

form of examination, certification, and State registration. First, in regard to the general education of the Probationer. She had always held that a woman could not be too highly educated, theoretically, and, indeed, in every way, to make the best nurse. The highest type of nurse was wanted, therefore they must have the highest type of education, not necessarily that higher education necessary for the teaching profession, but the complete education that goes to make the thoroughly useful and cultured woman. Miss Dock had brought out the fact that in hospitals twenty years ago, the pupil either learned or did not learn according to her capacity for self-instruction. A probationer was thrown into a hospital; she learned by observation, or came out just as ignorant as she went in. The educated women placed in English hospitals as Matrons and teachers of nursing had inaugurated a curriculum as good, or better, than that in any country in the world; but though enormous strides had been made in the education of Nurses in the last twenty years, there was much more to be done in the future. During the last few years, the question of the preliminary professional training of Nurses had been discussed, and in one instance effected. Mrs. Strong, Matron of the Royal Infirmary, Glasgow, was the first to suggest this preliminary training, but the system had been elaborated by the authorities of the London Hospital, to which was attached a Preliminary College for Nurses, where they were taught practical details of nursing, and cooking, before entering the wards. This Nursing College was on the same principle as that for students in the Medical Schools, and stood out as an excellent example for every other Hospital in the kingdom. Like Miss Dock, Mrs. Bedford Fenwick was prepared to prophesy a little, and hoped to see in the next decade, either a public College of Nursing in London, or smaller Colleges in connection with the large Hospitals. These Colleges should be self-supporting, and not dependent on the public funds. In every profession it was right that students should pay in money for the education they received, and she could not see why the Nursing Profession alone should be educated on charity. The age of the probationer had very little to do with her capacity for being a trained nurse; it depended entirely on the character of the woman; there were plenty of able women of twenty-one, plenty of foolish and flighty ones of forty. After leaving school, a woman should gain a knowledge of public work and a knowledge of the world, so as to widen her outlook on life, and extend her sympathies before entering the somewhat conventional sphere of a hospital. Many women could not afford to wait until they were twenty-three or twenty-four, and a great deal of material that might make useful nurses was diverted, by the strict age limit, into other sources. With regard to the educational curriculum in the hospital wards there was no doubt that a very efficient education was necessary. Twenty years ago the whole system was very different; but now a large majority of schools had adopted a three years system of training, and, personally, she considered that quite short enough. It must be taken into consideration that surgery, especially, was a very progressive science, and if nurses were to keep pace with the times and take their part as the surgeon's efficient assistants, they must have a progressive curriculum of education. They must not even think three years an unalterable term, the practical skill

required might in the future demand a further extension of training in special branches of nursing. As to the examination of nurses: the teacher should not be the examiner, because, although the majority of medical men and Matrons were just in connection with these examinations, the whole test was far too circumscribed to be of any essential value; therefore she advocated public examination by an unbiassed Board of Medical men and Matrons, who alone should be empowered to award certificates. In speaking about the training of nurses, people were apt to call medical lecturers the trainers. They were not. The Matrons, Sisters, and Staff Nurses in the wards were the real trainers of nurses. The valuable lectures, contributed to the curriculum of the education of nurses by medical men, taught the theory and practice of elementary medicine and surgery, but medical lecturers did not and could not teach nursing, because they were not nurses themselves. As to the last point—State Registration. All present knew there had been a very long and animated controversy on this subject in England, and it was not at all surprising, because the giving of legal status to nurses, or to women in any profession, was a forward and progressive movement, and one which, like the enfranchisement of women, did not commend itself to those persons who had judged for so long what was best for women. But it was only just that after they had gone through a laborious curriculum, and proved themselves competent, that nurses should have some stamp put upon their qualifications and knowledge. At present, anyone could put on a cap and apron, or a cloak and bonnet, and dub herself a trained nurse; therefore it was for the protection both of the trained nurse and of her patient that some hall-mark should be put upon those nurses who had worked for three years, and been publicly examined and certificated.

MISS TODD asked whether training given in special hospitals, other than schools of midwifery, would be recognised as part of the nurses' training?

MRS. NEILL replied that this would be so. In New Zealand, they had no special hospitals.

MISS TODD explained that a small special institution could not afford to pay thoroughly trained nurses; it could take probationers and train them on its own particular lines; but that training counted for nothing, and when those probationers went into general hospitals they had to begin again at the very beginning.

HON. MAUDE STANLEY said she had had a somewhat large experience of nurses, having been connected for some years with the Metropolitan Asylums Board, that had several hospitals for fever and diphtheria. During that time, she had had much to do with the nursing profession and training of nurses. About 1,000 nurses had been under the Board since she had been connected with it, and, generally speaking, she thought they were wonderful in their care and patience, and the skill with which they nursed fever and diphtheria. They had three grades of Nurses: the Trained or Charge Nurses, who must have had three years' training in a general hospital, or one year in a general hospital and two under the Metropolitan Asylums Board; the First Assistant Nurses, who must have had one year's training in a general hospital; and Second Assistant Nurses, who had no general hospital training, but were trained by the charge nurses, and shared the lectures given by doctors and Matron during the time they were nursing. The change had been very great, for when she came on to the Board, nurses were not

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