

Annotations.

METROPOLITAN & NATIONAL NURSING ASSOCIATION.

THE annual meeting of this Association was recently held at Grosvenor House, by the permission of the Duke of Westminster. The chair was taken, in the absence of the Duke, by Mr. W. S. Caine, vice-chairman. The Chairman moved the adoption of the report, which was seconded by Rev. A. L. B. Peile, Master of St. Katherine's Hospital, Regent's Park. Dr. Oswald Browne, Dr. Dixon, Mr. F. D. Mocatta, and the Rev. D. Craven also addressed the meeting. More than one speaker emphasized the fact that while the work of the nurses was most onerous, and would be performed by them whether they were paid or not, yet the salaries received by them were quite inadequate remuneration for the work which they performed, and that no *man* would do the same amount of work for double the amount. The hope was expressed that the salaries of the nurses which were only £30 to £35 per annum, might in this year, when the association attained its majority, be considerably augmented. It was also stated that the demand for district nurses was greater than the association could supply, and the meeting was invited to urge suitable candidates to enrol themselves as members of the Metropolitan Association.

While cordially endorsing the opinion that a well-trained nurse is entitled to, and should receive, a liberal salary for work done, we feel constrained to comment on the fact that the training required of the nurses of this association does not entitle them to be described as "fully trained," and we are surprised that neither of the medical men who spoke drew attention to this. There is no doubt that the association has done, and is doing excellent work, but at the same time the standard of that work might, and would, be much raised if the committee acted upon the decision of the Select Committee of the House of Lords, that three years is the minimum period of training which entitles a nurse to be considered fully trained, and required this experience of its members. Doubtless when the association was founded twenty-one years ago, the training required was an adequate one, but, considering the enormous progress which nursing has made since that time, it would, in our opinion, be advisable for the governing body to require that its nurses should conform to modern standards. We very much doubt if a nurse, whose training has only been one year in hospital, and six months' district nursing under supervision, could command a salary of more than £30 or £35 per

annum in the open market. We think; therefore, that if the salaries of the nurses are to be raised, the attainment of the majority of the association might with advantage be marked by raising the period of training also. We are convinced that the association would have less difficulty in obtaining suitable candidates, and would add much to its prestige, besides being able with truth to describe its nurses as "fully trained" if it adopted this course.

THE USE OF THE BREAK.

Two questions, with regard to the etiquette which should be observed by nurses who cycle, have recently been brought before us. The first is: Is it professional, or in good taste, for a nurse who is requested to call upon a doctor, to receive his instructions concerning a patient, whom she is to nurse for him, to cycle up to his door in Harley Street, and appear in his consulting room in approved cycling costume? We are of opinion that it is distinctly unprofessional. We are not one of those who think that cycling is at all times out of place for nurses; on the contrary, we believe that as a health-giving and enjoyable recreation, they are wise to indulge in it; but when on duty, or when interviewing a medical man with regard to a case, in our judgment it proves her lack of perception of the fitness of things, and is wanting in good taste, if a nurse appear in *any* costume except that which she has adopted as her professional one. Another question is: Is it permissible for a nurse, going to a private case, to arrive with a bicycle as part of her personal baggage? This question was recently discussed by the St. John's House Debating Society, and the unanimous opinion was that such a procedure would be distinctly unseemly. We believe that this decision was entirely right, and that a little reflection would make this obvious to the most heedless and unthinking. In the first place many persons still object to cycling for women, and it would not be right while staying in a house where cycling was objected to, to indulge in it, even though the objection appeared to be somewhat unreasonable.

Secondly, most cases to which a nurse is sent are in the acute stage when she first arrives, and it would strike the relatives as incongruous, and would not inspire them with confidence in the nurse's devotion to her work, if her "machine" appeared upon the top of the four-wheeler which brought her to the door.

Thirdly, it is quite impossible to know before arriving whether there is accommodation for a bicycle, or whether it would not be very inconvenient to stow one away. Therefore, on all these counts let the bicycle be left behind. I

[previous page](#)

[next page](#)