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Register of Nurses would give. But as a matter of common knowledge, while the public does not take its doctor from the Medical Register, it understands the automore a listing is a listing when the form the second s

untrained Nurse.

This register would not in any way indicate the good Nurse, it would guarantee that such Nurses as were put on it had been trained at the Hospitals recognised as Training Schools, and had satisfied the Board of Examiners that they had had the opportunity Board of Examiners that they had had the opportunity of acquiring and had acquired sufficient knowledge of their profession. I had a probationer, who has now left us; for three years she had done alternate night and day duty, she had been taught, examined and finally granted her certificate, up till that time she had not been in charge of a ward. In the same month her sister, who had output large large large her sister, who had entered another large London Hospital, was, after one year's training, also pro-nounced fully trained, and was given charge of a ward. These two Nurses, one at the end of three years, one at the end of one year, stood exactly on the same footing in the eyes of the public as fully trained Nurses. Another instance : we had a special pro-bationer who was with us just three months ; she left and went to a Provincial Hospital and remained six Nurses. weeks. I met her the other day; she is in a Nursing Institution in London, and is sent out at  $\pounds_2$  2s. a week. A lady called on me in uniform the other day; she is doing district work and is paid a decent salary, never having worked one day in a Hospital of any kind. Some time ago another lady called on me, she also was in uniform, with a very long veil. She had gone out with a midwife to her cases for three months, had done a little study, had been interviewed by a doctor of well-known name, who asked her a few questions and gave her a certificate stating she was competent to act as monthly Nurse. I could multiply such examples, but will give just one more. In a Hospital with so large a staff as ours we have now and then members we want to get rid of; this is usually done in their first year. The majority of them have been employed in a Nursing Home in London, without reference to me, and are earning frome in London, where  $\pounds^2$  2s. or  $\pounds^3$  3s. a week. These are women who we did not consider fit to nurse our patients. Without State Resistantian have a state and a fit as the state of the s State Registration how are we to get rid of these, and save our Nurses from their most unfair competition? Without the Central Examining Board, too, how are we to be sure that the Nurses have had proper oppor-tunities of being trained and taught? In those days there will be a competition among Hospitals as to who will get the largest percentage passed, and Nurses will run the chance of too much teaching. But State Registration and a central examining body is, I am sure, not only our fate but our only sure protection from half trained and wholly untrained competition. We want to see Nursing a profession of sufficient merit and distinction as to make it desirable for our best class of women, not a refuge for the destitute and the stupid.

(The discussion on this suggestive Paper will be reported next week.)

## Royal British Hurses' Association.

(Incorporated by Royal Charter.)

A LOCAL CENTRE FORMED FOR SUSSEX.

(BY OUR SPECIAL CORRESPONDENT.)



A MEETING was held on Thursday afternoon in the library at the Sussex County Hospital, Brighton, for the purpose of forming a Local Centre of the Royal British Nurses' Association in Sussex. Miss Georgina Scott, Matron of the Sussex County Hos-

Matron of the Sussex County Hos-pital and a leading member of the Association, convened the meeting and presided. The attendance was small, and it is much to be regretted that the medical men of Brighton did not attend. In opening the proceedings Miss Scott read a letter from Her Royal Highness Princess Christian, President of the Asso-ciation, wishing the meeting success and expressing approval of the formation of local centres of the Association. Miss Scott introduced the deputation Association. Miss Scott introduced the deputation from the Executive Committee in London, including

from the Executive Committee in London, including Mrs. Dacre Craven (Hon. Nurse Secretary), Mr. John Langton (Treasurer) Mr. Fardon (Hon. Medical Secretary), and Dr. Coupland, of Middlesex Hospital. Mr. Langton explained the aims and objects of the Association, saying that the chief object was "to unite Nurses together for their mutual help and support, and for the advancement in every way of their professional work." Mr. Langton averred that he was frequently asked, "What do I (personally), gain by joining this body?" This was doubtless a selfish question, but women were selfish though men were more so, but the women were selfsh, though men were more so, but the New Woman was even more selfish than man, therefore this question must have a direct answer. [By-the-bye, is not the modern Nurse a new woman?] There was a great advantage in belonging to this organisa-tion. It rendered a three years' training necessary for all Nurses, and since this test had become obligatory it had caused many provincial hospitals to alter their systems before granting certificates. Less than three years Mr. Langton considered useless, judging from his own experience of how little a medical student knew at the end of five. Another important reason was that after quitting their training schools, Nurses drifted away and became disconnected atoms forming no cohesion. As the organisation and its funds increased it was hoped to establish libraries and places of meeting for social intercourse in the various local centres, and there was no reason why this could not be done. In London sessional lectures were delivered; these he considered very good in their way, but he thought that two or three during the winter were quite sufficient, for their tendency was to increase "work," whereas he considered that it was rest and recreation that was required, and that the social aspect was the best one. Another reason for extending the Association was that the colonies were keenly desiring it; that very morning an application had been received from New Zealand. But it rested largely with the Nurses themselves to promote the furtherance of the scheme.



