

information on any question which might arise in the course of a subsequent discussion.

The next International Congress of Nurses will be held in Berlin in 1904. Our American colleagues are already beginning to organize their forces with a view to adequate representation on that occasion. It is time that nursing societies in this country began to do so also, if they do not wish to be left behind in the onward march of progress.

A question has arisen amongst those who recognize the desirability of the formation of Leagues in connection with the training schools as to the possibility of their organization in connection with other societies. It is interesting to notice that the same question has arisen in the United States. The organization of the National Associated Alumnae provides only for the admission of representatives of Training School Associations. But there is a strong feeling that some means should also be devised whereby important Associations of nurses, such as the Buffalo Nurses' Association, should be represented on National Organizations, and in framing the constitution of the American Federation of Nurses steps have been taken to embrace all well accredited nursing societies.

It is noteworthy that in this country also the proposed constitution of the National League of Certified Nurses has provided that three distinct classes of societies are eligible for admission.

(1) Associations composed of Graduates of Schools of Nursing connected with general hospitals of not less than fifty beds, giving three years' full training in the wards of the hospital and certification after examination.

(2) Associations composed of graduates of Schools of Nursing connected with Poor Law Infirmaries of not less than 200 beds, giving three years' full training in the wards of the infirmary, and certification after examination, and whose Training Schools are recognized by the Local Government Board.

(3) Professional Associations of Nurses, formed for the benefit of nurses, the members of which hold the qualifications of training as defined above.

It will thus be seen that the interests both of nurses who are able to attend the meetings of their own Training School League, and those who, severed by distance, have attached themselves to other professional organizations, have been carefully considered.

## Annotations.

### DISTRICT NURSES FOR POOR LAW CASES.

An important question came up for discussion at the last meeting of the Sheffield Board of Guardians on the recommendation of a special sub-committee appointed to consider the question of providing district nurses for the outdoor poor. This committee reported that during the year ending March 1901, that the medical officers of the Union had attended nearly 4,000 cases, the average number of sick persons attended per month being 874. The medical officers were in favour of the appointment of district nurses and the sub-committee unanimously recommended the appointment of four nurses in the worst districts. It also advised that these nurses should reside in, or conveniently near their districts, and be altogether apart from the workhouse hospital, and that the control of the scheme should be in the hands of a special Committee of five Guardians. Each nurse to receive £75 rising to £80 and probably uniform in addition.

The Chairman, Mr. J. Wycliffe Wilson, said that the matter had been talked of and ventilated more than once, but this time it had reached the stage of a distinct proposition. It appeared to him right that they should have some district nurses. There were many cases in which nursing was of more importance than medicine. Moreover they employed doctors to prescribe for patients but in many instances the patients were left in most unsuitable hands between the doctors' visits.

Considerable discussion ensued, and it was ultimately decided to defer taking action for six months, and meanwhile to obtain all possible information on the subject from other unions.

The scheme appears to us a most feasible and useful one. There are many cases of chronic sickness amongst patients attended by the parish doctor, which could be properly cared for in their own homes if a trained nurse were in attendance once or twice in the day. The poor law infirmaries would then only have to provide for the acute cases which need constant attention, and thus the ratepayers would be relieved of the necessity of building and maintaining large infirmaries, involving a heavy expenditure. In most instances the patients would be happier in their own homes, amongst their relations and thus in every

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