

liness, as prophylactic measures against disease, was greatly urged, and the difficulties of doing so discussed. None of the speakers seemed to realise how much is already done in this way by our magnificent organizations of district and parish nurses, whose work brings them into touch with the poor in their very homes.

Again, in the Medical Section, although it may be noted with pleasure that Dr. Symes Thompson showed a high appreciation of the value of skilled nursing in the treatment of phthisis, I ought to report that Dr. Jane Walker displayed a complete inability to understand that nursing in Sanatoria requires any training at all, the term "nurse" in her opinion being apparently synonymous with "attendant." She was of opinion that patients might be well employed in "nursing" their fellows, thus putting the nursing in Sanatoria on the same level as that in the few unreformed Poor Law Infirmarys where pauper help is still employed.

In addition, her remarks also demonstrated, to those with any practical knowledge of Institution Life, the absurdity of the Medical Officer of a Hospital or Sanatorium attempting to manage its domestic affairs, of which he or she is totally ignorant.

Dr. J. Walker, advocated the performance of nearly all the domestic duties by the patients (who are supposed to be undergoing a treatment of rest out-of-doors), and she suggested that the present system of having wards, etc., tidy by certain hours is unnecessary and savours of red tape!

This lady's expression of her ideas was the more unfortunate in that she was the only lady present at the Congress who read a paper, and she poses as an authority on open-air treatment for the poor.

The chief feature by which this Congress will be remembered was Dr. Koch's pronouncement of the uncertainty of the transmission of bovine tuberculosis from animals to man.

The Congress as a body refused to receive the statement as proved until further experiments have demonstrated its truth. In addition it was recommended that no slackening of precautions, as the sterilization of milk or the inspection of meat, should be looked upon as yet justified.

In conclusion, I beg to draw the attention of the Council to the fact that very few nurses attended the meetings of the Congress either as delegates of nursing societies, representatives of training schools, or in a private capacity.

Possibly this may be accounted for in some degree by the exclusion of the profession from the discussions of the Congress rather than from their unorganized condition as a body of working women, or from lack of interest in the deliberations, which very largely concerned them as nurses, and I venture to think that the carrying out of the various resolutions passed by the Congress must very largely depend upon the loyal co-operation of members of the Nursing Profession.

HELEN TODD,

Delegate of the Matrons' Council.

A vote of thanks was unanimously passed to Miss Todd, thanking her for acting as the Delegate of the Council, and for her excellent report of the proceedings, and it was agreed that it be placed upon the minutes.

MARGARET BREAY, *Hon. Sec.*

Nursing Progress in New Zealand.

HOSPITAL NURSES' REGISTRATION.

ANALYSIS.

Title.—1. Short title; 2. Interpretation; 3. Register of Nurses; 4. Who may be registered; 5. Training necessary; 6. Certificate and badge of registration; 7. Fraudulent registration; 8. Registration may be cancelled for misconduct; 9. Application of fees, &c.; 10. Appointment of Examiners. Regulations.

A BILL INTITULED

An Act to provide for the Registration of Hospital Trained Nurses in New Zealand.

BE IT ENACTED by the General Assembly of New Zealand in Parliament assembled, and by the authority of the same, as follows:—

SHORT TITLE.

1. The Short Title of this Act is "The Hospital Nurses Registration Act, 1901."

INTERPRETATION.

2. In this Act, unless inconsistent with the context,—

"Hospital" means a public hospital within the meaning of "The Hospitals and Charitable Institutions Act, 1885, Amendment Act, 1886";

"Minister" means the Minister for the time being in charge of Hospitals;

"Registrar" means the Inspector-General of Hospitals in New Zealand.

REGISTER OF NURSES.

3. (1.) The Registrar shall from time to time cause the names of all duly qualified nurses to be registered in a book to be kept by him at his office for that purpose, and to be called "The Hospital Nurses Register of New Zealand."

(2.) Such register shall show the name and address and qualifications of each nurse entered therein, and where and when she was trained.

WHO MAY BE REGISTERED.

4. (1.) Every person who, on the passing of this Act, holds a certificate of three consecutive years' training as a nurse in a hospital, and proves that during her training she received systematic instruction in theoretical and practical nursing from the medical officer and matron (the matron herself being a certificated nurse), is entitled to registration on payment of a fee of *ten* shillings, and on application to the Registrar on or before the thirtieth day of June, one thousand nine hundred and *two*.

(2.) Every person who, on the passing of this Act, has had four consecutive years' training as a nurse in a hospital, and passes an examination in theoretical and practical nursing by examiners appointed by the Governor under this Act, is

[previous page](#)

[next page](#)