

their Probationers might, if necessary, obtain a third year's training at one of the London or large Provincial Hospitals. This, however, is no longer practicable. The Matrons of five Hospitals declined to take the Probationers in their third year. Having carefully weighed the evidence placed before them, and being aware that the possession of such a certificate of a three years' training has become absolutely necessary for the success of a Nurse in her calling, the Committee came to the conclusion that for the welfare of the Hospital, and in the interest of the Nurses, it is necessary at once to extend the period of training to three years."

The Committee next report as to the rough ward work performed by the Probationers, which they consider is inadvisable, and they have therefore concluded that it is necessary to relieve the Probationers of a large amount of the domestic details now allotted to them. They, therefore, recommend that seven resident ward-maids should be appointed in future to do this work and all the necessary cleaning, in place of the five outside charwomen. Consequently, the Committee recommend that increased bedroom accommodation should be provided both for the servants and Probationers.

With regard to the financial effect of the proposed changes, the Committee point out that, at present, the number of the Probationers being trained in the Hospital is thirty; of whom fourteen are special Probationers, paying fees of £55 13s. for their first year, and £27 6s. for their second year; while 16 are Nurse-Probationers paying £32 5s. for the first year, and three guineas for the second. The total amount of fees paid to the Hospital during the past year has been £840. The present staff of Probationers has been found insufficient for the work, and during the past year £40 has been paid for additional help. The Committee recommend that in future the Special Probationers should pay £56 for the first year, £28 for the second, and £14 for the third; that the Nurse Probationers should pay for the first year, £28; for the second year, £12; and for the third year nothing; and that the total number of Probationers admitted should be thirty-six.

Working this out, they estimate that instead of £800 being the net receipts from the Nursing department, as last year, the total receipts in fees would be more than £1,000. After deducting the cost of board for the six extra Probationers, and interest on the capital sum spent on alterations and furniture, the net receipts would be £837. The excess of £37 over last year's receipts would, it is calculated, suffice to defray the extra cost of resident ward-maids, as against non-resident outside charwomen. Consequently, without the slightest financial loss to the Hospital funds, the Committee's suggestions would greatly improve the

Nursing department, would bring it to the level adopted by all other progressive schools, and to the standard of training which has become essential for Nurses at the present time; would provide more ward cleaning and greater comfort for the patients and for everyone concerned. To our minds, indeed, the scheme of the Committee appears to be eminently business-like; and, as it proposes to bring the school abreast of more modern methods, it certainly is eminently satisfactory.

The Nursing School of Addenbrooke's Hospital has held a position, thanks to the energy, knowledge and devotion of its well-known Matron, Miss CURETON, to which few other Hospitals in the provinces, with only two years' training, have attained; and it has always been a matter of surprise to the leaders of the Nursing profession, that this Hospital should have retained the old-fashioned and obsolete standard of the two years' education.

Now the mystery is explained. The Committee of investigation have definitely, as we have shown, proposed a three years' standard, and some most necessary improvements in the training of the Nurses. As might have been expected, the medical staff strongly support these recommendations; but how they were received by the Governors of Addenbrooke's Hospital, it will be our painful duty to describe, next week.

FATAL TIGHT-LACING.

For many years past medical men have protested against the custom of tight-lacing, and science has proved beyond the shadow of a doubt that rigidly-fitting corsets compress the chest and compress the abdomen without one advantage except in so far as it may appear to the wearer that the distortion of her figure—into something which more closely resembles an hour-glass, or a pillow tied in the middle, than any other objects in nature—can be regarded as a redeeming feature. It has been proved again and again that the compression of the chest prevents the proper expansion of the lungs, prevents, therefore, the complete oxidation of the blood, and thus must tend inevitably to the onset of disease; while the same compression causes the heart's action to become over-laboured, and so the victim to fashion suffers from palpitation and finally, in all probability, from organic heart disease. And there are few Museums in the country which do not possess specimens of livers with deep grooves on their surface, due to the pressure of tightly-fitting corsets. We seem to be arriving at somewhat more enlightened ideas on this matter; but, as if to remind us that tight-lacing is not yet obsolete, two sudden deaths which have recently attracted public notice were caused simply and solely through this insensate habit. An actress leaving the stage after a performance dropped down, and, crying out to be relieved from the fearful compression of her corset, died suddenly, from heart failure. And in the same way, a young lady, after dancing, suddenly fainted, and before her corset could be undone and the pressure on her heart relieved, she also expired.

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