

refer to are entirely touching on such *purely domestic matters* as bed-making, washing patients, ventilation, reporting condition of patient to the doctor, taking temperatures, arrangement of sick room, attention to diet, adherence to the orders of the medical man, etc. Are not these matters which every woman should know, but which, unhappily, many women do not know? And is it possible that you honestly think that hospital nurses are the only beings in existence who are capable of understanding their need?

We teachers happily *draw a distinct line* between "home" nursing and "trained" nursing. It is as much our work to teach the need of trained nurses in serious cases as to speak of the need of good ventilation. You say there is nothing to prevent teachers from practising as trained nurses. Yes, there are two good reasons why. 1. They possess commonsense, and (2.) they have a professional standing of their own, and the call for teachers is greater than the supply, so that they have no need to trespass on the rights of another calling.

Most of the teachers of the London School Board—in fact all qualified teachers—hold the Certificate of the Government Board of Education, many Science and Art Certificates of the South Kensington Department, and often *University Degrees*. They have been trained in a special college for teachers, they work short hours, and get good salaries, and are sufficiently educated to know that a *trained teacher* has a better status than an *untrained nurse*.

Again, if your argument holds good that teachers need a nursing certificate to teach "Home" nursing, then teachers may reasonably demand that a nurse who wishes to teach, should possess *special training as a teacher*; the training that is demanded of us! For teachers, are not *born*, like nurses they are *made*.

I trust, with your usual fairness, you will publish this letter; I speak with the convictions of a person who knows both sides of the question, and I should like to add with reference to your remark on the need of State Registration that there are also other needs before the Public will see the difference between one nurse and another, viz.:—

1. Uniformity of training.
2. *Public examinations of Nurses.*

I am, Dear Madam, yours faithfully,

A TEACHER IN A BOARD SCHOOL.

[We cannot support our correspondent's assertion that bed-making (for the sick), washing patients, ventilation, reporting condition of patient to the doctor, taking temperatures, arrangement of sick room, attention to diet, adherence to the orders of the medical man, are purely domestic matters. The right method of their performance is acquired from practical instruction at the bedside, and not from theoretical lectures, and we "honestly think" that as teachers have to learn their work in colleges where, under supervision, they are taught the best methods of imparting instruction, and have under supervision to give practical lessons, so nursing can only be efficiently learnt in schools of nursing, where, under trained supervision, the pupils have to perform the duties which subsequently devolve upon them as nurses. Our correspondent "draws a distinct line" between "Home" nursing and "trained" nursing, but in point of fact this line does not exist, and we can recognise no such distinction. We are asked to believe that "common sense" and the fact that the

demand for teachers is "greater than the supply" will prevent Board School teachers from "trespassing on the rights of another calling." Against this assumption we must set the fact that the common sense of these teachers has not in the present instance prevented this trespass on the rights of another calling. Further, as a "trained teacher has a better status than an untrained nurse," so a "trained nurse" has a better status in the sick room than a teacher, even though that teacher be an M.A. of London University.

While we consider special training in the art of teaching a very desirable acquirement in a trained nurse, we must point out that practical instruction on known subjects can be effectively given by trained nurses, while no amount of teaching power is of use if there is ignorance of the subject to be taught.

We are glad to note that our correspondent supports the policy of this journal in pleading for uniformity of training, and public examinations for nursing diplomas.—ED.]

A PROFESSIONAL OBLIGATION.

To the Editor of the "Nursing Record."

DEAR MADAM,—May I draw the attention of your readers, more especially that of Superintendents of Nurse Training Schools, to what seems to me to be a very serious defect in the organization of our training schools, and one which by no means receives the attention it deserves. I mean the lack of training in obstetric nursing. I am not concerned at the present moment to discuss what precisely that training should include, whether an obstetric nurse should be taught the elements of midwifery, or whether her education should be limited to enabling her to give skilled attention to the mother and child after delivery. I leave this and other kindred points to be settled in other places at other seasons, but this I do assert, that we should not consider we have done our duty as trainers of nurses until we have taught them how to attend to the newly made mother and newly born child, and how to wash, dress, and feed the latter. If nurses are to be the help-meets of the science of medicine they must be qualified to render aid to it in the three branches of medical, surgical, and obstetric work. Yet, how many women who are well qualified in the two former branches are absolutely ignorant of the last, a superficial instruction in gynæcological nursing being the utmost most of us receive during our training.

Set the average trained nurse down to wash a baby, and she will no more know what to do and how to set about it than the rawest pro. Yet if she cannot wash a healthy infant what sort of care can she give to a sick one when she is placed in charge of it?

Again, I feel most strongly that, so long as we make no attempt to organise obstetric nursing on an efficient basis, we trained nurses cannot object—as we should do—to the inefficient smattering of knowledge given in six or eight weeks to women in Lying-in Homes, upon which they obtain a certificate, and go out monthly nursing. Monthly nurses the public must have; and in my view the obligation is incumbent upon us, as a profession, to see that they can obtain competent ones. I feel like a voice crying in the wilderness, but so strong are my views on this subject that I should like to urge them in season and out of season, until from sheer weariness of the subject I compel attention.

Yours faithfully, OBSTETRIC NURSE.

[previous page](#)

[next page](#)