

those who are sincerely working to establish nursing education on a sound basis, and free discussion and interchange of ideas must be of the greatest possible value. Ventilation of all questions touching the education of nurses is desirable, and we are therefore glad to see an able article in the *Medical Press and Circular* dealing with the vexed question of mental nursing. After referring to the introduction of systematic training, first begun at the Bothwell Asylum, it proceeds "with the conception of training, and the modern hospital development of asylums, has come the idea that mental nursing requires to be supplemented with a general physiological and nursing education. From this has grown the idea that hospital trained nurses are an acquisition to asylum service, and the idea has gone so far that some superintendents insist on having their matrons and assistant matrons and what they call "lady supervisors" trained nurses taken from general hospitals." Our contemporary raises two objections to the adoption of this course. (1.) The appointment of hospital nurses to these positions is prejudicial to the prospects of ordinary asylum nurses as regards promotion; (2.) the system is prejudicial to that proper understanding of the ordinary asylum nurse's trials and difficulties, and to that sympathy with the insane, which are essential to the perfect management of nurses and patients. Both these objections are legitimate. We have every sympathy with the objection of asylum nurses to be superseded by nurses, even highly skilled nurses, who have had no experience of mental nursing. But this difficulty might be overcome by requiring hospital nurses to have had also mental training before they are eligible for the higher posts, and similarly, mental nurses should be ineligible for these appointments until they have had hospital experience. There is no doubt that in another large special branch of nursing, that in the Fever Hospitals under the Metropolitan Asylums Board, the standard of nursing has been immensely raised by the regulation, enforced of recent years, that only nurses holding a three years' certificate of hospital training are eligible for appointment as Charge Nurses, though the same difficulty is felt here, and such nurses should undoubtedly have had fever experience also before being placed in these responsible positions. Our contemporary appears to think that as insanity is an abnormal mental, rather than physical, condition that

general training for nurses though desirable is not essential. But derangement of both conditions exists so frequently, if not invariably, side by side, that a nurse, to be efficient, must be competent to deal with both, indeed, in our opinion no branch of nursing requires a higher class of women, whether viewed from the point of general or professional education, or of moral tone, than the asylum nurse. To attract such women to the ranks of mental nursing, the hours on duty must be shortened, educational facilities afforded, and the pay bear some proportion to the responsibility of the work. The question therefore resolves itself, as do all educational questions eventually, into one of expense. With regard to the suggestion put forward that there should be greater interchange and association between nurse training schools and asylums we are heartily in sympathy, and the question of the best system of training from a practical as well as a theoretical standpoint should be freely discussed. This much at least is certain, that those interested in the education of mental nurses are alive to the advantages of general training as part of the curriculum. The short-sighted and retrograde policy of the officials of the Royal British Nurses' Association in trying to solve this difficult question by placing all asylum attendants whether trained, or untrained, on the Register of Trained Nurses was a lamentable display of their blind or wilful ignorance of the best interests of both generally-trained and asylum-trained nurses. It was only owing to the strong and energetic protest made by nurses and medical men in a public meeting, convened because they knew they would have no chance of a hearing in their own Association, that the officials have not ventured to place on the Register of Trained Nurses asylum attendants with no general training; but it must not be forgotten that an amenable Council adopted the report presented by Dr. Outterson Wood, and seconded by Sir James Crichton Browne, proposing the admission of asylum attendants to registration and membership of the Association. *This resolution has never been rescinded*, and under its authority there is no doubt that the officials of the R.B.N.A. may, at any moment that seems opportune to them, place asylum attendants, as such, on the Register—or Roll as it is now called—of trained nurses. However, it is really not a matter of any importance in these days what the R.B.N.A. does or does not do. Its name is Ichabod.

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