

special branches of nursing." Miss Hogg, of Haslar, suggests "The first six months, practical nursing work; the second, the same with lectures added by the Matron; the second year, less cleaning and dusting, but more nursing, and lectures from physicians and surgeons; the third year, to have more responsibility in the wards, and clinical lectures from physicians and surgeons."

On the questions 5 and 6, Miss Nightingale says: "It appears to me impossible to give any definite answer to question No. 5. Everything depends not on the time A. spends in the wards, but on what system her training is based. C. D. may be for years in one hospital and 'pick up' next to nothing. E. F. may be learning every day during three years' training, and learn most of all when she becomes a Ward Sister (head Nurse). Indeed, really efficient Ward Sisters will tell you the training is only to teach you to learn how to learn. Surely the length of time must depend on the system—on the powers of the trainers."

It would seem best that for the first year the Probationer, beginning as an Assistant Nurse in the wards, should be in a separate 'Home' in the Hospital under a trained 'Home Sister' (Mistress of Probationers), who can give individual attention to each, her health, character, temper, patience, orderliness, cleanliness, test her devotion and conduct—give moral as well as technical training. Besides this, she should give classes preparatory to and also following on the Professors' lectures, with the object of drilling these into them. The Probationer as Assistant Nurse in the wards should take two months or so in each category.

The second year might be spent in the wards entirely. She is transferred from the Probationers' Home to the Hospital. She is promoted to Night Nursing under a trained Night Superintendent, or has a post for special cases—called Extra Nurse—or to relieve a Staff Nurse. (Many experienced people think that the Lectures should not begin till the first six months after entrance are over—the reverse of the Preliminary Training Scheme—and that the Nurse should be enabled to attend Lectures during her second year at least.)

The third year she may take some more responsible work (if qualified in general respects, be *pro tem.* Sister during the holidays, &c., &c.).

But again, all this, especially the first year, must depend on the number of Probationers and of Nurses, &c. You cannot lay down a hard-and-fast rule. (All this includes a rough answer to No. 6.)

Again, if after the three years she becomes 'Sister' (Ward Head Nurse) she will find that she learns more than in all the three years before, provided she has learnt to learn. And she, as does the Staff Nurse and even the Probationer, learns so much by going round with the visiting Doctor.

It takes five years of being Sister to make a Sister, and—she will be learning all her life."

She seems to agree with the lady who thinks that "the term of training must vary with the Hospital and individual." It is true that some learn much more quickly than others, but this is true of all men as well as women, yet a student in Divinity, Medicine or Law must do his term of study, however acute he is. The clever fellow learns more, and at the end of the period of training, knows more and takes a higher place than the slow and stupid student; the lines of study and times are not laid down for the cleverest

students, but for those of average attainments. So with nursing; there may be a few women who, grasping all the opportunities which are offered them, learn more in a year than others do in two; but they are very much in the minority, and we do not legislate for them, but for the average Probationer, who takes all the three years offered her to train in, and would frequently be the better of further experience. I think it is well to recognise that the first year must be spent in learning the technical part of the work, which is enough for the mind to grasp in that time; cleaning, feeding, observation, dusting, washing, prevention of bed-sores, dressings, economy, have all to be taught during that first year, and if all that is mastered, we may be sure the Probationer has not wasted her time. It should, if possible, be divided between Medical and Surgical wards. The other two years will be spent in acquiring experience, and applying what she already knows. It might, I think, be spent thus: nine months in a Surgical, nine months in a Medical ward, and the rest of the time divided among special wards—Diphtheria, Obstetric or Ophthalmic.

The seventh question is: "Of what should the theoretical education of a Nurse consist during her term of training?" This gives opportunity for much variety in the answers sent; one is "Lectures on the principles of medicine, surgery and chemistry, with more particular attention being paid to bedside observation, and detail." Another, "higher anatomy and physiology, hygiene, the symptoms and complications of all the ordinary diseases." Another, "physiology and anatomy, and also a knowledge of sick cooking." Mrs. Strong says: "that a probationer should seek to apply the theoretical instruction given previous to her entering into the Wards, and not to be burdened with additional classes during her practical work." One medical instructor says: "A general explanation of the processes of disease, or injury which she has the opportunity of observing, and the relation of Nursing to common conditions and symptoms." Miss Nightingale says: "Theoretical education: this is most useful to interest the Nurses, and to interest the doctors in the real capacity of Nurses. But consult the doctors—what are 'twelve lectures on physiology' still less 'twelve lectures on anatomy,' and least of all 'twelve lectures on physiology and anatomy?' Still, the Nurse must have a threefold interest in her cases and her Nursing, in what she is about—an intellectual, a benevolent and a technical interest. And the professor's lectures, and the words of explanation from the Ward Sister, must give the intellectual interest. But let us not deceive ourselves. The proficiency of the Nurse, as a Nurse, is not shown by her proficiency in the examination. She may fail and not be the worse Nurse for that, nor the other Nurse who succeeds, the better Nurse for that.

What are the lectures for? To aim not to make the Nurses inferior medical practitioners, bacteriologists, &c., &c., but real observing Nurses, who understand what they are doing and why they are doing it; *what* indicates *what*—real practical Nurses, who are not only 'practising the blunders of their predecessors.' Above all, to teach common sense. We want them to be taught hygiene; why the patients came there into Hospital; the effects of bad conditions, foul air, foul water, foul earth, absence of light, uncleanness of person, clothes, rooms, surroundings.

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