

Edítoríal.

THE MODERN TRAINING OF NURSES. The discussion which took place at a recent meeting of the Board of Management of the Royal Infirmary, Manchester, in regard to the allocation of beds to aural cases is important as showing the trend of public and medical opinion in relation to the class of cases to be received in general hospitals.

Mr. Charles Hopkinson moved the adoption of a recommendation from the Infirmary Committee that, provided the new Ear Hospital be built in close proximity to the new Infirmary site, and that its facilities are satisfactory to the University, the Board should not allocate any beds to aural cases.

The mover of the resolution said that arrangements were being made to cut out the eye beds and the skin diseases beds from the new Infirmary, so as to leave these cases to the special hospitals. That policy having been endorsed, there was no difference at all in cutting out the ear beds if they could arrange for the public being effectively served by an ear hospital close by. It was, in fact, desirable to avoid the expense of specialising, and to keep themselves to the work of a general hospital.

The tendency of the present day is unquestionably to eliminate many of the cases which formerly were received into general hospitals. Nurses who received their training twenty years ago, and even later, will remember that cases of enteric fever, diphtheria, chicken-pox, measles, whooping cough, and even-in the case of at least one of the twelve London hospitals with medical schools-scarlet fever were admitted freely to the wards of our general hospitals. We are not disposed to desire a return to these days. Cases of an infectious nature are much more properly referred to hospitals specially provided for their treatment, or urgent cases, such as those of diphtheria needing prompt surgical treatment, are admitted to special wards and completely isolated. In the

interests of the sick in the wards this is unquestionably the right course. With more precise classification also, eye, aural, orthopædic and gynæcological cases, and others of a special nature are increasingly sent to hospitals which now provide solely for the various special diseases.

The question as to whether cases which do not come under the headings of "general, medical and surgical" are best relegated to special institutions is one which concerns the Committees of general hospitals and their medical staffs, but the effect of this greater classification upon the training of nurses is a matter which deserves the close attention of all who are concerned in such training, and are responsible for the efficiency of the nurses certificated. It is unquestionable that twenty years ago a probationer in the course of her hospital career nursed a greater variety of cases than at. the present time; she had good experience in the nursing of enteric fever and of diphtheria. and a useful knowledge of the nursing care of many other diseases which she now sees but rarely, if at all. She may, and no doubt does, usually become highly skilled in nursing such cases as are admitted to the wards of the hospital where she is in training, but, unfortunately, when she goes out into the world as a private nurse, equipped, with her certificate, she finds that the public requires attention in a variety of diseases of which she has no skilled knowledge, and either she must refuse cases on account of her want of experience, or she must render service which, although skilled in many directions, is unquestionably not the best which might be afforded to the particular case.

It would seem, therefore, that if in the future special cases are to be increasingly treated in special hospitals, the nurse training schools must keep in close touch with the special hospitals, and must secure in them such opportunities of experience as are necessary for the thorough education of their probationers in training. Such a system of affiliation, would

A 2



