

But to remain satisfied with this position would be eventually to lower our standard, and that would be disastrous. We must be in the van of progress, not at the rear, and there is no doubt that the formation of a nursing department directed by the Local Government Board, would give nurses under the Poor Law a definite professional status. Periodical competitive Examinations, conducted by a central or Local Board, would increase the value of the certificate tenfold, and for the practical details of nursing, two or more women of proved experience in the training of probationer nurses in Poor Law Schools should be accorded seats on the examining board.

It has been urged in certain quarters that a high standard of excellence is not required under the Poor Law and that the very conditions suggested by Miss Wilkie would in themselves be detrimental to the service, as nurses trained to such a pitch of perfection would not remain in our Workhouse Infirmaries. Now do they remain at the present time? Assuredly not, and for the simple reason, that outside the training schools, which are virtually hospitals, the conditions of service are notoriously unsatisfactory.

Again, it has been asserted that few women, however suitable in other respects, are in a position to either give their services for two years, or pay training fees. I would ask, in what other trade or profession beyond that of nursing, is a woman paid to learn? So far as my knowledge goes, and I have studied the subject carefully, whatever the class of the worker or the work chosen, she must give either time or money to obtain instruction.

When the teaching is known to be thorough, the practical experience good, and the final examination conducted by an independent Authority, there is no lack of candidates for training, be the terms of engagement what they may. Indeed, it is quite the exception for our older established Poor Law training schools to have to advertise for Probationer Nurses.

They are practically self-supporting, as each year higher class and better educated women apply for vacancies, and the nursing staff of many a Workhouse Infirmary will compare favourably with those of Metropolitan Hospitals.

I do not think we should increase the number of our training schools, but aim at perfecting those already in existence, by a lengthened term of probation and an extended curriculum, to include sick room cookery, domestic economy, and practical housewifery. A knowledge of these subjects is essential to every Superintendent Nurse and should be taught in all training schools.

I would also advocate the establishment of preliminary schools in connection with our Poor Law Training Schools, similar to that of Tredegar House, attached to the London Hospital.

This would be a decided step in the right direction, as it would eliminate the palpably unfit from the service, utilize the smaller Workhouses, and save much valuable time in the recognised term of training.

That small local Infirmaries are not in themselves good teaching centres is a well recognised fact.

The Staff is too few in number to admit of the necessary competition, the discipline is very lax, there is no properly equipped class-room (the initial expense being so great) and the long hours on duty do not give the time needed for both recreation and study.

Where there is no Resident Medical Officer, many acute Medical and Operative Surgical cases must, of necessity, be sent to hospital, which otherwise would be treated in the wards. This materially diminishes the practical experience required in the training of a Pupil-nurse, and for which no amount of theoretical knowledge can compensate.

The air is full of rumours as to what is being done, in this direction, and the other, to meet the present deadlock.

But would not the wisest course be to petition the Local Government Board for a Departmental enquiry into the whole nursing question of Workhouse Infirmaries?

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### A Noteworthy Decision.

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A QUESTION of considerable importance was recently decided in the Queen's Bench Division, by Mr. Justice Lawrance and Mr. Justice Channell, viz.: whether a Licentiate of the Society of Apothecaries of London was entitled to describe himself as a physician. The case was an appeal against the conviction of Herbert Kingsley Hunter under the Medical Act for having wilfully and falsely used the name and title of physician.

The conviction caused much stir in medical circles, and it was widely felt that the defendant had been hardly dealt with. It is therefore with satisfaction that we record that the case was quashed on appeal.

A feature of the case was that the prosecution was represented by Mr. Muir Mackenzie, who is Counsel for the General Medical Council, and also for the Royal British Nurses' Association. It will be remembered that on each occasion when nurse-members of the Royal British Association sought justice in the law courts, Mr. Muir Mackenzie appeared against them, and in the present case, in his capacity as adviser to the General Medical Council, he acted as prosecutor against the late Mr. Hunter.

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