

as they possibly can. Quite regardless these people, therefore, naturally are of how little their *employées* know; of the danger to the sick they may produce. They merely want a woman who looks like a Nurse, and takes smaller wages than a Nurse would require, simply because she knows nothing of Nursing. This system we believe to be doomed, and dying rapidly. It is unfair to well-managed, true Nursing Homes; more unfair to real Trained Nurses; most unfair to the public. But having traced the development of Private Nursing, and having briefly reviewed all the systems under which it has been conducted, what are our conclusions upon the matter? Shortly these, drawn from the facts we have narrated. In the first place, few private Nurses of the future will live alone, and practice on their own account, unless they are devoted solely to some one specialty, and are certain of constant employment from one or more medical men, because the expense of so living is too great, and the chances of otherwise obtaining employment too uncertain.

Then, which systems of Nursing Homes will survive? Only those, in the first place, which employ most carefully-selected Trained Nurses; because Registration will effectually prevent any promiscuous choice of unskilled women, and will undoubtedly result in the speedy extinction of institutions which in future pursue that method. Secondly, only those Homes who not only serve the public well, but also advance the interests of their *employées* also; because well-trained Nurses will certainly not enter institutions which do not, in future, do so. Once more, therefore, we find that Registration is the key-note of improvement; and this time, not only in the private Nursing of the future, but also in the condition and position of Private Nurses.

### BRITISH NURSES' ASSOCIATION MEETING AT BIRMINGHAM.

(Discussion concluded from page 190.)

MR. BARLING said he should like to say that he thought it would be well for the British Nurses' Association to issue a syllabus of the subjects they thought should be taught, and then, he thought, the central body should, at the end of the lecture term, send down questions to be answered by the Nurses. These questions should not be left to local examiners. With regard to a practical examination in special subjects, he thought that would be desirable, and could be managed by examiners sent down from the central body.

The CHAIRMAN said these were questions of detail which would have to be considered later on.

Dr. MORRISON (casualty surgeon to the Queen's Hospital) said he thought the entrance, in the first

place, was not to be by examination, but rather by the three years' training. It seemed to him that all these matters of detail must follow in their proper order.

Miss WOOD explained that in this matter they had no choice. They had been told that the Royal Charter would force them to take everybody on to the Register, who was, at the time the Charter was granted, acting as a Nurse. The question they were now discussing referred only to the future, not to the present. When the Charter came into operation, every Nurse would have the right to come on, whether trained or not. But before that time came, it was wise to discuss these questions that they might be able to draw out conditions for the Royal Charter; because they would be asked what they wanted the Royal Charter to do. Therefore, they must settle the questions of examination or not; by a central council or not; the length of training to be required; and so on. All this they had to do before they could get the Royal Charter; but it would not affect any of those present.

The CHAIRMAN then put the resolution to the meeting. Those who were in favour of a central examination to secure Registration—that was to say, an examination conducted by an independent body outside the particular hospital to which a Nurse belonged—would signify the same in the usual manner. This was carried nearly unanimously.

Miss WOOD then put her third question: What length of training and experience, in the opinion of the Nurses present, should be demanded, before a Nurse could be put on the register?

Dr. CROOK asked whether, supposing the time to be fixed for three years, a Nurse might obtain those three years' experience at one or more hospitals.

Miss WOOD: At more than one hospital, if she pleases.

Dr. MALINS said the question was, how long a time should elapse before a Nurse could be examined and Registered?

Miss CADBURY (Matron of the Sheffield Infirmary) spoke as to the advisability of examining Nurses at the end of their first year.

The CHAIRMAN then put the resolution:—Should three years be the length of time fixed upon, during which a Nurse should be required to be engaged in the pursuit of her calling, before she was entitled to be Registered? This was carried almost unanimously.

Miss BUSBY (Matron of the General Hospital), on rising to propose a vote of thanks to Miss WOOD, was greeted with hearty and prolonged cheering. She said they were all very grateful to Miss WOOD for her kindness in coming down to explain the objects of the British Nurses' Association. She rejoiced to see so great a company present at the meeting, but its real success could only be proved by the number joining the association. (Applause.) She hoped

[previous page](#)

[next page](#)