

On the Training of Sick Nurses.*

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WITH Nursing in the hands of uneducated and (generally) unsteady old women, it is no wonder that little was thought of it, and that mothers and sisters would undergo any hardship, and submit to much strain on their feelings, rather than submit their dear ones to the ordeal of being so nursed. From that lowest condition of the Nursing profession we have advanced step by step as the years have glided by, till now we see Nurses everywhere honoured, their services sought by the highest, in social position, in the land, and retained by a wide and wise charity, for the aid of the poverty-stricken and afflicted.

It is not too much to say that the fully-trained sick Nurse is a *necessity* of our age. This is shown by the decline of the old idea that a near and dear relative can nurse the sick, best; and still more by the fact that the first condition insisted on by a surgeon, before he will undertake a delicate or dangerous operation, is that he should be provided with fully-trained Nurses on whom he can rely. There is, indeed, a danger of our appreciation of trained Nurses going too far, so that we may look on the Nurse as the one essential, to the exclusion even of diagnosis and treatment. The Nurse is *one* (the most valuable certainly, but only *one*) of the instruments in the hands of the physician or surgeon, and not all her ability, her care or skill, will render unnecessary the drugs of the physician or the knife of the surgeon.

The scheme for the training of Nurses which the managers of the Royal Infirmary have adopted, and which, to-day, enters on its second session, has been looked upon by many as too ambitious, and it may be at once conceded that it takes higher ground than any similar attempt (as far as we know) in the hospitals the wide world over. It has, however, been the aim of those interested in the scheme to teach *fully* all that is desirable for a Nurse to know, not to give a mere smattering of knowledge or surface veneer. Among those who think we are trying to teach too much, we do not number the pupils themselves, for our class, held in the spring, was quite equal to all that was demanded of it, and many members of the class were prepared to go considerably beyond the limits we had set. As far, also, as I have been able to gather the opinions of the most skilled and intelligent trained Nurses, there is a concensus as to our syllabus not includ-

ing anything which can be said with truth to be beyond the range of Nursing requirements. But, the objection has been stated to me by many candid friends, that we are so far educating women in medical work that they will want to go further, and become legally qualified medical women. No! the tendency of our scheme, I contend, will be to produce an exactly opposite result. Women have a sphere of work in nursing infinitely higher than that of the female medical practitioner—a work which they alone are fitted effectively to perform, for which their physique, mental attributes, and sympathies pre-eminently qualify them. If you place this work on a higher platform than it has hitherto held; if you allow scope for scientific study, and give the Nurses the opportunity of becoming, not merely instruments for the treatment of disease, but *conscious* instruments, fully appreciating all that is done through and by them, and partners in the cure effected by medical men, then, and then only, will the career be worthy of the highest female minds, and the ambition of such will, under such conditions, be better satisfied in the nursing sisterhood than in the medical profession.

One of the first requirements of our scheme is a sound preliminary education, and the managers have reserved to themselves the right to hold a preliminary examination should they think fit. We have seen imperfectly educated women make most excellent Nurses, but that is no reason why education should not make them even better. Bearing in my mind the numerous examples of such women who have worked under me, and whose earnest service I can never too warmly acknowledge, I can say positively that they were all at one in their regret that their education was not better, and in their appreciation of the high training which is the privilege of their more fortunate successors. In my period of residence as house surgeon in the Royal Infirmary, I mortally offended one good, honest soul, an Irish Bridget, who was night nurse in one of the wards under my charge, because I would not use my influence with the Matron to get her made a staff nurse; yet, she acknowledged that she could neither read or write, and that she was obliged to get the patients themselves to read the labels on the bottles, and inform her how and when the medicines were to be given! Fortunately, education has since that time become universal, and the time will not be long in coming when the uneducated Nurse will be as extinct as the Dodo or the Moa.

It has been arranged that the whole of the courses of lectures shall precede the commencement of probationary work in the hospital wards; this is a new departure, but, I am sure, it is a wise one. When the lectures were given during the residence in hospital, the time for such attendance had to be

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