

once a week, apart from the practical instruction the probationer receives from the head nurse or sister of the ward.

Question VII. alludes to the terms employed in the nurses' certificates, with the view of obtaining greater harmony and, if possible, uniformity. At the present time considerable diversity exists in the wording of the certificates and several of the provincial hospitals consulted are ready to alter the terms used should a uniform standard be adopted. In a very few the length of service only is stated; others append to the period a commendation to the effect that the nurse has performed her duties "to the satisfaction" or "to the entire satisfaction" of her employers, while the majority express approval by varying terms ranging from "highly satisfactory" to "tolerably good." In a few instances space is left for any remarks it may be thought necessary to add. The Nightingale Fund Committee have not hitherto issued certificates to their registered nurses, but are contemplating the expediency of doing so.

As to Question VIII., which refers to the persons authorised to sign the certificates, there is a general agreement; for, with the exception of the Edinburgh and Glasgow hospitals, where the medical superintendents sign in the name of the governing bodies, all the others append three signatures, comprising that of the matron, a representative of the medical officers, and the chairman of committee. In most provincial hospitals the house surgeon signs as the representative of the medical authorities, but in the London hospitals this duty is done usually by one of the medical instructors.

It is manifest to your committee that the obstacles in the way of organising a general system of registration increase with the knowledge possessed of the working of the various institutions in which nurse-training is carried on. It is equally evident that, unless there is a general unanimity among the training-schools as to the basis on which such a system can be inaugurated, any attempt to form a voluntary register must necessarily prove a failure, while, in the present progressive condition of the nursing question, legislative interference would be attended with disastrous results. The fact that most of the large hospitals, some of which have long been known as pioneers in the movement for the better education of nurses, disapprove of an innovation, which they honestly believe would in a manner dissociate the nurse from her parent school, practically settles the question. A central organisation, possessing a separate jurisdiction, cannot fail more or less to affect the individuality, the healthy rivalry, and the *esprit de corps* which characterise the members of the best training schools, by reducing them to a dead level with others, which are far from possessing the same advantages. It is to the manifest benefit of every hospital to be able to adapt its training, certificating, and registering, to meet its own local requirements, and the nature of the duties the nurse may afterwards be called on to perform when she leaves the service of the hospital.

If your Committee's enquiries have not been fortunate enough to elicit a consensus of opinion with regard to collective registration, they have been eminently useful in showing the necessity of every hospital possessing a register of its own, formulated on a principle of easy reference comprising the length of the curriculum, with the individual attainments of each of its nurses. The certificates awarded, it is needless to say, should be verbatim copies of the terms employed in the register, whether the curriculum has extended over one, two, three, or more years. Such appears now to be the practice in the best training-schools, and it is hard to believe that it can be surpassed by a collective registration. The results of the inquiry all tend to confirm the opinion that it would be premature on the part of the Committee to recommend

to the Council a common basis on which a general system of registration for nurses should be framed, however advisable it may be for every hospital, being also a nurse-training institution, to amend and consolidate its own educational training in keeping with the improvements which of late years are well known to have been introduced into most establishments of this character.

Signed on behalf of the Joint Committee on Registration,  
J. C. STEELE, Chairman.

Adopted by the Council of the Hospitals Association,  
J. S. BRISTOWE, M.D., F.R.S.,  
28th March, 1888. President.

COPY OF CIRCULAR CONVEYING QUESTIONS REFERRED TO  
IN THE REPORT.

Guy's Hospital, 16th January, 1888.

To the Chairman of the House or Nursing Committee of—

Dear Sir,—In my capacity of Chairman of the Registration Committee of the Hospitals Association, I have been requested to confer with the representatives of the governing bodies and heads of the nursing departments of the various Nurse-training Schools in London and the provinces, to ascertain whether they are prepared to co-operate in the adoption of a scheme of registration for qualified nurses, embracing uniformity of training and management as regards (1) the length of the curriculum necessary before a nurse can be considered eligible for a certificate; (2) a syllabus of education; and (3) the character of the certificate which should be considered indicative of efficiency.

To obtain the fullest information on these points, as well as others, I have tabulated a series of questions on the next page, answers to which I will feel obliged by your filling in, with the assistance of those to whom the nursing in your hospital is entrusted. Please to forward the half-sheet of questions and answers to my address as above, with any remarks you may wish to make on the subject.—  
I am, dear Sir, yours faithfully,  
J. C. STEELE.

#### QUESTIONS.

1. Do you approve of a general system of registration for qualified nurses?
2. If so, do you desire that the register should be under the control of the General Medical Council, or under a separate organisation?
3. Should the Medical Council decline the proposal, would you prefer the register being established in conjunction with those hospitals which have nurse-training schools attached to them, or with the Hospitals Association, a company which possesses an office and a paid secretary?
4. State the length of time you consider a nurse should be employed in a hospital, infirmary, or in a nursing institution more or less connected with them, before she should be entitled to a certificate of efficiency, or, in other words, before having her name enrolled on the proposed register?
5. Is it the case in your hospital (apart from the practical instructions obtained in the hospital wards) that a nurse attends lectures in the hospital on subjects connected with her vocation, and that her knowledge is tested by examination? If not, do you think it desirable?
6. What do you consider the minimum amount of oral instruction that might be considered necessary in the training of a nurse, and that should be sufficient to meet the requirements of the proposed register?
7. What are the terms used in your certificate descriptive of a nurse's efficiency? For the purposes of uniformity, have you any objections to other terms being employed to meet the recommendations and requirements of the council to whom a scheme of registration may be entrusted?

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