurse having been, as we will imagine, equally well trained in Medical, as in Surgical, and as in Obstetrical, work, guesses that the secret of the chronic trouble lies in the dank surrounding walls and atmosphere, and vainly she has tried to persuade the patient of the unhealthiness of his environments. To-day he is worse than usual, and after giving him his medicine and placing on his poultice, she returns to her text and once more gives a lecture on hygiene, which, at last, is effectual, and a reluctant promise is given that he will try what a change of abode will do as soon as he is better. But this, Nurse knows, is beginning at the wrong end, and so, in sheer goodheartedness, she is obliged to undertake a search for a more airy room for her patient in addition to her more professional duties.

The next case is an old woman, paralysed and bed-ridden, who requires frequent attention, or bad would rapidly go to worse. And so the day goes on. Passing from patient to patient, from old case of chronic affection, to new case of acute disease, amongst all sorts and conditions of men, women, and children, but everywhere one common lot—sheer poverty—and one common feature —suffering. In most places Nurse finds an innocence of sanitary laws, which would be ludicrous, were it not so very, very pitiful in its results. In nearly all, at first, there is endless superstition or prejudice to be confuted or lived down.

Need the argument be further continued, or has not enough been said to prove the intense necessity that women who would be District Nurses must have received the most careful training in every branch of their calling if they are efficiently and truly to carry out, to the satisfaction of their own conscience and for their patients'

welfare, the multifarious duties which will devolve upon them? But if one word more need be said to show the grave responsibility of their work, it would be this. In many and many a case which the District Nurse will be called upon to attend she will be unable to obtain the smallest medical direction, and be once and again obliged to rely upon her own knowledge and common sense for guidance, because it will only be on the rarest occasion that she will chance to meet the Doctor in the patient's room. And at most other times she will be compelled to receive his instructions at second, or even at third-hand, garnished by the narrator's imagination, or blurred by ignorance and incoherency. When all this and its results be remembered and understood, we may claim that our first assertion made above is true in every point.

But now having proved the grave importance of a comprehensive and thorough training, the question naturally arises as to the manner in which this should be acquired. We would admit nothing but the very best, in our jealousy for the good name of Nurses, and of the Nursing craft. And so, in full expectation that we shall be condemned by some for aspiring to too high an ideal, we would, after most grave consideration, express our conviction that, to fulfil the duties and responsibilities of the work, a District Nurse should first have passed through the entire, and at least a three years', curriculum at a general Hospital and Training School, and thereafter have spent at least three months in a large Lying-in Hospital, in order to acquire the most important knowledge of that specialty. If, indeed, the Nurse could qualify herself as a Midwife as well as a Monthly Nurse, we feel confident it would not be too much to suggest in view of the fact that on many occasions such knowledge would probably prove of inestimable service to her patient, and of the greatest satisfaction to herself.

And, finally, to complete the training we would suggest a measure which is seldom, indeed, carried out at present. That for three months the novice should be initiated into the "niceties" of the work, by daily visiting with some old and experienced District Nurse. For it is a great mistake to believe that anything which is worth learning is learnt by intuition, or that Hospital routine affords the least preparation for such entirely different duties as fall to the share of the visitor to the homes of We feel convinced that there the sick poor. would be fewer failures, much fewer heartburnings and disappointments amongst District Nurses, especially at the outset of their new occupation, if such a system of initiation into its little mysteries were uniformly adopted, than, unfortunately, are experienced very frequently now.

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