

one of the latter class I have had occasion to consider the possibility of organising some form of training. I have also been much impressed by the unsatisfactory position of the small general and special hospitals as regards the terms offered to probationers and the conditions under which they are received.

Many of these Institutions endeavour to attract probationers by advertising short terms of training and certificates of proficiency (which the authorities must know to be worthless) after one, two, or three years' service.

No less than five provincial general hospitals in which the individual average of beds occupied in 1904 is returned as less than twenty, give certificates for one, two, or three years' training; one especially flagrant case having an average of four occupied beds, gives a certificate after two years' work—one cannot call it training—whilst another cottage hospital with only ten beds proudly advertises a certificate after one year's service.

Here I should just like to say a word as regards the position of the Matrons of these institutions. It is all very well for their more fortunately-placed sisters to hold up the finger of scorn at such practices, and theoretically I believe we should all agree in condemning the system, but even in cottage hospitals a nursing staff must be provided somehow or other, and committees have a little way of expecting bricks without straw. We Matrons are genuinely interested in the well-being of our institutions, and we know, alas! the necessity of avoiding expense in all departments; it is no easy matter to steer our little ships through the perilous waters of economy towards the haven of efficiency without being carried away by the currents of expediency.

1. Although as yet we have no recognised or authoritative definition of the actual curriculum by means of which efficiency can best be attained, I expect we shall all agree that a nurse's training ought to be carried out for three years in the wards of a general hospital, containing at least 70, and preferably 100 beds. Now we know that there are only some 130 institutions in the United Kingdom capable of giving such a training, and according to the evidence given before the Select Committee last Session there are over 80,000 persons at present in existence in the United Kingdom calling themselves "Nurses." It is therefore obvious that only a very small proportion of these can be thoroughly "trained" in the best sense of the word. (Why, even the London Hospital with its 937 beds and a two years' system of training can only turn out 100 nurses each year, a mere drop in the ocean.)

From the probationer's point of view things are equally unsatisfactory; it is no uncommon thing for a girl after paying a premium and binding herself to serve several years in a small hospital to find out when it is too late that the so-called training is not recognised by the Nursing Services or, indeed,

any reputable association or institution which employs properly qualified nurses, and that if she wishes to enter such service she must begin all over again as a raw probationer in a larger hospital.

2. There are in the kingdom no less than 73(106)* general hospitals containing from 40 to 70 beds, of these 67 (86) profess to be able to train nurses. Out of 82 (109) general hospitals containing from 20 to 40 beds, no less than 69 (84) advertise that they educate probationers, the majority giving certificates; 41 (60) provincial cottage hospitals, none of which can boast of more than 18 beds, look upon themselves as training-schools, 15 (16) of them giving certificates for three years' training. We have therefore at least 177 (230) small general hospitals engaged in turning out pinchbeck or imitation nurses. We may also add 48 (66) special and children's hospitals, each having over forty beds, and pretending to train probationers: a grand total of 217 (296) institutions, and probably even this number is well within the mark!

If the Registration of Nurses is undertaken by the State, one of the first acts of the Nursing Council will be the definition of a probationer's curriculum, and unless some such expedient is devised, the 217 (296) hospitals (and many more) will suddenly find themselves in great straits, being financially unable to employ trained nurses exclusively, and yet having no means of attracting probationers within their walls.

3. By affiliation I mean the scheduling of the special and smaller general hospitals in groups sufficiently representative of all classes of cases, so that a nurse working through such a group would receive a thorough training in all branches of her profession.

The Central Nursing Council, which forms so prominent a feature in all Registration schemes, must be empowered to authorise the affiliation of hospitals and institutions, define the curriculum and length of training, and admit nurses so trained to the central examinations.

4. In my opinion the groups should consist of a general hospital, a fever hospital, one or more special hospitals, in each case the number of beds to be not less than forty. The length of the combined training should be three years, and I would suggest that the first and last years be spent in the general hospital. Theoretical teaching in the shape of weekly lectures and demonstrations in the subjects laid down as essential by the General Nursing Council should be compulsory, and delivered only by properly qualified persons.

5. The results of such affiliation would be most beneficial.

(a) It would utilise the teaching and valuable training material at present wasted in many institutions and greatly add to the facilities for training.

* Figures in parentheses refer to hospitals in the United Kingdom.

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