

the large general hospitals it is believed that the percentage of failures to pass is abnormally low.

Another source of knowledge of asylum training, with the increased respect and sympathy it brings, comes from the personal contact, on terms of equality, of hospital nurses and mental nurses in those institutions for supplying trained nurses which exist in all large towns. Mental nurses are enlightening the hospital nurses they meet as to asylum life and methods.

There can be no doubt that the most important advance in nursing made in asylums during the last twenty years was the introduction of the systematic training of asylum nurses and attendants. No measure has tended more to the hospitalisation of asylums, for the training and regulations for the Certificate for Proficiency in Mental Nursing have been manifestly based on the analogous training and regulations for certificates for hospital nursing. Until a year ago the Certificate for Proficiency in Mental Nursing could be obtained after two years' training, but every endeavour has been made to make asylum training correspond to the best standards of hospital training, and it is now necessary to train for three years as in hospitals.

When I first entered upon asylum work about twenty years ago, there was only one nurse in the large asylum to which I was attached who knew how to take a temperature, and there was not a single person in the whole asylum except the medical officers who could read a clinical thermometer.

At the present time I believe the sick nursing in both the male and female wards of many asylum hospitals and infirmaries to be as good as that in any general hospital in the country. The credit of introducing these measures, if any one person can claim it, belongs to the late Dr. Campbell Clark, of Hartwood, and formerly of Bothwell Asylum. His system of training was taken up most heartily in Scotland, and the Scottish division of the Medico-Psychological Association in their enthusiasm produced a special handbook for the use of nurses and attendants, and this in course of time was adopted by the whole Association as a text-book when the Nursing Certificates were instituted. This textbook has several times been enlarged and improved, and as it is again in the hands of the Educational Committee for revision, I make the suggestion that they should authorise the use by asylum nurses of the same standard textbooks on anatomy, physiology, medicine, surgery and sick nursing as are employed in the education of hospital nurses, and that the

authorised handbook of the Association should deal only with the subjects of mental disease, mental nursing, and asylum duties. I think this would be a good arrangement for its own sake, and it would also be another move in the direction of bringing hospitals and asylums nearer to one another.

I now come to the advent of certificated hospital nurses into asylums, an event important both from the tendency it had to introduce hospital methods into asylum administration, and from its action in joining together these two departments of nursing.

So far as my information goes, the first fully-trained hospital nurse to be engaged in asylum work was appointed Matron of a succursal division of the Stirling District Asylum by the late Dr. McLaren in the year 1882. It is interesting to note that Dr. McLaren expressly stated that one of his objects in making this appointment was to bring the asylum nearer to the hospital, and it is also interesting to learn that eighty, or one half of the patients under the charge of this lady, were men. I understand that the experiment was quite successful, but the post was abolished after this nurse left as a consequence of her marriage to a medical man.

About ten years ago I saw that there was a great future opening up for those hospital nurses who would qualify themselves for high asylum posts by undergoing a preliminary course of training in asylums. Being certain of the fact that the medical superintendents of asylums, so far as Scotland was concerned were anxious to have Matrons who were well-educated women who had received some hospital training in addition to asylum experience, and having conclusive evidence that the supply of this type of women did not exist, it appeared to me obvious that those hospital nurses who would take asylum training were absolutely certain of becoming Matrons of asylums in a very few years. I concluded that if I threw open my asylum to these hospital nurses for the purpose of affording them a training in order that they should become Matrons of asylums, I should be doing a good thing for the care of the insane in general. I also thought if I could make use of this great inducement of future promotion to tempt hospital nurses to enter the ordinary wards of the asylum, and to mix with the patients there, which up till then they had never done, I should be doing good work for the care of the insane of my own asylum. Within a year I had the whole female side of the Perth District Asylum under the immediate supervision of three hospital nurses. They did most excellent work while they were with me, and

[previous page](#)

[next page](#)