visit, inspect the hospitals, and examine the probationers in practical work. Such examinations to be on regular and fixed lines, at regular and fixed periods. Certificates of a definite value should be granted by the department to probationers according to merit and proficiency at the end of two years.

In the succeeding two years further development of character and powers of management and organisation should be specially encouraged. A salary should be paid during these two years.

The question of all salaries should be one under the control of the central authority, who would also be required to draw up general and detailed rules for use in all the infirmaries. The matrons of such training schools should be selected with much care. Influence should be no factor in their selection; they should be chosen on account of their special fitness for such posts. They should be women of great moral and mental force, able to judge and develop character—women of great personal influence, with an infinite capacity for taking pains, self-reliant and self-controlled, and with an unlimited fund of enthusiasm.

Such a scheme, if carried out, would put the training and certification of nurses on a definite basis. There would be a minimum standard of training and a minimum standard of proficiency.

Let it be clearly understood that in its working each school would be independent, but it would have to follow some definite plan of teaching as laid down by the central authority, just as a boys' school entering pupils for the Oxford or Cambridge local examinations has to carry out some definite preparation, and as the boys have to pass a definite examination common to boys entering in all parts of England, so all the probationers in all the training schools would have to pass an examination common to all-an examination set by the central authority as the Oxford or Cambridge authority sets it for the boys; and as the answers are examined and marks awarded by these authorities, so would the answers of the probationers be examined and marks awarded by the central authority. It is foolishness to allow each The result is hospital to set its own standard. astonishing diversity of teaching and certification, some certificates not being worth the paper on which they are written.

The necessity for some definite standard of training and proficiency is becoming more apparent to Boards of Guardians. The petition of the Norwich Board of Guardians, and the support it has received, are proofs of that necessity, and of the desire that the necessity should be relieved. But the carrying out of such a scheme as that suggested in the petition would merely result in the establishment of a separate class of nurse of very limited attainment, much below the highest level of the profession. The aim should be to

provide the Poor Law service with the best possible. Contentment with less should not be entertained for a moment.

But it may be asked: How would the establishment of the training and certification of nurses on definite lines help the smaller Workhouse Infirmaries to solve the difficulty of the supply of Only in so far that a certificate would nurses? have the definite value it at present lacks. The supply might be guaranteed under a scheme by which the smaller Workhouse Infirmaries would be worked in association with the larger ones. Miss Gibson, of the Birmingham Workhouse Infirmary, read a paper last May at the West Midland District Poor Law Conference, in which she suggested that the large training schools might train for the smaller Workhouses. But the nurses sent out from the large schools, as at present constituted, would find the same monotony and difficulties in the small Workhouse Infirmaries as are found by the nurses who now take such appointments only to give them up after a short The fact that the nurses were under agreement with a central authority, as Miss Gibson suggests, would not make the conditions less But the difficulty might be overcome by grouping the infirmaries in districts, counties, or parts of counties, but districts whose limits would have to be defined by expert knowledge. Such districts must each have within them an infirmary properly equipped in all respects, which would be a training school for the district. Nurses would be sent out from that school in turn to the smaller infirmaries, just as they would be sent from ward to ward in the training school. The nursing of the whole district would be under one control, and would be raised to the same The nurse sent to a small country infirmary would know that the monotony was only a temporary thing, and the nursing would have to be as well done as if she were in the wards of the central infirmary, and, if under less favourable circumstances, she probably would find her powers of self-reliance and resource develop. She would learn adaptability. She would be imbued with learn adaptability. the best traditions of her school, and would bring some of the influences of her larger life to bear on the more narrow life of the small isolated The whole cost of Poor Law nursing -salaries, maintenance, grants, travelling expenses -should be borne by the nursing department, who should receive a rate, proportionate to the number of sick for whom provision was made, from each Parish or Union, and would from that source meet all the cost involved in the provision and maintenance of a recognised system of training and nursing. Or the financial arrangements might be altogether—as it is now partially—left in the hands of the County Councils.

(To be continued.)

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