

that she touches all the difficult points and sees where the difficulties are almost insurmountable. I propose to take each of those questions and deal with it, giving you not only my views, but those of the Matrons who answered the questions and Miss Nightingale's views at the same time.

The first question is "Are you in favour of a uniform curriculum for Nurses?" Most of the ladies who have answered the question say "Yes." One lady suggests "That it is only in this way that Nursing can be made a definite profession." Another lady answers, "A uniform curriculum for the first year; for the remaining time those showing special ability should have classes and lectures apart, embracing higher matters than can be assimilated by the average Nurse's brain." "There ought to be classes especially for those training for Superintendent or Sister." Again, another Matron would "have two curriculums, one for educated gentlewomen, and one for all other Nurses." Only two teachers of Nursing answered our paper, and one is distinctly worth listening to, as he has had many years' experience, both in teaching Nurses and students: "No," he says, "their education is so modern an institution, that sufficient experience has not been attained to decide which curriculum is best, and probably a variety of systems are of equal proficiency. The curriculum of Cambridge is different to that of Oxford to the great advantage of both and to the nation." Miss Nightingale says:—

"A certain uniformity of curriculum of education for Nurses is desirable, if we could assume that one Hospital is like another, that there exists already some uniform understanding as to what the essentials of training consist in, and as to what the organisation of Hospitals with regard to the Nursing service should be in order to make such training possible. But without some uniform basis to rest upon, is not any attempt to introduce or even to discuss uniformity of Education impracticable and meaningless? For is it not the fact that Hospitals do differ from each other in a high degree? Is there any general consensus of opinion as to Hospital and Nursing organisation—any uniform understanding of what training is—or even of the relative values of character and conduct, of technical ward training and theoretical instruction—or even of important details of administration, such as the numbers of Nurses to patients, still less of Hospital ward construction, and of mutual relations of Matron, Ward Sisters and Nurses and Probationers, and of Medical Staff, and Nursing Staff?"

She points out that at present there is no consensus of opinion as to Hospital and Nursing organisation, and therefore thinks its discussion is useless. Our present reason for discussing it is to help forward the day when there will be some consensus of opinion. Miss Nightingale, however, even while expressing her opinion as to the futility of the discussion, tells us that were it possible, she thinks it desirable. There is a great truth underlying the statement as to the benefit of a variety of systems. Reduce any form of effort to uniformity, and you remove much of the incentive to good work, and all emulation. In hospitals, as in all other institutions, individual competition is a strong mental stimulus, uniformity of curriculum would, at least, wound, if it did not kill it outright. What we want is, I think, a standard of excellence, with a uniform period of training; this would allow each school to work up to that standard as seemed best to it.

The second question is: "Are you in favour of a

preliminary course of education?" Again most of the ladies answered this in the affirmative. One Matron thinks "the question too indefinite to answer." Another says: "Undoubtedly, in order to raise the standard of education, and to enable the Nurse to grasp the meaning of the scientific part of her training." Another Matron avoids the question, saying: "It is certainly necessary that a Nurse should be a woman of what is usually termed good education." Another thinks it impracticable. A very few of the Matrons say "No." Our Medical Instructor says: "The better general education the Nurse can have the greater ultimate efficiency as a Nurse." I am entirely in favour of a preliminary course of education. The fact that a Nurse has to prepare to begin her course of training adds something to the seriousness of her intentions, and the amount of interest she has thrown into her study, as shown by the examination, helps the authorities to form some idea as to her earnestness. When the preliminary education can be carried on under the authority and supervision of the Matron it affords a much better opportunity for observation and selection.

The third question is: "What subjects should this preliminary course include?" This is a much more difficult question to answer, but it has been done practically by Mrs. Strong in connection with the Royal Infirmary, Glasgow; at the London Hospital, and by a central Board in Dublin. Let us hear what Mrs. Strong says: "Elementary anatomy, physiology and hygiene, clinical, surgical and medical nursing, and cooking." Miss Huxley, of Dublin, says nearly the same thing: "Hygiene, anatomy, physiology, pharmacy and cooking." Another lady suggests a very complete course; under the head of domestic economy she includes: (a) Cooking, with theory of food; (b) cleaning, dusting, sweeping, scrubbing, polishing, window cleaning, flushing of sinks, &c.; (c) care of linen; (d) personal cleanliness; (e) house construction, drainage, water supply, ventilation, &c.; (f) bandaging, with preparation of dressings and splints, weights and measures, cleaning of instruments and surgical appliances; (g) infectious diseases, isolation and disinfectants.

Another lady suggests reading, writing and spelling, as she says the "spelling of the average Nurse is shocking." Does she not mean the average woman? She also adds dispensing to her list. There seems no doubt in the minds of the Matrons who answered those questions that it would be a great boon to the Hospitals if the Nurses could enter their service with some knowledge of what is, after all, the foundation of all nursing work, the art of cleaning and clearness, and, if it is possible, that they should be taught to work with a little method, and the reason and aim of that work. As to anatomy, physiology and chemistry, it is well that the Nurse should have mastered the elements of all these, that during her first year her mind may be at liberty to acquire the technical knowledge of her profession.

The fourth question is: "Are you in favour of a preliminary examination?" In a great majority of Hospitals now the method of choosing Probationers is left entirely to the Matron, who forwards them the rules of the Hospital, has a personal interview with the candidate; if she likes her she engages her, gives her a paper to fill up, gets her references in, and the Probationer is ready to enter on her new duties. The Matron can have but little idea of her intelligence, her capacity, or her perseverance. How can she?

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