

prehensive experience, even though the medical work is sometimes very good and varied.

Workhouse wards should therefore be staffed by nurses holding a three years' certificate from a General Hospital or Infirmary.

4. The "Orders" for the Matrons of workhouses and infirmaries require revision, as they were drawn up when the conditions were different. A Matron undertakes duties of great responsibility after years of arduous training, and should therefore be in direct communication with her Committee. I have no hesitation in saying that this arrangement, which is only just to the Matron, would be found most satisfactory to the authorities.

To the medical officer she would be responsible for the proper carrying out of his directions for the care of the sick, but for all business matters of her department she would be directly responsible to the Committee.

It seems to me that many of the present difficulties would be met by the formation of an Advisory Committee on nursing matters in connection with the Local Government Board. I should suggest that some of the members of such a Board should be experts on nursing, that the inspection of nursing matters should be under it, and that the secretary should be a fully-trained nurse. This central department would formulate a uniform standard of training and examination.

The Report and the verbatim evidence taken by the Departmental Committee are published in two Blue Books, which may be obtained through any bookseller.

THE FORMATION OF BRANCHES.

The Council has decided to sanction the formation of branches of the Matrons' Council where a desire is expressed for their institution, such branches to accept the principles of the Constitution, but to be locally self-governing.

DELEGATE TO THE NATIONAL COUNCIL.

Miss Kinneir Adams, Matron of the Ruchill Hospital, Glasgow, attended the meeting of the National Council of Women in Edinburgh in October last as the delegate of the Council, and has furnished the Council with a full and valuable account of the proceedings.

BRITISH GYNÆCOLOGICAL SOCIETY.

On the invitation of the British Gynæcological Society, a sub-committee was appointed to confer with a sub-committee of the Society on the present facilities for the education of nurses in obstetric and gynæcological nursing.

The points considered at the Conference, with the conclusions unanimously arrived at, are appended.

POINTS FOR DISCUSSION AT THE CONFERENCE.

1. What training do nurses now obtain in gynæcology during the course of their general hospital training? And is their special knowledge tested in any way?

1. A considerable number of nurses do not pass through the gynæcological wards during their general training, and no one, as a rule, obtains more than three months' work.

No special test of their gynæcological knowledge is made.

2. Do nurses obtain any training in maternity work during their general hospital training?

2. This is given in some of the Poor Law Infirmarys, but it is very unusual at the general hospitals.

3. Do the Matrons consider that three months' work in the gynæcological wards, during the course of the three years' general training, is sufficient education in that special branch of work?

3. The general opinion is that three months in a gynæcological ward of a general hospital is certainly the minimum term of training.

4. In the case of those nurses who have not had three months' gynæcological work in their training-school, what special gynæcological training would it be feasible for them to obtain, and how could it best be secured after the general training is concluded?

4. By training in the special hospitals for women for at least three months, but that six months would be more desirable.

By arrangements made either between the general and special hospitals, or by the admission of paying pupils.

5. The British Gynæcological Society of course assumes that any general hospital certificate of three years' training is the most full and sufficient evidence of the nurse's general training.

It is suggested that the nurse's special knowledge of the details of the nursing of gynæcological or of maternity patients could best be tested by the Matron of the special hospital in which the nurse was trained, and that such Matrons should be asked to fill up a schedule as to the nurse's special knowledge and capacity, without which testimony no nurse would be eligible for the technical examination and certificate of the Society.

Would there be any practical difficulty in the Matron thus examining and certifying as to her nurses?

Would she be allowed to accept fees from the Society for rendering it this assistance?

5. The best plan would be to have an entirely independent examination by qualified nurses in the practical nursing of patients, outside the hospitals, the technical, medical, and surgical details being tested by the medical members of the Examining Board.

N.B.—Candidates to be required to produce satisfactory credentials as to practical work and personal suitability from the heads of their training-schools.

Since the Conference the following letter has been received:—

51, Queen Anne Street, W.
November 12th, 1902.

DEAR MADAM,—I am instructed by the Council of the British Gynæcological Society to convey their hearty thanks to your Council for so readily and so courteously appointing a Committee to confer with their Committee, and also for the very valuable

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