

needed it two or three weeks holiday in a home of rest, thus enabling them to go on with their work. It had also a system of awarding medals in recognition of faithful service. The last gold medal was awarded to one who had given forty years of such service. The Association also published a monthly journal, *Asylum News*, to which asylum workers were encouraged to contribute.

He was glad to hear of a *rapprochement* between hospital and asylum nurses. The more they knew of each other the better they would appreciate one another. If, however, all the plums in the way of asylum appointments were carried off by hospital nurses what openings would there be for male attendants?

Mrs. Bedford Fenwick said her excuse for joining in the discussion, as she had little experience of the nursing of asylums, was that she must at once refute any statement that she was not interested in the nursing of the insane. She has been interested in the nursing of the sick for nearly thirty years, and realised the great importance of skilled nursing in relation to the mind diseased.

She thought that a convergence in the curriculum through which hospital and asylum nurses were required to pass before registration was most essential.

#### MATRONS ON EXAMINING BODY.

She further suggested that the medical practitioners forming the Medico-Psychological Association should be good enough to consider the advantage of securing the co-operation of the matrons of asylums not only in the practical training of probationers, but also in the examination of candidates for the Association's certificate.

She thought the benefit which would result from the participation of trained nurses in the training and examination of candidates for this certificate, and in the control and government of their profession must be apparent.

The need of the future was a conjoint Register, and a conjoint examining board of medical practitioners and Matrons. She asked the eminent members of the Medico-Psychological Association present to consider these points in connection with any scheme they might suggest for the organisation of mental nursing by the State.

Dr. Hyslop, Resident Physician at Bethlem Royal Asylum said that he had come prepared to do battle for asylum nursing, but he found that the alienists were not only tolerated but welcomed.

He had learnt in life that each individual forms his opinion of the world according to the contents of his own horizon. His own work seemed the most important in the universe. It was told of a professor of geology who had devoted forty years to studying various forms of crystals that, on his death-bed the lesson he deduced from his own experience to impress upon his children who were gathered round him was "Do not let your studies be so diffuse."

From the point of view of the general hospital nurse the right application of a spiral bandage was of greater moment than an hallucination. She needed to study the individual as a whole.

In connection with medical education a study of the human mind and its diseases had now become a compulsory part of the general curriculum. What pertained to medicine pertained also to nursing, and the training of a nurse was not complete until she had some knowledge of the human mind. Bethlem afforded the hospital nurse an opportunity of gaining an insight into mental nursing by giving six probationers from Guy's and elsewhere the benefit of a six months' course.

Both general and mental nurses were worthy of all recognition and on behalf of Asylum nurses he would welcome the time when all were recognised as equal.

Miss Andrews asked if there were any general hospital which would take mental nurses for a year. Dr. Harding, Medical Superintendent at Berrywood Asylum, said opposition was the salt of life, and he appeared in his familiar rôle of unrepentant sinner. As long as thirty years ago hospital nurses had been employed at Berrywood, but they had not been a success. He wished Dr. Robertson had mentioned some of the difficulties of his plan. If hospital nurses were introduced into asylums to hold the superior posts, what about the people who took the inferior posts?

#### FEMALE NURSES IN MALE WARDS.

It was no unusual thing to have female nurses in male wards if the cases were classified, but male nurses were absolutely essential. If women nurses were placed over them it would prevent the class of men who were requisite from applying for posts. It was absolutely necessary to observe and report fully as to the cases. The male nurse would have to report to the female charge nurse, and she in her turn to the doctor. Another objection was that hospital nurses were taken into asylums as charge nurses, whereas they should know the work from the beginning. It was an injustice to put a hospital nurse with a few months' asylum experience over the heads of skilled male attendants. He hoped the Conference would do good. There was need of it.

Miss Isla Stewart referred to the fourteen-hours' day of asylum workers, and the high pressure at which they worked. She also said that a great deal had been said as to the asylum nurses getting experience in general nursing, while it seemed to be thought hospital nurses got no experience in the care of the insane. But many of the patients in their care were delirious, and a delirious person was not a sane one. That was a very important point. She thought the individual was present to the hospital nurse as much as to the asylum nurse.

Miss Stewart also said that it was a great pleasure to her that hospital and asylum nurses were meeting together in conference. The difficulty of a double-training—*i.e.*, in general and mental nursing was a financial one. Nurses only received small salaries, and could not afford to give the time required to training in both branches.

Miss Wortabet, Miss Rosalind Paget, and Miss Marquardt also asked questions bearing on the points previously raised. The Chairman and Dr. Robertson replied, and Dr. Robertson stated that he approved.

[previous page](#)

[next page](#)